

**Counting the Child Care Workforce:
A Catalog of State Data Sources to
Quantify and Describe Child
Caregivers in the Fifty States and the
District of Columbia**

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Definitions

Because concepts and definitions regarding the child care workforce are often inconsistent, we are explicitly defining the terms relevant to this report:

Caregiver: a person responsible for another person's child on an ongoing, regular basis (as opposed to a sporadic babysitting arrangement)

Paid Caregiver: a person who is paid to care for another person's child on an ongoing, regular basis

Facility: setting in which the caregiver works, such as a center or home

Staff: individuals working for a child care facility; may include caregivers and non-caregivers such as accountants or maintenance personnel (*only paid caregivers are included in our workforce estimates*)

Provider: an organization engaged in offering child care services to the public; may be an organization or individual, licensed or not, for profit or not for profit, and may include a self-employed individual and/or other staff.

For our workforce estimation purposes, we include the following four categories of paid caregivers, which we feel provide valuable distinctions between facility type and relationship to the child:

Family Child Care Provider: a non-relative paid caregiver offering child care in her/his home, including the proprietor and, particularly in programs serving larger numbers of children, an assistant.

Paid Relative: a relative, typically a grandparent, aunt or uncle, who is paid to offer care in her/his home or in the child's home.

Other In-Home Caregivers: paid, non-relative providers, such as nannies, offering care in the child's home.

We have attempted to develop a workable set of definitions for care of children age birth through five. Similar definitions for care of school-age children pose conceptual issues – such as appropriate treatment of recreational programs or music/dance lessons -- that must be analyzed and addressed.

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Introduction

During the early years of development, children depend on adult caregivers to meet their needs. A stable, bonded relationship with a caregiver is central to the quality of a child's early learning experiences. To meet the needs of individual children, caregivers need professional training and expertise, compensation commensurate with their level of education and qualifications, and continuing educational opportunities to stay current with recent research.

Under federal and state initiatives to enhance the quality of early learning environments, states have the funding and authority to support caregivers with educational opportunities, compensation, and benefits. However, federal and state governments lack reliable data on the number of caregivers, especially with breakdowns in the following categories: a) age group of the children in their care, b) type of child care setting in which they work, c) relationship to children, and d) educational qualifications. State administrators have indicated that they must have reliable estimates of the number of paid caregivers in various settings if they are to plan programs that meet the needs of children in their states. For example, a state could implement an initiative to provide universal Pre-Kindergarten programs with requirements that caregivers must have at least a Bachelor's degree with a specialization in Early Childhood Education. To adequately budget for such an initiative, the state would need the current number of caregivers who have earned this degree to forecast the number of caregivers who need additional courses. Similarly, a state seeking strategies to

support paid caregivers who are family, friends, or neighbors would need data to quantify this informal workforce and to identify the services they desire.

In this report, the Human Services Policy Center (HSPC) has described and summarized sources of child care workforce data from all states and the District of Columbia. We reviewed the methods and findings of workforce studies, market rate studies, and workforce databases to profile each state's most current workforce data. From this catalog of data resources, state and federal administrators can learn about the range of methods currently in use to count and describe the child care workforce. We have highlighted strategies for enhancing federal and state data collection on the early childhood workforce to provide state and federal administrators with uniform data for planning purposes.

In a previous report, the Human Services Policy Center in partnership with the Center for the Child Care Workforce (CCW) described the development of a statistical modeling approach to make our demand-based method applicable to estimate the size of the child care workforce at the state level. In an attempt to validate and refine this methodology, HSPC plans to compare the results of this method to estimates derived from selected workforce data in several states. With this purpose in mind, HSPC has conducted a review of available state data to select the best basis for comparison for our companion report.¹

Context of State Workforce Data

The Child Care Bureau and state child care agencies collect a variety of workforce-related data. However, no national source provides reliable information on the number of caregivers caring for infants, toddlers, and preschoolers in the typical child care settings (centers, family child care homes, paid relatives, and other home-based providers) by job positions typical to the occupation.

The U.S. Department of Labor's Bureau of Labor Statistics (BLS), the primary source of data on the workforce, collects data for each occupation – nationally and for each state. Due to some major definitional problems, however, the data collected by the BLS on the child care workforce is inadequate. The BLS collects totals for two positions of child care center staff – “preschool teacher” and “child care worker” – and does not consider distinctions between the more typical job positions of “administrative director,” “teacher director,” “teacher,” and “assistant teacher.” Because the Department of Labor does not collect data on the self-employed, family child care homes are not tracked. Domestic workers are also excluded. Finally, since many paid relatives do not self-identify as child care workers, they are also not included in BLS data.

While the U.S. Census Bureau's Current Population Survey (CPS) reports the number of persons caring for children in their own homes as a business, CPS data do not distinguish among caregivers who are paid or unpaid, relatives or non-relatives. Furthermore, the CPS data mix kindergarten teachers with

preschool teachers, thus including workers (kindergarten teachers) who may not be considered to be part of the early care and education workforce.

Many states collect data on child caregivers at their own discretion, with no consistent guidelines or definitions. As a context for our subsequent review of workforce data, we outline the general categories or types of data collected at the state level.

- *Child Care Regulatory Agency Reports.* These agencies generally compile information on the total number of licensed centers and family child care homes and the number of clients they are licensed to serve. However, they rarely compile data on the number or characteristics of caregivers and other staff in these facilities, or on children actually served. Not all enrollment and/or capacity data provide breakdowns by children's age groups. Finally, a few states have not created computerized data bases from the individual facility licensing record.
- *Market Rate Surveys.* All states are required to survey a representative sample of licensed centers and family child care homes to determine child care market rates – a factor they are to consider when setting reimbursement rates for subsidies funded by the Child Care Development Fund (CCDF). However, few states ask providers about the number or qualifications of their staff when asking about rates.
- *State Resource and Referral Data Collection.* Child care resource and referral agencies use some common software for data collection on families, facilities, and training such as NACCRAware (from the National Association of Child Care Resource and Referral Agencies). Agencies vary greatly on the degree to which they actively update the state licensed provider files or obtain information about license-exempt providers. No national data source provides information on the number of caregivers by job title and age group of the children.
- *Contracts for Research on the Workforce.* To plan new initiatives for caregivers, states and local governments frequently contract for research by local universities or research institutes for workforce studies, market rate studies, or economic impact studies. Generally, the research fulfills the particular needs of the initiative, which could be descriptive data on child care providers entering a new career development system or an

economic development strategy that relies on the availability of child care providers. Not all research methods or products result in data appropriate to ascertain the number of caregivers.

