

**Boston Early Education Quality  
Improvement Project (EQUIP)  
Family Survey Report**

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June 2003**

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# EQUIP Family Survey Report

## Executive Summary

In the spring of 2002, Associated Early Care and Education's Boston EQUIP coordinated the Department of Education's Community Profiles Family Survey in Boston for the 0-8 Evaluation Committee. The Community Profile's Family Survey was a first-of-its kind citywide parent survey to collect information about the child care, early education, and before-and-after school needs of the city's children ages birth to fourteen and their families. About 20,000 surveys were distributed throughout the city by direct service organizations<sup>1</sup> to help reach a diverse, representative sample of families across Boston. A total of 1,747 surveys were returned and the data were entered and analyzed.

The results of the analysis of the Family Survey indicate that:

- Parents who responded are largely satisfied with the type of care arrangement they use;
- The cost of care and transportation problems are barriers many families experience in finding or using child care; and
- Child care expenses impact most families' financial situation, prohibiting many lower income families from saving money or paying their bills in a timely way.

In addition, based on findings of the survey, Boston EQUIP offers the following policy recommendations to child care programs to improve the quality, accessibility and affordability of child care in Boston:

- Consider the issue of accessibility when planning future services and allocation of resources;
- Continue to advocate for more affordable care through subsidies from Community Partnerships and Office of Child Care Services;
- Consider the variety of sources parents use to find child care arrangements when marketing program services.

As with any survey that is distributed for the first time, some important lessons were learned that will help improve future efforts to survey families. Boston EQUIP recommends the following changes be made in future attempts to survey families:

- Making specific attempts to contact families who do not have child care; Designing a survey tracking system to calculate response rate and representativeness of the sample;
- Shortening the length of the survey; and
- Making questions more clear and concise.

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<sup>1</sup>

## **Introduction**

In the spring of 2002, Associated Early Care and Education's Boston EQUIP coordinated the Department of Education's Community Profiles Family Survey in Boston for the 0-8 Evaluation Committee. The Family Survey is a requirement of the Community Partnerships for Children grant to the 0-8 Coalition. The goal of distributing the survey was to collect information from families to determine: who has or needs child care<sup>2</sup>; the problems parents encounter when trying to find and keep child care<sup>3</sup>; how often parents change their child care and why; the cost of child care and the impact that it has on family financial situations; and what types of programs parents would find valuable in helping them raise their children. This information will be used by the 0-8 Coalition to guide the critical services programs provide to children and their families and to help programs make the best use of their funds.

The following is a report summarizing the history, methodology, and findings from the survey. The conclusion of the report offers recommendations about how to improve the quality, accessibility, and affordability of child care for parents based on the findings from the survey as well as recommendations for ways to improve the design, distribution, and collection of the Family Survey.

## **History of EQUIP**

Associated Early Care and Education and a community-based advisory of early care and education providers, advocates, and policymakers established Boston EQUIP in 1994 in an effort to improve the quality of early care and education services in Boston. After completing its first survey of licensed center-based child care, family child care, public pre-school programs, and after-school programs, Boston EQUIP's advisory established a set of five benchmarks for quality improvement in the areas of accreditation, facilities, teacher education and training, teacher salaries, and parent engagement. Since that time, Boston EQUIP has surveyed Boston's licensed early care and education and school-age child care programs three additional times – in 1997, 1999, and most recently in the winter of 2001.

Since its inception, Boston EQUIP has worked with the local community to improve the system of care for Boston's families. Boston EQUIP has worked with community partners to develop neighborhood-level capacity to collect and use data in their planning and program development. For example, Boston

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<sup>2</sup> In this report the term child care includes early care and education as well as before-and-after school.

<sup>3</sup> While some of the respondents to this survey were grandparents or legal guardians, the term "parent" will be used in this report to refer to the caregivers who responded to the survey.

EQUIP used its 1999 data and additional sources to produce nine Neighborhood Profiles, providing local supply, demand, and quality data on the neighborhood's early childhood services. In addition, Boston EQUIP regularly responds to requests for data and analysis from individual agencies and organizations throughout the city. Finally, Boston EQUIP works with the 0-8 Coalition Evaluation Committee and the coalition membership of Boston's Community Partnerships for Children Council, to plan how best to use the funding for direct and indirect services to low-income pre-school aged children. The funding administered by the 0-8 Coalition is a critical source of revenue for quality initiatives within Boston's early education community.

## **Methodology**

In the spring of 2002, Boston EQUIP surveyed families throughout Boston as part of a requirement for the Department of Education Community Partnerships for Children grant.

