



REPORT

Parent Survey on Searching for Child Care in the District of Columbia during the Pandemic

Technical Report

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Parent Survey on Searching for Child Care in the District of Columbia during the Pandemic

This report documents the steps we took to design and administer a telephone survey of parents and guardians residing in the District of Columbia (DC) regarding their recent experiences looking for and selecting a child care provider. Data collection occurred in April through July 2022 after the height of the COVID-19 pandemic. All study participants had a child younger than age 6 who was enrolled in a licensed child care program within the past academic year. The survey gathered information on the ease of accessing information about child care options, experiences searching for and selecting care, perceptions of local care supply and the availability of high-quality child care particularly in light of the COVID-19 pandemic, and perceptions regarding how the child care provider they use does or does not support their child's growth and development. Respondents also reported on their knowledge and use of quality ratings from DC's child care quality rating and improvement system (QRIS) called Capital Quality (box 1).

In this report, we describe the survey development process, recruitment and data collection procedures, characteristics of the survey sample, and steps taken to clean and analyze the survey data. A companion report presents key survey findings.¹

Motivation for the Survey

The survey was conducted as part of Project ASQC ("Ask"—Access to a Supply of Quality Child Care in the District of Columbia), funded through a Child Care Policy Research Partnership Grant from the Office of Planning, Research, and Evaluation (OPRE) in the Administration for Children and Families (ACF), US Department of Health and Human Services (HHS). Project ASQC addresses the pressing need for research on the supply of quality child care and investments in quality improvement initiatives. We are partnering with the District of Columbia's Office of the State Superintendent of Education (OSSE) on this work.

Earlier study components examined providers' experiences with Capital Quality and their efforts to implement continuous quality improvement plans during the pandemic (Schilder et al. 2022) as well as the experiences and well-being of early educators working in DC child care facilities during the pandemic (Hernandez-Lepe et al. 2022; Sandstrom, Casas, Hernando-Lepe et al. 2022; Sandstrom,

Casas, Willenborg et al. 2022; Willenborg, Sandstrom, and Greenberg 2022). The purpose of the parent survey was to examine the perspectives of DC parents and guardians (collectively referred to as “parents” in this report) who recently enrolled their child in a licensed child care facility. The original goal was to understand how Capital Quality affects parental child care search and selection, but given the pandemic’s effect on the child care market, we expanded our focus to examine how COVID-19 affected parents’ care preferences and the ways parents search for and select care.

BOX 1

Capital Quality

What Is Capital Quality?

Launched in 2016 and fully implemented by 2018, Capital Quality is the District of Columbia’s QRIS. It uses consistent, research-based measures of program quality across care settings to determine quality levels. Providers receive ongoing technical assistance, incentives, and resources, and participate in communities of practice to help them reach higher levels of quality. Quality facilitators are certified coaches that work with providers to develop and implement a continuous quality improvement plan. A website called My Child Care DC (<http://mychildcaredc.com/>) allows families to search for care based on Capital Quality designation and was designed so families could easily identify, review, and compare available options to make more informed decisions.

Who Participates?

Licensed child development facilities in the District that serve children from birth through age 5 with a signed agreement with OSSE for subsidized child care are automatically enrolled in Capital Quality. Other licensed child development facilities are encouraged to participate as volunteers.

How Are Quality Designations Determined?

All facilities participating in Capital Quality are observed by a trained, external observer using a validated tool—the Environment Rating Scales® (ERS®) or the Classroom Assessment Scoring System Pre-K® (CLASS Pre-K®), depending on their facility type and ages served. OSSE uses ERS® and/or CLASS Pre-K® scores to assign one of five Capital Quality designations: Developing, Progressing, Quality, High-Quality, and Preliminary (for facilities new to Capital Quality that are still being observed). Designations are based on the extent of evidence (considerable, good, adequate, or minimal) that “the program provides a nurturing environment with supportive interactions that promotes children’s cognitive, physical and social-emotional development.” Observations should occur annually but were paused during the pandemic, so designations reflect observational data from 2019.

Source: “Capital Quality (QRIS),” DC OSSE, accessed October 7, 2022, <https://osse.dc.gov/page/capital-quality-qris>.