- *Research on Sub-State Regions.* In certain regions, child caregiver salary or workforce studies have been conducted regularly to provide reliable data on the number of paid caregivers and their qualifications in that city/ county/ section of the state. These data cannot be translated to represent the entire state.
- *Regional Research Collaboratives.* In a few regions, states have collaborated on data collection.
 - For example, the NEW Partners (New England Workforce Partners for Early Care and Education) produced a data resource guide to briefly describe existing data sources on subjects related to the child care workforce in the New England States.²
 - The Midwest Child Care Research Consortium (a collaboration of universities in Iowa, Kansas, Missouri, and Nebraska), and the Gallup Organization used phone surveys and observations of providers to measure child care quality in those states, including observing a representative sample of caregivers.³

² New England Workforce Partners for Early Care and Education (NEW Partners), *New England Early Care and Education Workforce Data Resource Guide*, Institute for Child and Family Policy, Edmund S. Muskie School of Public Service, University of Southern Maine, 2002.

³ Draft report from the Gallup Organization and the Center for Children, Families, and the Law, University of Nebraska, & The Midwest Child Care Research Consortium (2002). *Child Care Quality and Workforce Characteristics in Four Midwestern States*.

- *Registries:*
 - a. *Certification.* In contrast to certification of K-12 teachers, states do not require child care teachers and family child care providers to have a state-regulated professional certificate. Therefore, states do not have common data on the number of caregivers of children from birth to age 5.
 - b. *Annual Training Requirements and Registries.* While certification may not be required, certain states require all child caregivers working in licensed settings to complete annual continuing education or training. In addition, numerous states have developed computer-based registries to document child caregivers' degrees, certificates, and continuing education. However, most of these registries are voluntary, and therefore provide information on a subset of all child care staff, with no assurance that it is representative of the population of caregivers.

In this report, we focus in particular on the availability of data on the number of *paid* caregivers for children from birth to five years of age. Within this definition, we include paid caregivers in regulated facilities (licensed child care centers and family child care homes and relatives receiving federal subsidies) and unregulated facilities (family, friends, neighbors, and nannies caring for the child either in the caregiver's home or the child's home), dividing workers into the four categories we described earlier, regardless of regulation status: child care center providers, family child care providers, paid relatives, paid other home-based providers

We do not imply that data on the number of caregivers who care for only school-age children is of less importance to states. However, school-age care, broadly defined, includes a wide range of "caregivers," which could include family child caregivers, team coaches, music teachers, and the parent of a

classmate. Since the child care field has yet to conceptualize clear categories for school age care, we have not attempted to quantify them in our research and statistical estimates at this time. For this reason, states have collected less data on the school-age workforce at this time than on the early care workforce. However, many of the state workforce studies we review include providers caring for both birth to five and school-age children since they are difficult to separate and children are often in mixed-age settings.

Furthermore, for this research we sort caregivers by the type of facility in which they work (child care center, family child care home, the child's home, and other out-of-home). As a result, our definition of "caregiver" represents the diversity of care types for children from birth to age five ranging from unregulated child care by a paid relative to regulated, formal programs.

Overview of the Workforce Estimation Project

In a prior project intended to facilitate planning at the national and state levels, the Human Services Policy Center (HSPC) and the Center for the Child Care Workforce (CCW) developed a method to estimate the size of the child care workforce caring for children age birth to five. In the current project, the Human Services Policy Center is using the previously developed method and statistical models to prepare estimates for seven states, which we will compare to selected workforce data from these states in a companion report. The Child Care

Bureau, Administration for Children and Families has provided financial support for both projects.

Phase One. Developing Demand-Based Method for National Estimates. In the first year, HSPC and the Center for the Child Care Workforce used household demand data from the National Household Education Survey (NHES-99, National Center for Educational Statistics) to estimate the size of the U.S. child care workforce caring for children age birth to five. We developed a method based on parents' responses to several survey questions about their use of child care. Parents indicated (a) the type of child care arrangement used, if any (child care center, family child care home, or care by a relative or non-relative), b) the number of hours per week in each arrangement, c) the number of adults and children in the room for each type of care, and d) whether the care was in a center-type setting, was paid or unpaid, in-home or out-of-home.⁴

From these variables of parent use of child care, we developed a method that allows us to calculate the number of paid and unpaid adults in the population caring for these children at a given point in time. We used secondary sources on the supply and characteristics of child caregivers to convert these point-in-time estimates to estimates of the *annual* number of caregivers by position (taking into account occupational turnover). Because the survey data defined the ages of the children in care, we could also estimate the number of caregivers working with

⁴ For a full description, please refer to the summary report of the project's first year. *Estimating the Size and Components of the U.S. Child Care Workforce and Caregiving Population: Key Findings from the*

each age group (infant, toddler, preschooler) and in each type of arrangement (child care center, family child care home, paid relative, paid non-relative). We also produced estimates for unpaid relative and non-relative care. This approach also allows us to estimate a range of the number of adults caring for children with particular characteristics (such as ethnicity, disabilities, and limited English proficiency). When we compared our national estimate to existing federal data, we found that the federal data significantly underreported several aspects of the child care workforce, especially paid relatives.⁵

Phase Two. In the second year of the project, we developed statistical models for producing state-level estimates. The demand-based method described above requires representative state-level estimates of child care use patterns, including hours in each type of care and child:adult ratios. Such data are available only for approximately one-third of the states.

For states without adequate demand data, the statistical models allow us to predict the key aspects of child care utilization required for our workforce estimation model, taking into account variation among states that might affect child care use (including demographic, labor, and policy variables). Once we generated estimates of child care use for each state, we could apply the same

Child Care Workforce Estimate (Preliminary Findings), (Center for the Child Care Workforce and Human Services Policy Center, May 2002).

⁵ Ibid.

demand-based method as used nationally to estimate the number of child care providers by age group and type of arrangement.⁶

Phase Three. For the current project, the Human Services Policy Center will compare demand-based estimates for seven states to the most appropriate available data on the size of the paid child care workforce in those states. This process will allow us to compare and verify results from our statistical model with the best available state workforce data. The first step in this current year of research has been to research, compile, and evaluate all sources of workforce data available at the state level. We summarize those results in this report.