### The Survey

The survey was designed by the Department of Education and was printed in six different languages for Boston: English, Chinese, Spanish, Vietnamese, Portuguese, and Haitian. The survey was eleven pages long and had a total of twenty questions. The survey asked families for the following information:

- Family demographics (neighborhood of residence, number of parents/guardians, number and ages of people in the household)
- Adult's occupation and level of education
- Household Income
- Languages spoken in the home
- Types of care families currently have and how often it has changed
- Whether families would change their care arrangements and why
- Whether families had a child with a disability
- Problems finding and using care
- How families find child care
- The cost of child care and the impact of the expense
- Type of support services families use
- Other types of support families feel would be helpful (i.e. workshops, play groups, home visits)

### Distribution

In April 2002, 20,000 Family Surveys were distributed throughout Boston. The Boston EQUIP Advisory Committee decided to distribute the surveys through the direct service community instead of conducting a random sample survey. Members of the 0-8 coalition, community service organizations, Head Start

agencies, child care programs and the Boston Public Schools were contacted to request their help in distributing the surveys.

The community agencies that expressed interest in distributing the surveys met to review the survey and decided how many surveys they were willing to distribute. The surveys were either sent by mail or dropped off in person to the participating organizations. Boston EQUIP staff maintained contact with each organization to answer questions and to make sure the surveys were distributed. Each organization chose to participate in a way that was most conducive to their service orientation. For example, child care programs often chose to send the surveys home with their families and asked the families to return the surveys to the classroom. Service organizations that functioned on a less continuous basis offered the surveys in their offices with return mail envelopes, while others sat down with parents and helped them fill out the survey.

### Collection and Analysis

A total of 1,747 surveys were returned either directly by mail or as a group from the participating service agencies. As an incentive, families who returned the survey received a children's book. The surveys were sent to the Department of Education for data preparation and entry. The Department of Education returned the data from the surveys in July 2002 for analysis. Staff at Associated reviewed the raw data and compared the demographics of the respondents to the U.S. Census data.

## **Findings**

### Family Demographics

The majority of the survey respondents spoke English, had graduated from high school, were employed, and had an annual income of less than \$25,000. There was an even split between two-parent families and one-parent families, each group making up slightly less than half of the respondents. Eleven percent of respondents indicated that they had an extended family, with grandparents or other relatives living in the home. Three percent of respondents described their family in another way, such as joint custody or care by grandparents only. While some of the respondents to this survey were grandparents or legal guardians, the term "parent" will be used in this report to refer to the caregivers who responded to the survey.

The survey asked respondents to indicate their own employment status as well as the employment status of their spouse/partner and other adults in the home. The majority of families had one or more working parents. Fifty-four percent of

parents who filled out the survey reported working 30 or more hours per week, and 76% reported that their spouse worked 30 or more hours.

<b>Employment Status (N=1651, 95%)*</b>						
	Self (1651)		Spouse (740)		Other (199)	
	%	#	%	#	%	#
Employed $\geq$ 30 h/wk	54	892	76	559	54	107
Employed < 30 h/wk	19	312	13	93	16	31
Full-time parent	12	193	4	30	5	9
Student/training program	11	186	2	13	19	37
Not employed	14	224	7	50	17	33
Other	2	30	1	9	4	8

\*Percentages may exceed 100% due to individuals checking more than one category.

While most of the respondents had graduated from high school, less than a quarter of parents or their spouses had a college degree.

<b>Highest Level of Education Attained (N=1688, 97%)</b>				
	Self (1688)		Spouse (795)	
	%	#	%	#
Less than high school	15	263	18	147
High school	31	527	33	263
Some college	26	439	19	150
Associate's degree	9	149	6	46
Bachelor's degree	10	164	11	85
Graduate degree	8	132	12	95
Other	2	30	2	13

The majority of families (64%) surveyed had a total household income of less than \$25,000.

<b>Household Income (N=1625, 93%)</b>		
	<u>%</u>	<u>#</u>
Below \$5,000	11	170
\$5,000-\$9,999	13	211
\$10,000-\$14,999	15	244
\$15,000-\$24,999	25	411
\$25,000-\$34,999	13	217
\$35,000-\$49,999	8	137
\$50,000-\$74,999	7	121
\$75,000-\$99,999	3	51
\$100,000-\$149,000	3	46
\$150,000 or more	1	17

The language spoken in most homes was English (76%). While 33% of families spoke Spanish in their homes, relatively small percentages of families spoke languages such as Cantonese (5%), Creole (5%), Vietnamese (3%), French (3%) and Haitian (3%). These percentages are representative of the population in Boston, as determined by comparison with U.S. Census data.

### **Types of Care**

Parents were asked to describe the kind of care they use for their youngest three children. The greatest percentage (40%) of infants and toddlers were cared for in child care centers, nursery schools or private preschools. Family child care, or care in the home of a non-family member, was also a popular option for toddlers and infants (35%). A smaller percentage of parents had a family member, neighbor, or friend care for their infant or toddler – either in the parent’s home (13%) or in the caretaker’s home (12%).

While a large percentage of preschool children (32%) were cared for in child care centers, nursery schools and private preschools, Head Start was the type of care used for the greatest percentage of preschool children (46%)<sup>4</sup>. Public school preschool (10%), family child care (9%), care by a family member or friend in the parent’s home (9%), and care by a family member or friend in the caretaker’s home (9%) were used for a smaller percentage of preschoolers.