Our survey aimed to address the following questions:

1. What are parents' experiences looking for child care? What sources of information do they use? How long does it take to find care?
2. What factors are most important to parents as they look for and select a provider?
3. How do parents rate their provider's quality?
4. What are parents' perceptions of local care supply? Do parents feel they have good care choices?

Eligible Survey Sample

Initially, we planned to survey parents using licensed child care providers that participate in Capital Quality (about half of licensed providers do; Greenberg et al. 2021). We ultimately expanded the sample to include parents using any licensed provider to learn whether they were aware of Capital Quality and DC's online child care search tool that lists quality ratings. This expanded sample provided the opportunity to analyze a subgroup of parents not in quality-rated facilities. Providers participating in the child care subsidy program are required to participate in Capital Quality, so this resulted in parents in quality-rated facilities being more likely to receive a subsidy. Our unrestricted sample of quality-rated and non-quality-rated facilities provided a more general perspective of DC parents using licensed care arrangements.

We identified parents eligible for the survey through their child care providers. We asked providers to share flyers about the study with families who recently enrolled a child in their program, specifically since the start of the 2021–22 academic year (i.e., August or September 2021). By targeting new enrollees, we were able to ask survey respondents about their experiences looking for and selecting a child care provider in the past year. Because of pandemic-related safety protocols, we were unable to visit facilities in person to pass out study flyers to families. We relied on child care providers to share information about the study because they have frequent contact with parents and are most knowledgeable about which parents would be eligible for the study. The flyer also detailed the eligibility criteria: respondents must be at least 18 years old, live in DC, and be a parent or guardian to a child younger than age 6 who recently enrolled in a licensed child care facility in DC.

Survey Questionnaire

Targeted Research Constructs

Before drafting a survey questionnaire, we developed a set of research constructs that aligned with the survey purpose and key research questions. We used these research constructs to help identify existing survey questions, draft new questions, and organize the survey sections by domain. Table 1 shows a list of targeted research constructs for each survey domain of interest.

TABLE 1
Crosswalk of Research Constructs by Survey Domain

Domain	Targeted research constructs
Background	<ul style="list-style-type: none"> ■ Relationship to child ■ Child age ■ Number of older or younger siblings ■ Subsidy voucher receipt ■ Previous use of licensed child care and unlicensed, informal care ■ Care schedule
Child care search	<ul style="list-style-type: none"> ■ Reasons for care search ■ Number of options considered ■ Length of search ■ Level of difficulty finding care ■ Perspective on local care supply ■ Resources or information used during search
Child care selection	<ul style="list-style-type: none"> ■ Priorities and preferences for a child care provider ■ Experience with a waiting list ■ Main reason for selecting current child care provider ■ Presence of another preferred provider
Child care quality	<ul style="list-style-type: none"> ■ Recommendation of facility to a friend or family member ■ Nurturing environment ■ School readiness or prosocial behavior development ■ Safety (physical and health) ■ Child-to-staff ratio ■ Affordability or cost ■ Schedule ■ Cultural sensitivity or celebration of racial and ethnic diversity ■ Communication with parents ■ Location
Consumer education tools	<ul style="list-style-type: none"> ■ Experience with My Child Care DC website ■ Familiarity with Capital Quality ■ Opinion on quality rating and improvement systems
Demographics	<ul style="list-style-type: none"> ■ District ward ■ Language spoken at home ■ Parent and child race and ethnicity ■ Parent age, marital status, and highest level of education ■ Household income

Source: 2022 DC Parent Survey.

Survey Development

Once we had a draft survey questionnaire, we conducted cognitive testing in English with two parents of young children. Simultaneously, a native, fluent Spanish speaker on the research team translated the survey questionnaire into Spanish and a second native, fluent Spanish speaker on the team reviewed the translation and made improvements. Then, we conducted cognitive testing in Spanish with a Spanish-speaking parent. Parents involved in cognitive testing were identified through DC Child Care Connections, the District's Child Care Resource and Referral (CCR&R) system. We found the cognitive-testing participants were very knowledgeable and capable of providing useful feedback on the clarity, relevance, and flow of survey questions. We implemented changes to the English and Spanish questionnaires based on cognitive testing.