Method for Reviewing State Sources of Child Care Workforce Data

We sent a request by e-mail to an initial contact list of state child care agencies (either regulatory or policy) representing all states and the District of Columbia. We requested information on any sources of data that included a sample of paid child caregivers of children from birth to age 5 in child care centers, family child care homes, and in-home or other out-of-home settings (paid relatives, paid non-relatives). We followed up with phone calls to contacts who had not replied by e-mail. From these phone calls and subsequent e-mail exchanges, we received referrals and augmented our contact list to reach at least one contact in each state and the District of Columbia. The expanded contact list

⁶ For a full description of the statistical model, please refer to the summary report from the second year of the project, *Estimating the Size and Components of the Child Care Workforce at the State*

included representatives of state agencies (state child care coordinators; departments of public health, human services, education, etc.), representatives of state child care resource and referral networks, researchers in university-based institutes, National Child Care Information Center (NCCIC) Technical Assistance Experts, and representatives of career development databases. From all these contacts, we located, reviewed, and summarized the research and databases, including their sampling frames, methods, and results.

Once we summarized the information, we evaluated each data source for its quality and suitability for use in estimating the number of paid caregivers for different types of child care arrangements: child care centers, family child care, in-home care, and other out-of-home settings. The sampling populations for each study varied by state, with some states focusing on one type of care and other states researching multiple settings. To evaluate whether the data were appropriate for estimating the size of the workforce, we used the following set of criteria.

1. *Type of Data.* We first determined the method of data collection and the type of data (workforce studies, market rate studies, economic impact studies) or databases (regulatory, resource and referral, or training registry). We note that all such data sources, derived from counting or surveying provider entities, if not drawn from a general population survey, suffer an inherent weakness. The size of the universe is unknown

and potentially unknowable, since there are many unlicensed or license exempt providers not included in the data bases from which the sample is drawn.

2. *Sampling Population.* We carefully reviewed the population from which the sample was drawn, such as lists of all licensed facilities, registries from state or regional child care resource and referral agencies, directory of Head Start programs, or state training registries. We interviewed agency personnel to determine the method and frequency used to update and clean these databases. This required determining whether the responses could be generalized to the population universe by ascertaining whether the sampling population was a current, complete list of the population of caregivers.
3. *Relation of Sample to Universe of All Child Caregivers.* We determined whether the sample was representative of the particular group of caregivers or if the sample or responses were characterized by any kind of systematic bias. This process forced us to look carefully at the response rates of the existing data to identify possible biases. We found a wide range of survey response rates, from about 20 percent to more than 90 percent. We made a decision to use data from surveys with response rates of approximately 50 percent, although arbitrary, ensures a reasonable chance that the sampling frame is representative of the population while

still meeting our goal of selecting a number of states to use as a comparison. For states where the response rate was sufficient for one type of care but insufficient for others, we will use data regarding only one type of care.

4. *Occupation of child caregiver.* As described in the Estimation Project's preliminary report, the demand-based estimates apply to the occupations of caregivers of children from birth to 5 years of age, not to the full economic sector of child care (such as administrative, janitorial, or other type of staff). In addition, the data must be able to identify the number of paid caregivers working in typical settings: child care centers, family child care homes, in-home or other out-of-home settings. We limited our study to the child care workforce, which implies *paid* labor, and did not include the entire caregiving population, which is both paid and unpaid. Thus, we did not collect data on unpaid caregivers (family, friends, and neighbors providing uncompensated care on a regular basis) or other support positions (clerical staff, cooks, janitors).
5. *Breakdown by Type of Setting.* For states that collected workforce data for multiple types of child care settings, we noted whether those data applied to the number of caregivers in child care centers, family child care homes, or, in just a few instances, other types of providers.

6. *Point-in-time or Annual Number.* We also determined whether the sample represented the number of caregivers from a particular point in time or an annual number of caregivers (including turnover).
7. *Caregivers of children from birth through 5 years of age.* We determined whether the existing state data could differentiate between programs by the ages of children served. We selected workforce studies focusing on paid caregivers serving children birth to five, but, as noted previously, these caregivers may also serve school-age children. However, we excluded workforce studies which focused on caregivers of exclusively school-age children (before- and after-school programs, sports programs, summer camps, etc.)

We also outlined other descriptive details.

1. *Breakdown by Position.* We were interested in whether the workforce estimates allowed caregivers to be broken down by position, such as family child care owner, family child care assistant, center director, lead teacher, teacher, teacher assistant, and aide.
2. *Full-time and Part-Time Staff.* We also noted whether the numbers of full-time and part-time staff were identified in any workforce counts.
3. *Background Characteristics of Providers.* We determined whether the data included background information on caregivers such as the highest educational level attained, specific education/ training in early childhood education, and demographic characteristics (age, racial background, etc.)

Findings

In this section, we summarize all the child care workforce data and research studies that we located. While we made every effort to ensure that we reached appropriate contacts in all states, we do not guarantee that this is a complete description of all data on the early childhood workforce. We categorized states into three groups: (A) states with data appropriate for estimating the size of the paid workforce caring for children from birth to age 5 (16 states); (B) states with current data on the childcare workforce (13 states); and (C) states without current workforce data (22 states). Note that estimating the number of workers is only one of many valid reasons for studying the child care workforce, so that while the data collected by states in the second category are not applicable for the purposes of this investigation, they may have other valuable applications. Table 1 presents our categorization of states.

Table 1: Categorization of States

States/districts with data appropriate to estimate the number of paid caregivers of children from birth to 5 (16 states)	<i>States with current workforce data on the birth-to- 5 caregiver workforce (13 states)</i>	<i>States without identified current data on the birth-to-5 caregiver workforce (22 states)</i>
Alabama	California	Alaska
Arizona	Colorado	Arkansas
District of Columbia	Connecticut	Delaware
Hawaii	Florida	Georgia
Iowa	Illinois	Idaho
Kansas	Kentucky	Indiana
Maine	Montana	Louisiana
Massachusetts	Pennsylvania	Maryland
Missouri	South Carolina	Michigan
Nebraska	Utah	Minnesota
Nevada	Washington	Mississippi
North Carolina	Wisconsin	New Hampshire
North Dakota	Wyoming	New Jersey
Oklahoma		New Mexico
Oregon		New York
Vermont		Ohio
		Rhode Island
		South Dakota
		Tennessee
		Texas
		Virginia
		West Virginia

A. ***States with data appropriate for estimating the size of the paid workforce caring for children from birth to age 5 (16 states).***

Using the HSPC criteria, we found 16 states with data that would be appropriate for estimating the size of the workforce caring for children from birth to age 5. We were heartened to find that more than half the states have some data on the early childhood workforce, and the majority of these have data that can appropriately be used to estimate the size of the workforce caring for children from birth to 5, meeting the major criteria outlined above. In lieu of a table that identifies a checklist of common elements, we opted to briefly describe the research reports and databases applicable to estimating the size of the workforce. Each source uses a wide range of definitions for describing characteristics of the workforce (such as education levels), and we decided that a table without a detailed description of each study could be misleading.