<sup>4</sup> A high percentage of the surveys were distributed to and returned by parents with children in Head Start programs, which may explain this high percentage. Unfortunately, the specific number of surveys from this source is unknown because the source of each survey was not tracked.

Types of Care Used*				
	Infant/Toddler		Preschool	
	%	#	%	#
Family member, neighbor, or friend in respondent's home	13%	41	9%	55
Family member, neighbor, or friend in their home	12%	36	9%	54
Family child care/Home-based care	35%	107	9%	55
Child care center/nursery school/private preschool	40%	123	32%	192
Head Start/ Early Head Start	7%	22	46%	275
Public school preschool	1%	4	10%	62

\* Percentages may exceed 100% due to individual children enrolled in more than one type of care.

Once children enter elementary school, it is likely that a variety of care arrangements are used during before-and-after school hours. While parents reported using public school as care for 26% of kindergarten through third grade students and 62% of students fourth grade or older, it is unclear whether public school was the only type of care used for these children. While analysis allowed for multiple types of care arrangements for each child, the wording of the question might not have made it clear to parents that they could check all types of care that applied.

While it is unclear if the data for this question present a true picture of use of care for school age children, they do reveal the diversity of care used for this age group. Nearly 10% reported school-age children being cared for by a family member, neighbor or friend in their home or the caretaker's home. A similar percentage reported children being cared for by drop-in after-school programs, school-based before-and after-school programs, and community-based before-and-after school programs – although children in fourth grade or above were reported more frequently to be cared for in these settings. Meanwhile, use of child care centers, nursery schools and private preschools was reported more often by children in kindergarten through third grade (13%) than children in fourth grade or above (2%). Use of family child care, or home-based care, was reported for less than 4% of school-age children.

## Satisfaction with Care

The majority of parents (69%) indicated that they would *not* change their current child care arrangements - even if cost, time or transportation were not an issue. Of the parents who did indicate that they would change their care, 50% specified that location would be the aspect they would most like to change. The majority of these parents (85%) would like child care closer to home. About a third of parents desiring care changes wanted to change the quality of the program or provider, while about a quarter would like a change in the type of care arrangement. Some parents who wanted change also indicated that they would like care for more hours per day and more days per week.

The percentage of parents that would change care was very similar across most family income ranges, with approximately a third of parents indicating that they would like to change their care. The percentage was lower in the highest income range, with only 19% of families with an income of more than \$150,000 indicating that they would like to change their care. Parents in the lowest income range (less than \$5,000) comprised the group least concerned with changing the type of arrangement or quality of care, but this group had the highest percentage of parents who would want to change the location of their care. Parents in the highest income range (more than \$150,000) were most concerned about hours per day, and were more concerned about this characteristic than any other income group.

Families that Would Change Care, By Income		
Family Income Range	Percentage That Would Change Care	
	%	#
less than \$5,000	34%	53
\$5,000-9,999	28%	56
\$10,000-14,999	28%	63
\$15,000-24,999	32%	123
\$25,000-34,999	32%	66
\$35,000-49,999	31%	42
\$50,000-74,999	29%	34
\$75,000-99,999	30%	15
\$100,000-149,000	35%	16
more than \$150,000	19%	3
Overall	31%	471

Parents who live in South Boston (19.3%) and Allston/Brighton (23.8%) were least likely to respond that they would change their care, while parents in the South End/Chinatown/Fenway cluster (41.0%) and Mattapan (37.1%) were most

likely to say they would like changes. While parents in most clusters said they would change location and hours per day, parents in the South End/Chinatown/Fenway cluster had slightly different concerns. A higher percentage of parents in this neighborhood would change quality of program/provider, while a smaller percentage would change hours per day or days per week.

What Families Would Change About Care, By Cluster					
Cluster	Type of arrangement	Quality	Location	Hours per day	Days per week
	%	%	%	%	%
Allston/Brighton (n=10)	30	30	60	40	20
Charlestown, N. End (n=18)	39	17	39	33	11
Hyde Park, Roslindale, W. Roxbury (n=76)	22	21	43	41	21
Roxbury, Jamaica Plain (n=94)	17	31	50	41	11
South End, Chinatown, Fenway (n=41)	27	59	39	17	7
Dorchester (n=103)	15	37	49	48	14
East Boston (n=67)	24	21	64	27	15
Mattapan (n=43)	16	26	42	42	12
South Boston (n=23)	22	17	48	26	17
Overall (n=475)	21	30	49	37	14

### Children with Disabilities

Of the 9% of respondents who have a child with a disability, 72% said that their caregiver always or often met the needs of their child. Another 18% of these parents felt that their caregiver sometimes met the needs of their child with a disability, and 10% said that the needs of their child with a disability were never met.

The percentage of respondents with a child with a disability was similar in most clusters, ranging from 7% to 11%. However, a slightly higher percentage (14%) of respondents in the South End/Chinatown/Fenway cluster reported having a child with a disability and only 1.8% of parents from the Charlestown/North End cluster reported having a child with a disability.