Once survey questionnaires were finalized, we used Qualtrics software to program the surveys so they could be administered as computer-assisted telephone interviews in English or Spanish. We tested the web survey internally to check accuracy of text and skip patterns and test for length. The target length was 30 minutes, and we modified the questionnaire further to reduce length given the results of internal testing.

Recruitment and Data Collection Procedures

Outreach to Child Care Providers

We recruited parents through their child care providers given our interest in learning about how parents found their current child care providers and why they selected them. Our focus was on parents using licensed child care. We maintained this focus because of OSSE's interest in supporting parents searching for licensed providers and their desire to know whether parents are finding providers that meet their needs and are satisfied with their care.

Recruitment occurred in multiple phases. In phase 1, we conducted outreach to 36 directors of licensed child development centers, homes, and expanded homes who we interviewed for an earlier study component. We had selected them using a stratified random sampling approach, with stratification by DC ward and care type (i.e., center, home, or expanded home), and for centers, total licensed capacity to identify small centers and large centers. When we reached out, we asked providers to share a study flyer with eligible parents. Twenty-three of the 36 providers we interviewed agreed to support our recruitment efforts and share the flyer and study information with eligible parents. The remaining 13 programs were

either temporarily or permanently closed ($N = 6$), were not responsive to our phone calls and email attempts ($N = 4$), or declined participation because of concerns about burden on program staff and parents ($N = 3$).

In phase 2, we sampled an additional 27 child care facilities participating in Capital Quality using the same stratification criteria as we previously used so, together, the 50 sampled facilities would be representative of quality-rated, licensed facilities in terms of distribution across DC wards and care types. Several programs were hard to reach and not responsive to our emails and phone calls. After multiple attempts at contacting them, we moved to replace nonresponsive providers with another provider in the same stratum in the sampling frame. By replacing providers who were closed, hard to reach, and had declined (a combined total of 44 providers), we ultimately reached out to 92 providers to obtain 48 from which we could recruit families.

In our early communication with providers, we learned that most had few new children enroll since the start of the 2021–22 academic year, and thus, few new families were eligible for our survey. We recognized the limitation of recruiting through a subset of licensed providers. To ensure we could recruit a sufficient sample size, we adjusted our recruitment approach. We mailed hard copies of recruitment flyers to all providers that participate in Capital Quality who we had not yet contacted, for a total of 149 additional providers. The mailings included a cover note requesting providers' support in distributing flyers to eligible parents.

We also sought support from DC Child Care Connections, the local CCR&R, to share the flyer with their parent networks. We ultimately opened the study to parents using a licensed child care program that does not participate in Capital Quality after some parents heard about the study and contacted the research team to sign up. We determined that if we had a sufficient number of parents using non-Capital Quality facilities (more than 10) we could survey and possibly analyze them as a separate subgroup. This approach allowed for us to examine possible differences in experiences between parents using a provider in Capital Quality and those using a provider not in Capital Quality.

Parent Sign-Up Form

Because providers are unable to share lists of enrolled children and parents' contact information to protect their privacy, we used passive recruitment efforts to invite eligible parents to sign up to participate in the survey. We developed a flyer that included information about survey participation and the research team's email address and phone number to contact if interested. The flyer also included a QR code parents could scan, which directed them to a sign-up form via Qualtrics. The sign-up form asked for the parent's name, email address, phone number, and the name of their child care facility, and it asked respondents to

check boxes to confirm their eligibility (i.e., at least 18 years old, DC resident, parent or guardian of a child younger than age 6, enrolled in a child care program in August 2021 or later). We called parents who signed up to confirm eligibility, answer parents' questions, and formally recruit them into the study. Several parents reached out directly by email or phone instead of or in addition to filling out the sign-up form. We similarly called to screen them for eligibility and recruit them into the study.

Our team created a data dashboard during study recruitment to track the child care facilities where participating families were enrolled. Analytics from our data dashboard showed the counts of participants in each licensed child care facility, in each DC ward, and by care type (child development center, child development home, and expanded child development home). We used the dashboard to inform our recruitment efforts. For example, we conducted additional outreach and made additional call attempts to parents enrolled in child development homes and expanded homes and to parents enrolled in child care facilities in underrepresented wards.