1. *Alabama.*

a. The Alabama Partnership for Children, with funding from the Alabama Department of Human Resources, conducted a workforce study in 2002 (March, 2003). The Alabama Partnership for Children surveyed center directors, teachers, family child care providers, and group home providers on enrollment, staffing, salaries, and benefits. The child care center response rate was 25.4 percent, and the family child care and group home provider response rate was 63.1 percent.⁷

b. The Alabama Department of Human Resources also contracted for a study of actual costs related to changes in licensing, and the study was completed by the Center for Business and Economic Research, University of Alabama. The survey included specific questions on the number of part-time and full-time staff by position, with breakdowns for direct caregivers and service staff. The response rates were 39.5 percent for centers and 36.8 percent for family child care and group home providers.⁸

2. *Arizona.* The Governor's Division for Children contracted for a wage and benefit survey of all child care centers in Arizona in 1997, with an update in 2001. In addition to compensation and benefits, the survey collected information on educational requirements, experience, and turnover rates for Administrative Directors, Teacher Directors, Assistant Teachers, and Teachers. Of the 2,062 sites in the sample, 1,901 yielded usable data (97 percent response rate).⁹

3. *District of Columbia.* The Department of Human Services, Office of Early Childhood Development contracted the 1998 and 2000 biennial market rate studies to the Center for Applied Research and Urban Policy at the University of the District of Columbia. The study includes results from a phone survey to all licensed child care facilities. With an overall response rate of 80.3 percent, the survey represents 176 out of the 195 (90 percent) contacted family child care providers and 270 of the 360 (75 percent) contacted child care centers. In addition to program information, the study details caregivers' education, compensation, benefits, and retention.¹⁰

⁷ Alabama Partnership for Children and Alabama Department of Human Resources, (2003). 2002 Alabama Child Care Workforce Study. Montgomery, AL: Alabama Partnership for Children.

⁸ This report will be released soon.

⁹ Maricopa County Office of Research and Reporting, (2001). Arizona Wage and Benefit Survey of Child Care/ Early Childhood Education Center Based Personnel. A Report for the Governor's Division for Children. Tempe, AZ: Association for Supportive Child Care.

¹⁰ Center for Applied Research and Urban Policy, (2001). 2000 District of Columbia Child Care Market Rates and Capacity Utilization: A Study of Family Home and Child Care Center

4. *Hawaii*. The Good Beginnings Alliance plans to release a workforce study on all child care centers in Hawaii, including Head Start programs and military programs. The report will summarize the results of two surveys of Teachers and Directors. The Directors provided information on all the full- and part-time staff caring for children from birth to age 5. Both surveys collected information on job descriptions, the children served, salaries, benefits, education and training, and demographics. The overall response rate was 58 percent.¹¹
5. *Iowa*. Iowa University Extension CD-DIAL published results of two surveys: Directors' Survey (2002) and Family Child Care Survey (2003).
 - a. The mailing list for the Directors' Survey merged child care programs from (a) the databases of all five child care resource and referral agencies, (b) all Iowa Head Start programs, and (c) all Iowa Title I programs. With 456 usable questionnaires out of 967 programs, the response rate was 48 percent.¹²
 - b. Iowa Child Care Providers Survey used both qualitative and quantitative methods to compare registered and non-registered, rural and urban family child care providers. For the quantitative method, researchers created a sampling frame from (a) the databases of all five child care resource and referral agencies and (b) the list of providers who had received subsidies from the Iowa Department of Human Services and who were not known to be registered. A random stratified sample was selected with a 95 percent confidence interval, with over sampling assuming a 30 percent response rate for registered providers and a 25 percent response rate for providers. Out of 1,855 surveys mailed, they analyzed 730 viable responses for an adjusted response rate of 41.5 percent.¹³

Providers in the District of Columbia. District of Columbia: University of the District of Columbia.

¹¹ Good Beginnings Alliance (forthcoming) *Hawaii's Early Childhood Workforce Study*. Honolulu, HI.

¹² Larson, K., Hegland, S., (2001). *Iowa Early Care and Education Directors' Survey, Final Report to the Iowa Early Care and Education Professional Development Project*. Ames, IA: Community Development—Data Information and Analysis Laboratory and the Department of Human Development and Family Studies, Iowa State University.

¹³ Larson, K., Hegland, S., (2003). *Iowa Family Child Care Providers' Survey, Final Report to the Iowa Early Care and Education Professional Development Project*. Ames, IA: Community Development—Data Information and Analysis Laboratory, Iowa State University Extension.

- c. In addition, Iowa is part of the Midwest Child Care Research Consortium.¹⁴ A stratified sample of over 2,000 providers from the four states' lists of regulated and subsidized providers completed the phone survey on indicators of quality and the workforce. The overall response rate among all strata of providers was 81 percent. From this pool, researchers observed 365 providers using a range of instruments that measure the quality of the child care environment and caregiver interactions.
6. *Kansas.* Two separate research projects have been conducted in the State of Kansas.
- a. Kansas is a member of the Midwest Child Care Research Consortium.¹⁵
 - b. A 2001 workforce study, conducted by Jones Institute for Education Excellence at Emporia University on behalf of KACCRRRA, provides data from three surveys: surveys of directors, non-director caregivers, and family child care providers. The overall response rate from all three surveys was 17.2 percent, which does not meet our criteria. However, these data could be used to supplement another data source. In addition to reporting the average number of center personnel, the report summarizes the respondents' education and professional development.¹⁶
7. *Maine.* The Office of Child Care and Head Start contracted with Mills Consulting Group, Inc. to conduct a market rate and workforce study in 2002. The overall response rate from centers was 60 percent. Family child care providers had a 73 percent response rate. The report includes data on enrollment, hours of operation, education, benefits and insurance, rates, and other variables.¹⁷

¹⁴ We are still awaiting more information on data quality and content specific to each state in the Midwest Child Care Research Consortium, but preliminary discussions indicate it is appropriate to include in this category.