Parents in Charlestown/North End, as well as Allston/Brighton, were very satisfied with the care for their children with disabilities. One hundred percent of parents in both of these clusters said that their child’s needs were always met.

<b>Families Satisfied with Care for Child with a Disability, By Cluster</b>				
Cluster	Never	Sometimes	Often	Always
	%	%	%	%
1. Allston/Brighton (n=3)	0	0	0	100
2. Charlestown, North End (n=1)	0	0	0	100
3. Hyde Park, Roslindale, W. Roxbury (n=22)	14	9	32	46
4. Roxbury, Jamaica Plain (n=17)	0	29	29	41
5. South End, Chinatown, Fenway (n=11)	9	18	27	46
6. Dorchester (n=24)	8	29	21	42
7. East Boston (n=23)	17	9	13	61
8. Mattapan (n=11)	9	36	18	36
9. South Boston (n=7)	14	14	29	43
Overall (n=119)	10	19	23	48

### **Barriers to Child Care**

Parents were asked about the three biggest problems they experienced in finding or using early care and education in the past 12 months. They answered this question for their youngest three children. Across all ages, 41% of parents said that they had no problems finding or using care. This, however, may reflect the bias in the sample towards parents who already had care. Commonly cited problems were cost of care (12%), transportation (8%), long wait lists (7%), hours of care (6%), no openings (4%), and location of services (4%).

### **Finding Care**

Fifty percent of families found early education and care services through family and friends with children. Parents in the highest household income range, more than \$150,000, were most likely to use this method of finding care (82%), as compared to 48% of parents earning between \$10,000 and \$14,999. Parents also reported using child care providers (12%), medical personnel (11%), public schools (11%) and resource and referral agencies (9%) to find care.

<b>How Families Find Care, by Income</b>				
Family Income Range	Medical Personnel	Child Care Provider	Family or Friends w/children	Resource & Referral Agency
	%	%	%	%
less than \$5,000	9.4	10.0	43.5	7.1
\$5,000-9,999	14.7	10.0	43.1	9.5
\$10,000-14,999	9.4	8.6	48.0	4.5
\$15,000-24,999	10.5	12.7	45.5	7.1
\$25,000-34,999	7.8	12.9	42.4	8.8
\$35,000-49,999	8.8	10.9	44.5	10.9
\$50,000-74,999	5.0	11.6	45.5	8.3
\$75,000-99,999	9.8	21.6	54.9	15.7
\$100,000-149,000	8.7	10.9	54.3	10.9
more than \$150,000	11.8	5.9	82.4	5.9
Overall	9.8	11.4	45.8	8.0

It seems that parents in Allston/Brighton in particular are using a wide variety of methods to find care. While there were still a high percentage of parents using family and friends as a resource (51.1%), about twice as many parents in Allston/Brighton reported using medical personnel, resource and referral agencies, community service agencies, and public schools to find care.

### **Changes in Care**

The large majority of parents reported that their child care arrangement had not changed during the past year for their infants (81%), toddlers (69%), preschoolers (75%), school age children 5-8 years old (82%) and school age children 9-12 years (80%). Less than 4% of parents reported changing care more than three times in the past year for children in any age group. Cost, hours, location and “not a good fit” were the most commonly cited reasons for changing care for infants and toddlers. In addition to these factors, child’s age and quality of program were reasons given for changing care by parents of preschool and school age children.

### **Child Care Expenses**

The average cost of child care to families per week was \$101.26, with 1.5 as the average number of children included in this amount. Subsidies and other assistance reduce the cost of care for many families. Families with a household

income of less than \$15,000 were more likely to receive care at no cost, probably due to government subsidies and Head Start eligibility. A small percentage of families in all income ranges indicated that they received care at no cost, but this might reflect unpaid care by relatives. The majority (60%) of families with a household income of more than \$150,000 paid more than \$300 a week for care or about \$15,000 per year.

While few or no parents reported paying more than \$300 a week for care in most clusters, 7.3% of parents in Hyde Park/Roslindale/West Roxbury and 15.8% of parents in Charlestown/North End reported paying more than \$300.

### **Assistance with Child Care Expenses**

The majority of parents (61%) indicated that they receive assistance to help pay their child care costs. The most common form of assistance was government support (92%). As would be expected, families with smaller household incomes were more likely to receive assistance than families with larger household incomes.

Parents living in Charlestown/North End (31.3%) were least likely to report receiving assistance. The percentage of parents receiving assistance in Allston/Brighton (44.4%) and Hyde Park/Roslindale/West Roxbury (40.7%) were also substantially lower than the average across clusters (61%). Parents living in South Boston (69.1%) were most likely to report receiving assistance.

Of those parents who receive assistance, the percentage who received government support was near or above 90% across all nine clusters. The percentage of parents who received employer support was small across clusters. The percentage of parents receiving financial support from relatives was less than 7% in all clusters except South End/Chinatown/Fenway – where the percentage was 12.1%.