Across the study recruitment period, 247 parents signed up to participate. Among those, 47 were classified as hard to reach after the research team made repeated attempts to call and email the parent with no success in reaching them. Another 40 parents were reached but classified as ineligible because of their age, residence outside of DC, and most commonly, enrolling in their child care program earlier than August 2021. Finally, 8 were reached but when contacted were no longer interested in participating. In a few cases where more than 7 parents from the same child care program signed up, we recruited only the first 7 and contacted the others only if a selected parent was ineligible or hard to reach. Limiting to 7 ensured parent representation across child care programs and avoided having too many parents from the same program and neighborhood. As such, 16 parents signed up, but we did not recruit or include them in the study because we had already interviewed 7 parents from their child care program. In total, we successfully recruited and completed telephone surveys with 137 parents or guardians from 64 different child care facilities distributed across DC's eight wards.

Survey Administration

Five researchers at the Urban Institute were trained to recruit families and administer the telephone survey. As they conducted the survey, they entered responses into the web-based Qualtrics survey questionnaire. For open-ended questions, they typed verbatim responses in the write-in survey fields. Two interviewers were bilingual, native Spanish speakers. Thirteen surveys were conducted in Spanish and the other 124 in English. Interviews were completed in one session and lasted 30 minutes on average.

We offered survey respondents a \$50 Visa gift card, with the choice of a Visa e-gift card for online purchases only or a physical Visa gift card we mailed to their home. The majority (about 80 percent) requested an e-gift card.

Data Cleaning and Analysis

After completing data collection, we downloaded the Qualtrics survey dataset and reviewed and cleaned responses using Stata software. Write-in responses for open-ended questions were exported to an Excel spreadsheet. Data-cleaning steps included recoding variables to account for skip patterns, constructing new variables (e.g., focal child age at time of survey), and fixing typos for write-in responses.

For each survey case, we merged on information about their child care facility that we obtained from OSSE through a data-sharing agreement (e.g., Capital Quality designation). We used the child care facility name to match records. The linked data allowed us to compare parents' survey responses by the characteristics of their child care programs.

We also used the linked data to complete sample analyses to better understand the child care facilities represented and not represented in the sample. Specifically, we examined nonresponse bias, which can occur when participants who refuse to take part in a study are systematically different from those who participate. Because we did not have a count of the total number of eligible parents across child care facilities or information about all eligible parents, we were unable to calculate a survey response rate or examine nonresponse bias at the parent level. However, we used the linked data on child care facilities to examine the characteristics of the facilities in which survey participants were enrolled compared with child care facilities in DC overall. Although our survey design did not attempt to achieve a representative sample, we examined the extent to which the 64 facilities represented in the sample were similar to licensed child care facilities in DC overall and areas where facilities were over- or underrepresented (table 2). This contextual information helps with interpreting survey findings.

TABLE 2

Characteristics of the Child Care Facilities Where Children of Surveyed Parents Are Enrolled*Comparison of represented facilities to CQ-participating facilities and all DC child care facilities*

	Facilities Represented in Survey		CQ-Participating Facilities		All DC Facilities	
	N	Percent	N	Percent	N	Percent
Number of facilities	64		228		486	
Ward where facility is located						
Ward 1	9	14%	23	10%	37	8%
Ward 2	5	8%	7	3%	56	12%
Ward 3	2	3%	6	3%	39	8%
Ward 4	11	17%	40	18%	92	19%
Ward 5	7	11%	27	12%	63	13%
Ward 6	7	11%	21	9%	60	12%
Ward 7	13	20%	46	20%	62	13%
Ward 8	10	16%	58	25%	77	16%
Facility type						
CDC	57	89%	174	76%	377	78%
CDH	1	2%	31	14%	59	12%
CDX	6	9%	23	10%	50	10%
Capital Quality-participating						
Yes	48	75%	228	100%	228	47%
No	16	25%	N/A	N/A	258	53%
Capital Quality designation						
High-Quality	10	25%	33	15%	33	7%
Quality	19	30%	70	31%	70	14%
Progressing	14	22%	80	35%	80	17%
Developing	0	0%	8	2%	8	2%
Preliminary	5	8%	37	16%	37	8%
Nonparticipant	16	25%	N/A	N/A	258	53%

Sources: 2022 DC Parent Survey, child care licensing data reflecting facilities in November 2021, and Capital Quality administrative data obtained from the DC Office of the State Superintendent of Education.