¹⁵We are still awaiting more information on data quality and content specific to each state in the Midwest Child Care Research Consortium, but preliminary explorations indicate it is appropriate to include in this category.

¹⁶ Jones Institute for Education Excellence, (2002). *Who Cares for Kansas Children? Early Education Workforce Study*. Emporia, KS: Emporia State University.

¹⁷ Mills, L., Boston, S., Breindel, H., Goodman, I., Mohrle, K., (2002). *Maine Child Care Market Rate and Workforce Study. A Report for the Office of Child Care and Head Start, State of Maine*. Concord, MA: Mills Consulting Group, Inc.

8. *Massachusetts.* The Massachusetts Office of Child Care Services contracted with the Massachusetts Child Care Resource and Referral Network, with assistance from TEC Associates for the salary and benefits report (2000). The surveys collected data from all licensed child care centers and school-age programs in the Commonwealth of Massachusetts. The response rate for child care centers was 56.2 percent. The report includes information on demographics, part-time or full-time status, education, accreditation, range of starting salaries, and other variables.¹⁸
9. *Missouri.* Missouri is a member of the Midwest Child Care Research Consortium.¹⁹
10. *Nebraska.* Nebraska is also a member of the Midwest Child Care Research Consortium.²⁰
11. *Nevada.* The Nevada Department of Human Resources, Welfare Division contracted with the University of Nevada at Reno for the three surveys comprised in *Who Cares for Nevada's Children: A Profile of the Demographic, Economic and Quality Aspects of Child Care in Nevada* (2002). The report analyzes data from surveys of child care center directors, teachers, licensed family child care providers, licensed staff, and parents. The researchers also observed the quality of care in classrooms. While the researchers polled all licensed child care workers, they received usable data from 87 percent of the directors, 61 percent of the teachers, and 86 percent of the licensed family child care providers. Questions include information on demographic characteristics, experience, education, salary, and benefits. Parents were asked about their use of various child care arrangements, the criteria for choosing child care, satisfaction, and cost of care.²¹
12. *North Carolina.* The North Carolina Partnership for Children contracted with Child Care Services Association to conduct a workforce study surveying

¹⁸ Massachusetts Child Care Resource and Referral Network, with Bernstein, A., Ph.D., (2000). *Massachusetts Child Care Center and School Age Program Salary and Benefits Report*. Boston, MA: Massachusetts Office of Child Care Services.

¹⁹ We are still awaiting more information on data quality and content specific to each state in the Midwest Child Care Research Consortium, but preliminary explorations indicate it is appropriate to include in this category.

²⁰ We are still awaiting more information on data quality and content specific to each state in the Midwest Child Care Research Consortium, but preliminary explorations indicate it is appropriate to include in this category.

²¹ Essa, E., Ph.D., (2002). *Who Cares for Nevada's Children? A Profile of the Demographic, Economic, and Quality Aspects of Child Care in Nevada. Key Findings from the Nevada Child Care Workforce Study*. Reno, NV: University of Nevada, Reno.

teachers, directors, and family child care providers in all 100 counties. Sample sizes depended on the number of licensed facilities in each county. Response rates were 78 percent for directors, 52 percent for teachers, and 75 percent for family child care providers. The survey covered various aspects of child caregivers and their working conditions: demographic characteristics, education, compensation, benefits, and center financing.²²

13. *North Dakota.* Child Care Resource & Referral conducted a salary and workforce study of all licensed child care centers in North Dakota. Out of the 127 licensed centers, 63 responded (50 percent). The survey responses are categorized by position (Teacher, Assistant Teacher, Teacher/Director, and Administrative Director) and by urban and rural regions. The report summarizes information on education, benefits, turnover, salary budgets, working conditions, and demographic characteristics.²³
14. *Oklahoma.* The Department of Human Resources contracted for the biennial Market Rate Study with the University of Oklahoma. The study includes information on the total number of caregivers of children from birth to 5 years of age. The sample of 4,100 child care centers and family child care homes was randomly selected from a current point-in-time list of all programs with two-year (as opposed to temporary) licenses. Head Start programs and programs with only school-age youth were not included. Of the 3,637 eligible providers, 954 centers and 2,447 family child care homes responded for an overall response rate of 93 percent. In addition to information about the characteristics of the centers and children served, the survey also collected the average number of full-time and part-time teachers and the turnover rates. ²⁴
15. *Oregon.* Oregon conducts a biennial household survey that includes questions to households about whether they have paid for child care for children up to age 13, and whether an adult in the household is paid to care for other people's children under the age of 13. Thus, Oregon collects both

²² Russell, S., Lyons, J., Grigoriuc, M., Lowman, B., (2002). *Working in Child Care in North Carolina*. Chapel Hill, NC: Child Care Services Association.

²³ Lembke, L., and Buschette, M., (2002). *North Dakota Child Care Center Staff Salary & Working Conditions*. Fargo, ND: Child Care Resource and Referral.

²⁴ Penn, D., (2001). *2001 Child Care Rate Study for Oklahoma Department of Human Services Office of Child Care*. Norman, OK: Center for Economic and Management Research, Price College of Business, University of Oklahoma.

supply and demand data on paid informal care and licensed care in the home.²⁵

16. *Vermont*. In 2000, the State of Vermont contracted for a workforce study with Mills & Pardee, Inc. to survey family child care providers and child care center directors on the working conditions, wages, and benefits of providers, among other issues. The final response included 399 licensed centers (response rate = 75 percent) and 989 registered family child care providers (response rate = 76 percent).²⁶

²⁵Oregon Childhood Care and Education Data Project, (2002). *Data for community planning: 2000 Oregon population estimates and survey findings*. Albany, OR: Oregon Child Care Research Partnership.

<http://www.hhs.oregonstate.edu/familypolicy/occrp>.

²⁶ Mills, L., Weiss, D., Boston, S., Goodman, I., Mohrle, K., and Minardi, M., Mills and Pardee, Inc. and Goodman Research Group, Inc. (2001). *Vermont Child Care: A Study of Wages, Credentials, Benefits, and Market Rates*. Waterbury, VT: Child Care Services Division, Department of Social and Rehabilitation Services, State of Vermont.