Type of Assistance with Child Care Expenses, By Income						
Family Income Range	Receiving assistance		Source of assistance for those receiving assistance			
	%	#	Relative %	Employer %	Government %	Other %
less than \$5,000	64	109	6	2	90	7
\$5,000-9,999	73	154	3	1	97	12
\$10,000-14,999	67	163	3	2	94	4
\$15,000-24,999	67	274	5	3	92	8
\$25,000-34,999	56	122	6	3	91	9
\$35,000-49,999	32	44	2	9	86	20
\$50,000-74,999	18	22	9	0	73	18
\$75,000-99,999	12	6	0	0	33	50
\$100,000-149,000	7	3	0	0	67*	33
more than \$150,000	6	1	0	0	0	100**
Overall	55	898	4	2	92	9

\*n=3 for those receiving assistance in this income bracket

\*\*n=1 for those receiving assistance in this income bracket

### Impact of Child Care Expenses

Forty-three percent of parents said that the cost of child care does not affect their family situation. However, 36% of parents reported that they cannot save money due to child care expenses. Parents with a household income less than \$15,000 or more than \$150,000 were less likely to say they were unable to save money due to child care costs.

Other parents reported that they cannot afford luxuries (15%), have unpaid bills (18%) or have the bare minimum for living expenses (15%) due to the cost of child care. Families with a household income of \$50,000 to \$150,000 were most likely to say they could not afford luxuries, families with an income of \$15,000 to \$50,000 were most likely to say they have unpaid bills and families with an income less than \$75,000 were most likely to report having the bare minimum for living expenses. Families with an income of less than \$5,000 were most likely to report going into debt, losing or quitting a job and going on welfare as a result of child care expenses.

Parents in the South End/Chinatown/Fenway cluster (25%) were least likely to report that child care expenses had no impact on their family situation. A large percentage of parents in this cluster reported that they were unable to save money.

Parents in South Boston (45.5%) were most likely to report that child care expenses had no impact on their family situation. Parents in South Boston were also less likely to report inability to save money, inability to afford necessities, using up savings, or going into debt as a result of child care expenses. As reported in the previous section, however, parents from this cluster were the most likely to receive assistance in paying for child care.

## **Recommendations**

### Findings

*Satisfaction with Child Care* - While the majority of parents reported satisfaction with their current child care arrangement, 31% indicated that they would change some aspect of their current arrangement. Considering the bias in this sample towards parents who already had care, this number is considerable, and could be underreporting parents' dissatisfaction with their current child care arrangement. If families who did not have care or were looking for care were included, this number might be much higher and more representative of general satisfaction with care arrangements.

Of the parents who were not satisfied, 50% said that their greatest dissatisfaction was related to the location of the child care facility. They would like to have access to care closer to home. Additionally, a third of parents desiring care changes wanted to change the quality of the program or provider. When advocating for changes in the field, these are both important factors to consider.

*Barriers to Care* - Fifty-nine percent of parents, or nearly 2 of every 3 who completed the survey, reported problems in finding or using child care. This number is quite high, taking into account the bias of this sample towards parents who already had care. Not surprisingly, the two most commonly cited problems were the cost of care, and transportation, followed closely by long wait lists. These findings reinforce the efforts of many in the field advocating for more affordable, accessible care for families.

*Impact of Child Care Expenses* - As expected, cost is a large issue for many parents. While the majority of parents surveyed report that they receive government support to help defray the expense of child care, families still report that the expense of child care makes it difficult for them to pay other bills.

Lower to middle income families who do not qualify for government assistance, but do not make enough to pay for child care expenses are the most impacted. They report having unpaid bills and having the bare minimum to cover living

expenses. Moreover, in those clusters where parents report higher rates of receiving assistance in paying for childcare, they are less likely to report inability to save money, inability to afford necessities, using up savings, or going into debt as a result of child care expenses. This indicates that subsidizing the cost of care is directly enabling families to better support themselves, and therefore benefiting children. This is a very important point to make as child care subsidies are cut and frozen to help address the budget deficit. If families lose government subsidies for child care they will be unable to pay for care, pay other bills, or find work to support their family.

*Finding Care* - The majority of parents report that they found early care and education services through family and friends. In addition, of parents earning under \$35,000, less than 10% found services through resource and referral agencies. This information is very informative when thinking about how to market early care and education services, and as resource and referral agencies plan outreach strategies. It is important to focus efforts on getting information out to communities and services agencies such as health centers, as well as through families who already have care. Parents who have care can share this information with friends who are looking for care and are unable to find convenient, quality programs.