B. States with current childcare workforce data (13 states).

While many types of workforce data may provide valuable information on the characteristics of the child care workforce, not all data are appropriate for providing estimates of the number of caregivers by position and by children's age groups. The 13 states discussed below fall into this category for one or more of the following reasons:

- The data cover the entire economic sector of child care (including support staff), not just the occupation of child caregiver. The data do not describe the total number of caregivers by position.
- We could not determine the total number of caregivers of children from birth to 5, as the data are presented as total number of caregivers of children birth to 12.
- The sample is not representative because the response rate was too low or because the data contained a bias.
- The sample cannot be generalized to the population because the sampling population was not a current list of caregivers.
- The sample covered a particular region of the state, not the full state.
- The research is currently in progress, and final results were not available at the time of publication.

Regardless of whether these data can be used to estimate the size of the early childhood workforce, the results merit review by state administrators in planning their own data collection strategies.

1. *California.*

- a. The California Child Care Workforce Study surveyed licensed child care centers and family child care homes in eight counties in 2001, with a follow-up survey currently being analyzed from two of these counties: San Benito and San Mateo. The California Child Care Resource and Referral Network, the Center for the Child Care Workforce, and the Institute of Industrial Relations, UC Berkeley have collaborated on this research with funding from the David and Lucile Packard Foundation. The survey will provide regional data on the number of staff working in licensed settings in addition to their qualifications, compensation, tenure, and turnover. In the future, the researchers hope to conduct this study statewide.²⁷
- b. As a separate project, the Center for the Child Care Workforce just completed a survey of the childcare workforce in Los Angeles County, which represents a third of the state.²⁸

2. *Colorado.* The Colorado Office of Resource and Referral Agencies, Inc. (CORRA) conducted a workforce study of four regions. CORRA pulled a random stratified sample of 300 directors, 100 teachers and assistants, and 71 family child care providers from their database. All 300 directors completed a written survey, the results of which included information on approximately 3,000 staff members. The center staff and family child care providers completed telephone interviews. The research focused on the qualitative, descriptive data, as the sample was too small to be quantitatively representative.²⁹

3. *Connecticut.* Early Childhood DataCONNECTIONS (a public-private partnership between the Child Health and Development Institute and the Connecticut Department of Social Services) released a recent report highlighting research findings and unanswered questions related to caregivers' salaries, benefits, turnover, education, experience, and

²⁷ California Child Care Resource & Referral Network, Center for the Child Care Workforce, and Institute of Labor Research, UC Berkeley, (2003).

²⁸ Burton, A., Laverty, K., & Duff, B. (2002) *A Profile of the Alameda County Child Care Center Workforce 1995-2001: Continuing Evidence of a Staffing Crisis.* Washington, DC: Center for the Child Care Workforce, (2003).

²⁹ Grimm, Susan, (2000). *Who Is Watching Our Kids? A Profile of the Colorado Child Care Workforce in the Year 2000.* Englewood, CO: Colorado Office of Resource and Referral Agencies, Inc.

professional development. In addition, the report provides compendium of other resources on related issues and cites several methodologies to estimate the size of the workforce using existing data. The companion reports include *Connecticut's Child Care Market and Workforce Study* and *Head Start Program Information Reports*.³⁰

4. *Florida*. Under contract with the Florida Children's Forum, Florida State University Family Institute conducted a workforce study of directors, teachers, registered family child care homes, Head Start programs, and private/parochial school Pre-Kindergarten and after-school programs using the list of all licensed centers. The researchers drew a proportionate random stratified sample of the licensed and registered facilities to be included in the phone/mail survey. Out of 2,650 centers, 565 directors (21 percent) responded, and out of 2,515 surveys to family child care providers, 548 (21 percent) were received with representation from the majority of counties. The survey included questions about educational background, experience, salaries, benefits, job satisfaction, and demographic variables.³¹
5. *Illinois*. The State Legislature required the Department of Human Services to survey licensed child care facilities every two years to review staff compensation and benefits, qualifications, and other issues related to the retention of qualified caregivers. (Each intervening year, the market rate survey is conducted.) Under contract with DHS, the University of Illinois at Urbana-Champaign conducted this biennial survey in 1999 and 2001. The 2001 study included a stratified sample of 400 licensed, full-time child care centers and 400 licensed family child care centers. Of the 400 child care surveys, 140 center surveys (37.8 percent) and 203 family child care surveys (51.0 percent) returned usable data. The report includes findings on capacity and staffing, education of staff, staff turnover, salaries and benefits, and working conditions.³²

³⁰ Early Childhood DataCONNECTIONS, (2003). *A Research Perspective on the Child Care Workforce in Connecticut*. Farmington, CT: Child Health and Development Institute.

³¹ Mullis, A., Mullis, R., and Cornille, T., (2001). *Florida Childcare Workforce Study. Final Report to the Florida Children's Forum, Inc.* Tallahassee, FL: Florida State University.

³² Ramsburg, D., Ph.D., Montanelli, D., Ph.D., Rouge, E., (2002). *FY 2001 Illinois Salary and Staffing Survey: Child Care Centers and Family Child Care Home Providers*. Urbana, IL: Department of Human and Community Development, University of Illinois at Urbana-Champaign; Ramsburg, D., Ph.D., Montanelli, D., Ph.D., Rouge, E., (2000). *FY 2000 Market Rate Survey of Licensed Child Care Programs in Illinois*. Urbana, IL: Department of Human and Community Development, University of Illinois at Urbana-Champaign.

6. *Kentucky.* Under contract with the State of Kentucky, the Kentucky Association of Child Care Resource and Referral Agencies (KACCRRRA) is currently conducting a market rate study of child care centers and family child care homes, which includes questions on the total number of full-time and part-time staff by position, educational background, and salaries.³³
7. *Pennsylvania.* In response to the Governor's Task Force on Early Childhood Education, the Universities' Children's Policy Collaborative conducted primary research on early education. Pennsylvania State University, Temple University, and the University of Pittsburgh surveyed a broad array of child care providers in 2002: child care centers, Head Start programs, preschools and other part-day Pre-Kindergarten programs, group home providers, family child care providers, and legally unregulated home providers. The study covers issues related to the quality of care, including information on the child caregivers. Out of a sample of 4,243 child care programs, 637 completed interviews with an overall response rate of 15 percent.³⁴
8. *South Carolina.* To evaluate the overall quality of care and the effectiveness of the Advocates for Better Care (ABC) Child Care Program, the South Carolina Department of Health and Human Services contracted with Clemson University for the *South Carolina Child Care Survey of the Workforce, 2000*. Out of all regulated providers, 1,094 family child care homes (69.8 percent of viable interviewees) and 916 centers (57.1 percent of viable interviewees) completed phone interviews. In addition, 430 self-arranged/in-home caregivers (62.9 percent of possible candidates) completed interviews. The major findings of the study have been categorized into indicators of quality (education, child care credential, retention, wages, and benefits) and indicators of access/availability (schedules, capacity, care for children with special needs, and location).³⁵
9. *Utah.* Under contract with the State of Utah, Mills Consulting Group, Inc. conducted a survey of all licensed child care and school-age programs, and a stratified sample of family child care providers and residential

³³ This study has not yet been released. Please see <http://www.kaccrra.net>.

³⁴ Etheridge, W., McCall, R., Groark, C., Mehaffie, K., and Nelkin, R., (2002). A Baseline Report of Early Care and Education in Pennsylvania: The 2002 Early Care and Education Provider Survey. Report prepared for the Governor's Task Force on Early Childhood Education. Pittsburgh, PA: University of Pittsburgh Office of Child Development and the Universities Children's Policy Collaborative.

³⁵ Marsh, Janet, Ph.D., (2001). *South Carolina Child Care: Survey of the Workforce 2000, prepared for the ABC Child Care Program, South Carolina Department of Health and Human Services.* Clemson, SC: Institute on Family & Neighborhood Life, Clemson University.

certificate holders (2002). In addition, they conducted focus groups with Utah center directors and teachers and sent a questionnaire to directors of child care resource and referral programs. Out of the surveys, 49 percent of the center-based and 63 percent of the FCC provider surveys were completed, some of which were received too late for analysis. The final sample includes 199 programs and 594 providers.³⁶

10. *Washington.* The Child Care Coordinating Committee and the State of Washington Department of Social and Health Services commissioned the Human Services Policy Center at the University of Washington to conduct a study of family, friend, and neighbor care, including companion supply and demand surveys. The supply survey of family, friend, and neighbor caregivers is a general population phone survey of almost 300 caregivers (response rate of 46 percent) who care for other people's children on a regular basis outside of a licensed child care facility in WA state. The study highlights their characteristics and need for support. They found that two-thirds of the caregivers desired some type of support, and the Human Services Policy Center recommended voluntary training and support targeted to non-licensed caregivers working with children for a substantial part of the week.³⁷

11. *Wisconsin.* The Wisconsin Child Care Research Partnership received funding from the Child Care Bureau in 2000, and is currently engaged in three related research ventures, including two that examine the characteristics of child care providers. *What Does Child Care Look Like? -- Study 1* reviews the characteristics of the children and caregivers who participate in the state child care subsidy system (which represents approximately 80 percent of child care programs). *Characteristics of Child Care—Study 2* analyzes the child care workforce and the quality of care. In the latter study, the researchers randomly selected 2000 regulated child care settings serving low-income children with child care subsidies. Out of 815 questionnaires to centers and 1,185 questionnaires to family child care providers (both of which included an additional “workforce questionnaire” the Wisconsin researchers received a 40 percent response on the program questionnaire from centers and 1,200 individual workforce questionnaires for analysis. The Research Partnership also did a special analysis of the child care workforce for the Wisconsin Early

³⁶ Mills Consulting Group, Inc., (2002). *A Study of the Child Care Workforce in Utah*. Salt Lake, UT: Utah Department of Workforce Services, Office of Child Care.

³⁷ Brandon, R.; Maher, E., Joesch, J.; and Doyle, S., (2002). *Understanding Family, Friend, and Neighbor Care in Washington State: Developing Appropriate Training and Support*. Seattle, WA: Human Services Policy Center, Evans School of Public Affairs, University of Washington.

Childhood Association, in anticipation of expanding its T.E.A.C.H. and R.E.W.A.R.D. programs ("Losing Ground or Keeping Up?").³⁸

12. *Wyoming.* The Wyoming Department of Family Services contracted with the Wyoming Children's Alliance to conduct a survey of licensed child care centers and family child care homes in 2001. In addition to assessing operational issues, the survey also asked about tenure of current staff by position. Out of 177 licensed centers, 116 (65 percent) responded. The response rate for family child care programs was 40 percent: 229 licensed family child care providers out of 577 responded.³⁹

Four states have large registries of providers that, with modifications, could yield data sufficient to estimate the size of the child care workforce. Three of these states – Florida, South Carolina, and Wyoming – have been discussed above.

Montana is counted as the thirteenth state in this group.

- *Florida.* The child care resource and referral agencies use three types of databases, one of which includes a field for centers, family child care homes, and school-age programs to report the number of staff, including both direct caregivers and support staff.
- *South Carolina.* South Carolina contracts with the Center for Child Care Career Development to maintain a training database for all Center Care staff. This database cannot currently be used to estimate the size of the child care workforce because it does not distinguish between classroom staff and non-classroom staff (cooks and bus drivers).
- *Montana.* The Child Care Under the Big Sky (CCUBS) computer system includes data on all licensed and registered programs serving children from birth to age 12, including the number of staff by position. The licensors update the data on children and staff, and, as the child care resource and referral agencies determine eligibility for subsidies, the system will soon have an interface to NACCRAware. In addition, the CCUBS system will also interface with the voluntary training registry that will include information on level of education, among other variables.

³⁸ Adams, D.B., Roach, M.A., Riley, D.A., and Edie, D. (2001). *Issue Brief #1: Who Cares for Wisconsin's Children?* Madison, WI: University of Wisconsin-Extension.

³⁹Wyoming Children's Action Alliance, (2001). *Wyoming Child Care Center and Home Child Care Provider Market and Operations Survey.* Cheyenne, WY: Wyoming Children's Action Alliance.

- *Wyoming.* The Wyoming Children’s Action Alliance administers Wyoming STARS, the professional development system that requires at least 30 hours of training each biennium for all staff working in licensed child care programs. As a result, the training registry for Wyoming STARS includes a comprehensive list of all staff working with children from birth to age 12 in licensed facilities.

C. States currently without workforce data (22 states).

As indicated in Table 1, HSPC could find no data appropriate for estimating the size of the early child care workforce in 22 states. However, some data from those states can shed useful light on childcare workforce issues. Most states have computerized their licensing data and can provide monthly or daily point-in-time totals of capacity and/or enrollment by age group. When combined with required staff: child ratios, these states can derive rough estimates of the number of caregivers. Several states – Connecticut, Minnesota, and Nebraska, to name a few – have carefully compiled estimates of their caregiving populations, and use these estimates for planning purposes.