Based on these findings, Boston EQUIP offers the following policy recommendations:

- When building or enhancing services, look at the location of programs in relation to the population centers, the ages of the children living in the neighborhood, and the type of care needed. As parents cited location and transportation as either barriers to care or primary sources of dissatisfaction with care arrangements, these emerge as important issues to take into account when making program and service decisions.
- Continue to advocate for more affordable care, through subsidies from Community Partnerships, Head Start and the Office of Child Care Services. Findings of this survey reinforced both the impact that child care expenses have on families, and the benefit of subsidizing the cost of care to the financial well-being of families.
- Programs should consider the variety of sources parents use to find early child care arrangements when marketing their services. As parents are relying on family and friends, as well as service providers such as medical personnel, early care and education programs should focus efforts on getting information out to communities, health care offices, other service agencies, and families already in care. Resource and referral agencies can

also use this information to publicize their services, so that parents can take full advantage of the resources they offer families.

- Those involved in cluster administration should examine survey results for their neighborhood and use the information to inform future planning to improve the accessibility, availability, and affordability of child care in their area.

## **Methodology**

### *Distribution and Collection*

The Boston EQUIP Advisory decided to survey a target population instead of conducting a random sample survey. Since Boston EQUIP wanted to know more about the needs of low-income and welfare families, the advisory chose to distribute the survey through direct service agencies.

After reviewing the number and type of respondents, it was clear that distributing the survey through direct service agencies was effective in reaching low-income families. However, the same information indicated that the distribution method only targeted people who already had child care and, therefore, information about parents who did not have child care or were looking for care was missing.

Another concern was related to the method of distribution and the response rate. A system was never developed for the service organizations to monitor how many surveys were actually distributed. While we know 1,747 surveys were returned, we cannot calculate the response rate. Calculating the response rate is important for understanding who responded to the survey and gaining a sense of how representative the sample respondents are of the general population.

While it was not possible to calculate the response rate for this family survey, we were able to use U.S. census data to confirm that the sample was reasonably representative. The comparison indicated that the sample was representative in terms of language, income, and family type. Confirming the sample was representative in at least these ways was important because it helps in interpreting the accuracy of conclusions drawn from the analyses.

The final concern was related to the most effective method for collecting the surveys. Organizations each chose to participate in the distribution and collection of surveys in a way that was most conducive to their own service organization. Some organizations distributed the survey through their classrooms while other organizations offered surveys through their offices with return mail envelopes. The highest response rate came from organizations that

offered a daily service to clients where surveys could be dropped off and where staff members were available to answer questions as well as to follow up and ask if families had completed a survey. In this case, direct contact helped ensure surveys were completed and returned.

Based on the above noted concerns, we offer the following recommendations for future efforts to conduct a family survey:

- Specific efforts should be made to contact families who do not have care. This can be done by distributing surveys through resource and referral agencies, healthcare offices, and DTA offices.
- A method for tracking the number of surveys sent, how they were sent, and to whom should be developed and implemented so a response rate can be calculated and used to determine how representative the sample is of families living in Boston.
- Since the response rate was highest among families who had more direct contact with service organizations staff, it will be important to foster ways of contacting respondents directly. This can be done through continued partnerships with direct service organizations. Direct contact can also be increased by conducting phone surveys. Phone surveys are often prohibitively expensive because of the cost of paying people to make the phone calls, but if this is considered a priority, additional efforts can be made to find volunteers or identify additional funding sources to support the increased expense.

### *Survey Design*

The survey was designed by the Department of Education, with input from Community Partnership organizations. This was the second time the Family Survey had been conducted in Massachusetts, so there were some problems with the survey design. First and foremost, the survey was too long. In all, the survey was eleven pages and had a total of twenty questions. The length of the survey may have deterred families from completing and returning it.

Another related issue was that many of the questions were confusing in both the way questions were asked and in the format for filling in the answers. One of the most confusing aspects of the questions was whether respondents were answering for one, some, or all of their children. Some questions were general, asking families, for example, about their satisfaction with the care they used. Respondents were not directed to answer for any particular child in this type of question, so it is unknown whether families felt this way about all the types of care they were accessing or if they were responding to one type of care. Other

questions asked respondents to answer for their youngest children (up to three children). These questions were often printed in chart format and the respondents would check all that apply for child #1, #2, and #3. While the charts were created to make the questions easier to read and fill-out, these charts were often confusing and unclear. This was apparent when reviewing the responses for each question. The more confusing the question, the higher the likelihood answers were not logically consistent. For example, some respondents indicated that their infant was in kindergarten. In these cases, it is clear that respondents did not understand the question or they had difficulty understanding how to fill out the chart.

A third issue was whether respondents were supposed to check only one box or “all that apply”. Again, the people who designed the survey made a great effort to clearly state how the respondent was supposed to answer, but the data analysis indicates there was confusion related to the number of boxes the respondent could check. This made analyzing some questions difficult because the confusion may have skewed the results.