Other states (Alaska, Louisiana, and Mississippi, for example) compile data only on the number of licensed child care centers, licensed or registered family child care and group homes, and licensed school-age programs. Some states compile data only on subsidized programs. Finally, a few states — Arkansas, Idaho, and Missouri – store data by facility only, without any compiled totals.

Take-Home Points

In reviewing all the sources of state data on the supply of direct caregivers, several lessons merit sharing with states and with the Administration for Children and Families.

Take-Home Points for States

1. Tips for Designing State Workforce Studies.
 - a. To estimate the size of the child care workforce, the sample should be selected from a database that represents the universe of child care providers of a particular type— the list of licensed centers for center-based care, for example. All settings, both licensed and unlicensed, should be included because a large portion of the paid child care workforce works in unlicensed settings.⁴⁰
 - b. To assure accuracy, updates of provider lists should take place annually, regularly purging providers that are no longer in operation and updating facility files.
 - c. The sampling population should represent the entire state.
 - d. The survey should phrase the question about number of staff to ascertain the *total number of staff by position and educational background*. The alternative – using ranges or –categories – may not capture staff totals. Categories should be complete and mutually exclusive.
 - e. Requirements to conduct biennial workforce studies can effectively ensure that current data will be used to estimate the size of the workforce. For example, the State of Illinois conducts biennial workforce studies in the years between biennial market rate studies. Response rates may increase with each subsequent year, as facilities see the published results of the survey. For example, Oklahoma’s most recent market rate survey had a response rate of 93 percent as, over time, caregivers have become familiar with the

⁴⁰ The State of Oregon conducts a general population survey, which includes a question about the number of adults in the home who are paid to care for children from birth to age 13. As a result, Oregon has reliable data on the number of informal, unregulated caregivers.

format of the questions and developed a relationship with the researchers.

- f. Repeated contact with respondents increases the rate of response. For example, to create a current list of staff, the University of Nevada phoned every child care center in the state. Several follow-up calls ensured receiving responses from as many teachers and directors as possible. Such follow-ups can often be expensive and time-consuming, but they are crucial for gathering high-quality data.

2. Promising Models of State Provider Databases.

- a. Florida has modified one of the three databases used by child care resource and referral agencies to document the total number of staff in each facility. A modification to tally the number of staff with direct responsibility for children would not only define the profession, but also provide a better means of planning for educational opportunities and compensation initiatives. Continuing to capture non-caregiving staff as well as paid caregivers will help policy makers understand the size and composition of the child care *sector*, as well as of the childcare *profession*.⁴¹
- b. Wyoming requires all caregivers in licensed facilities to record their 30 hours of continuing education every two years, with annual updates to the system. If a field were added to link the age group of the children served to each provider, the system could better distinguish the workforce devoted to care of children birth to 5 from those engaged in paid care of school-aged children.
- c. Montana has developed interfaces between the licensing/eligibility database (updated by licensors and used by the child care resource and referral agencies to determine eligibility for child care subsidies) and the professional development system. Should a unique license be developed for school-age programs, this database could provide complete data on the workforce by age group.

⁴¹ Refer to the final report from the first year of this project for a discussion of this distinction: CCW/HSPC, (2002). *Estimating the Size and Components of the U.S. Child Care Workforce and Caregiving Population*.

Take-Home Points for Federal Policy Makers

1. The Department of Labor, Bureau of Labor Statistics, and the Census Bureau should modify their categories and definitions to allow identification of all paid child care workers, and differentiation of child care workers from kindergarten teachers and support staff. The inherent weaknesses of provider-based methods – that the size of the universe is unknown and potentially unknowable – suggest that obtaining accurate workforce data from a national population survey should be the top priority. Collecting workforce data as part of the Census/CPS would automatically allow description of the age, educational and income characteristics of the workforce. Periodic special samples could address such issues as the distribution of workers by setting and position.
2. The Child Care Bureau should consider establishing a standard set of definitions and categories for states to use when collecting child care workforce data, including guidelines for survey instrument design and techniques. This would both assist states in developing higher quality data and create the potential that state data could be reliably aggregated to the national level. The Common Core of Data—the U.S. Department of Education (National Center for Education Statistics) requirement that basic statistics to be collected by all State and Local Education Agencies -- could serve as a useful model. It would be helpful to convene a group of state and national administrators and researchers to assist the ACF/CCB in developing definitions and guidelines that would produce optimally useful information at both federal and state levels.
3. Consider amending the requirement to collect biennial market rate surveys to require including a question on the total number of caregivers/staff by position (both part- and full-time) in licensed child care centers and regulated family child care homes. With such a requirement, states could easily augment current data collection to provide a relatively recent estimate of the number of caregivers caring for each age group of children (infant, toddler, preschool) by position in licensed settings. Additional questions could yield information about caregivers' and supervisors' educational levels. To be effective in providing workforce estimates, the sampling design for market rate surveys would have to be constructed to assure that all providers were included, such as school-based Pre-Kindergarten programs that might not charge a fee.

4. Collaborate with other entities such as NACCRRRA to develop new data fields on software – such as NACCRAware – that is being used in most states. NACCRAware could be modified to include fields for (a) number of staff with direct responsibility for children and (b) total staff (including administrative and support staff). NACCRA affiliates could encourage and assist providers to respond accurately and completely to survey requests.
5. Encourage states to invest sufficient funds to obtain representative samples and high response rates; consider offering financial incentives to do so.

Conclusions

State and federal agencies share responsibility for improving the quality of child care by ensuring that caregivers have access to educational opportunities and by implementing strategies to retain a qualified workforce through enhanced compensation and benefits. To effectively plan, budget, and evaluate such programs, states need to know how many child caregivers are working with children from birth to age 5. While the majority of states have *some* current workforce data, most states lack data appropriate for estimating the size of the early childhood workforce.

Uniform federal data collection requirements and guidelines could provide a baseline for states to use in evaluating their own data and planning needs. Such requirements/guidelines also might lead to the collection of data that could reliably be aggregated to the national level. Several current data collection systems—market rate studies, data bases of licensed or registered providers, maintained by either public agencies or resource and referral

networks —could be modified to include total number of caregivers of children from birth to age 5. With these data, states and the Administration for Children and Families/ Child Care Bureau would have data useful for evaluation and planning.

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