The length of the survey, the charts, and the wording of the questions most likely impacted the number of surveys returned and it definitely impacted the reliability of the responses. Boston EQUIP recommends the following changes be made before distributing the survey again:

- Shorten the length of the survey. Families have little to no free time as they balance the obligations of work and family life. If a survey is long or complicated families are much less likely to complete it.
- Make the questions clear and concise. While the charts may have helped make some of the questions clearer, more needs to be done to make the questions easier to read and answer. Testing sample questions with a diverse group of families to assess how long it takes to answer the question and whether the format of the question is confusing would be valuable.
- Clarify whether the respondent is supposed to check one answer or all that apply. While we already tried to clarify this through written instructions, this can be further clarified through improved survey design.

## **Conclusion**

Responses from the first family survey in Boston revealed key information about the early care and education needs of families. Nearly 2 of every 3 parents who completed the survey had problems finding or using child care. For these parents both the cost of care and transportation remain as barriers to accessing child care. As families struggle with child care expenses, many indicated receiving government assistance, but employer support remains scarce. While this survey helped to clarify families' child care needs, much still remains to be learned through future, improved data collection.

## APPENDIX A: COMPARISONS TO 2002 U.S. CENSUS

Boston 2001-02 Parent Survey		
	Boston Parent Survey	U.S. Census Boston
<u>Family Type</u>		
Two Parent Family	44%	49%
One Parent Family	44%	51%
<u>Education</u>		
less than High School	15%	21%
HS diploma or GED	31%	24%
Some college	26%	15%
College degree	18%	25%
Graduate degree	8%	15%
<u>Language at Home</u>		
English	56%	67%
Non-English	21%	33%
Spanish	24%	14%
<u>Employment</u>		
employed	66%	59%
self-employed	N/A	5%
not employed	12%	5%
<u>Family Income from 2000 U.S. Census</u>		
less than \$10,000	24%	11%
\$10,000 - \$14,999	15%	6%
\$15,000 - \$24,999	25%	11%
\$25,000 - \$34,999	13%	12%
\$35,000 - \$49,999	8%	15%
\$50,000 - \$74,000	7%	19%
\$75,000 - \$99,999	3%	11%
\$100,000 - \$149,999	3%	9%
\$150,000 - \$199,999	1%	6%
Median family income	N/A	\$44,151
<u>Poverty Status</u>		
Families w/ children under 18 years		22%
Families w/ children under 5 years		25%

Community Profiles 2000-01 Parent Survey		
	MA Parent Survey	U.S. Census MA
<u>Family Type</u>		
Two Parent Family	87%	71%
One Parent Family	11%	29%
<u>Education</u>		
less than High School	2%	15%
HS diploma or GED	16%	27%
Some college	21%	17%
College degree	43%	27%
Graduate degree	18%	14%
<u>Language at Home</u>		
English	97%	81%
Non-English	3%	19%
Spanish	3%	6%
<u>Employment</u>		
employed	58%	63%
self-employed	8%	6%
not employed	4%	3%
<u>Income Family of 3 *</u>		
0-50% (below \$27,312)	16%	18%
50-85% (\$27,313 - \$46,428)	20%	18%
85-100% (\$46,429 - \$54,612)	11%	5%
100-125% (\$54,613 or more)	53%	55%
Median family income		\$61,664
<u>Poverty Status</u>		
Families w/ children under 18 years		10%
Families w/ children under 5 years		12%

## APPENDIX B: PARENT SURVEY DATA Boston 2001-2002

Number of surveys: 1,747

### **FAMILY DEMOGRAPHICS**

2. Which describes your family? *(Please check all that apply)*

(n=1689, 97%)

	<u>%</u>	<u>#</u>
Two parent	47	788
One Parent	47	789
Extended Family	11	180
Other	3	52

3. Please enter the number (#) of people living in your household that you consider family in each age group listed below *(include yourself)*

(nADULT=1691, 97%)

	<u>avg</u>	<u>#</u>
Adults ( $\geq 18$ )	1.9	1691
Adolescents (13-17)	1.3	327
Pre-adolescents (9-12)	1.2	479
Children (5-8)	1.2	883
Preschoolers (2.9 – 4.11)	1.1	887
Toddlers (15m – 2.8)	1.0	297
Infants ( $\leq 15$ m)	1.0	210
Total in home	4.0	1705

## **ADULT INFORMATION**

7. What language(s) are spoken in your home? (*Please check all that apply.*)

(n=1736, 99%)

	<u>%</u>	<u>#</u>
Arabic	1	21
Cantonese	5	87
Cape Verdean	1	22
Creole	5	84
Vietnamese	3	45
English	76	1312
French	3	55
Greek	> 1	7
Haitian	3	57
Spanish	33	567
Khmer	> 1	1
ASL	> 1	9
Mandarin	1	16
Portuguese	1	19
Russian	> 1	1
Italian	1	14
Other	3	49

9. (A) **Would you change** your current child care arrangements if cost, time, or transportation were **not** an issue?

(n=1632, 93%)

	<u>%</u>	<u>#</u>
Yes	31	500
No	69	1132

(B) **IF YES**, what would you like to change? (*Check all that apply*)

(n=488, 98% of those who said yes to 9A)

	<u>%</u>	<u>#</u>	<u>avg</u>
Type of arrangement	22	105	
Quality of program/provider	32	154	
Location	50	245	
Closer to home	85	186	
Closer to work	2	49	
Other	7	16	
Hours per day	38	186	
More hours	90	143	4
Less hours	11	17	10
Days per week	14	70	
More days	74	52*	
Less days	27	19*	

\* one respondent checked both "more days per week" and "less days per week"

10. Do you have a child with a disability?

(n=1570, 90%)

	<u>%</u>	<u>#</u>
Yes	9	145
No	91	1436

11. Does the caregiver meet the needs of your child with a disability?

(n=125, 86% of those who said yes to Q10)

	<u>%</u>	<u>#</u>
Never	10	12
Sometimes	18	23
Often	22	27
Always	50	63

13. How did/do you find out about early education and care services? *(Please check all that apply.)*

(n=1590, 91%)

	<u>%</u>	<u>#</u>
Medical personnel	11	168
Child care provider	12	195
Family/friends	50	797
Internet	4	61
R&R	9	135
Service agency	7	109
Library	2	29
DSS	3	39
MFN	1	10
WIC	6	99
Pamphlets/posters	7	123
PS screening	4	55
Telephone inquiry	4	62
PS	11	173
Media	5	84
CPC	3	40
State agency	3	48
Other	15	237

17. How does the cost of child care affect your family situation? *(Please check all that apply.)*

(n=1336, 76%)

	<u>%</u>	<u>#</u>
No impact	43	579
Can't save money	36	484
Can't afford luxuries	15	204
Can't afford necessities	9	126
Borrowed money	7	93
Unpaid bills	18	246
Used up savings	9	119
Bare minimum for living	15	194
Went into debt	5	71
Sold assets	1	7
Dropped health insurance (self)	1	18
Dropped health insurance (family)	1	14
Lost/quit job	3	42
Went on welfare	4	48
Other	4	59

## APPENDIX C: SATISFACTION WITH CARE

### Parent Survey Boston 2001-2002

Number of surveys: 1,747

#### ANALYSES BY CLUSTER

9. (A) Would you change your current child care arrangement if cost, time, or transportation were **not** an issue?

Cluster	Percentage That Would Change Care
1. Allston/Brighton (N=42)	23.8
2. Charlestown, North End (N=62)	29.0
3. Hyde Park, Roslindale, W. Roxbury (N=260)	29.2
4. Roxbury, Jamaica Plain (N=302)	31.1
5. South End, Chinatown, Fenway (N=100)	41.0
6. Dorchester (N=305)	33.8
7. East Boston (N=251)	26.7
8. Mattapan (N=116)	37.1
9. South Boston (N=119)	19.3
Overall (N=1557)	30.5

(B) IF YES, what would you like to change?

Cluster	Type of arrangement	Quality of program/provider	Location	Hours per day	Days per week
1. Allston/Brighton (N=10)	30.0	30.0	60.0	40.0	20.0
2. Charlestown, North End (N=18)	38.9	16.7	38.9	33.3	11.1
3. Hyde Park, Roslindale, W. Roxbury (N=76)	21.1	21.1	42.1	40.8	21.1
4. Roxbury, Jamaica Plain (N=94)	17.0	30.9	50.0	39.4	10.6
5. South End, Chinatown, Fenway (N=41)	26.8	58.5	36.6	14.6	4.9
6. Dorchester (N=103)	14.6	35.0	43.7	44.7	11.7
7. East Boston (N=67)	22.4	19.4	58.2	26.9	14.9
8. Mattapan (N=43)	16.3	23.3	39.5	41.9	11.6
9. South Boston (N=23)	21.7	17.4	47.8	26.1	17.4
Overall (N=475)	20.6	29.9	48.6	37.4	13.8

## APPENDIX D: IMPACT OF CHILD CARE COSTS

### Parent Survey Boston 2001-2002

*Number of surveys: 1,747*

“How does the cost of child care affect your family situation” (Question 17) by Family Type (Question 2)

	<b>2-Parent (N=788)</b>	<b>1-Parent (N=789)</b>	<b>Extended (N=180)</b>	<b>Other (N=52)</b>
No impact	34.9	31.1	40.6	28.8
Unable to save money	28.2	28.0	22.8	23.1
Unable to afford luxuries	13.6	11.3	9.4	7.7
Unable to afford necessities	5.1	10.0	6.7	3.8
Borrowed money	3.7	6.7	5.0	5.8
Have unpaid bills	10.8	18.0	12.8	17.3
Used up savings	5.8	7.4	9.4	9.6
Have bare minimum for living expenses	9.4	13.4	11.1	9.6
Went into debt	2.8	5.6	1.7	3.8
Sold major assets	0.5	0.3	0.6	1.9
Dropped health insurance for self	0.6	1.6	0.6	1.9
Dropped health insurance for self and family	1.4	0.4	0.6	1.9
Lost or quit job	2.3	2.3	3.9	0.0
Went on welfare	0.6	4.9	1.7	5.8