Notes: CQ = Capital Quality, CDC = child development center, CDH = child development home, CDX = expanded child development home. Capital Quality participation status and designation are from November 2021 records; however, the designations shown are based on observations conducted in 2019 before the COVID-19 pandemic.

As shown in table 2, the characteristics of the facilities in our sample closely resemble the characteristics of facilities in DC overall. Our sample includes facilities across all eight DC wards, with facilities distributed in similar percentages across the eight DC wards as all facilities in DC. Compared with all facilities in DC, our sample has an overrepresentation of ward 1 and 7 facilities, an underrepresentation of ward 2 and 3 facilities, and a slight underrepresentation of ward 4, 5, and 6

facilities. Our sample is primarily composed of parents who attend child care centers, with only 11 percent representing child care homes and extended homes combined, compared with 24 percent combined among Capital Quality-participating facilities and 22 percent combined among all DC facilities. Because our recruitment strategy originally targeted Capital Quality-participating providers exclusively, most represented facilities (75 percent) participate in Capital Quality, compared with 47 percent of all facilities in DC. Finally, 25 percent of our survey sample used child care facilities rated High Quality, 30 percent were rated Quality, 22 percent were Progressing, and 8 percent were Preliminary. No parents in our survey sample used a facility that was rated Developing. Compared with Capital Quality-participating facilities and all facilities in DC, facilities used by our survey sample have a larger share of High-Quality designations.

Subsequent data analyses included descriptive analyses of survey responses and comparisons of responses based on parents' characteristics (e.g., subsidy recipients compared with parents not receiving a subsidy; parents with previous experience using licensed child care or searching for care in DC). Multivariate analyses modeled the associations between parents' characteristics and their child care search experiences (e.g., level of ease or difficulty, their rating of child care supply in DC). We also reviewed and coded qualitative data in Excel to identify key themes related to three primary topics: (1) parents' child care search experiences and what was easy or hard about them, (2) their thoughts on Capital Quality and QRIS generally, and (3) their use of My Child Care DC and suggestions for improvement in website features and search functions.

Survey Sample Characteristics

This section provides demographic information about surveyed parents (table 3) and their children (table 4) and key characteristics of the child care facilities they used (table 5), such as DC ward, Capital Quality participation, and quality designation for Capital Quality participants.

It was important to have representation across the eight wards in the District of Columbia so we could capture the perspectives of parents living in different neighborhoods. We were successful with our recruitment efforts to have parents participating across wards, although the sample size for ward 2 was small (fewer than 10 participants). In contrast, wards 4, 7, and 8 had the most participants (table 3), which reflects the large child populations in those wards.² Wards 7 and 8 are home to more than one-third of DC's children.³

TABLE 3

Demographic Characteristics of Surveyed Parents*DC parents who enrolled a child younger than age 6 in licensed child care in school year 2021–22*

Characteristic	N	% or value
Residential ward		
Ward 1	12	9%
Ward 2	–	–
Ward 3	12	9%
Ward 4	26	19%
Ward 5	17	13%
Ward 6	10	7%
Ward 7	23	17%
Ward 8	28	21%
Relationship to child		
Mother	118	86%
Father	13	10%
Other	--	--
Race and ethnicity		
Black or African American alone	73	53%
Hispanic, Latino, or Spanish origin	17	12%
White alone	32	23%
Other races and two or more races	15	11%
Languages spoken at home		
English	127	93%
Spanish	26	19%
Other languages	15	11%
Average age (in years)	136	34.8
Marital status		
Married	67	49%
Single	62	45%
Other or prefer not to answer	–	–
Education level		
Less than high school diploma	11	8%
High school graduate or equivalent	25	18%
Some college credit but no degree	11	8%
Associate degree	11	8%
Bachelor's degree	28	20%
Master's degree	31	23%
Professional degree	16	12%
Other	–	–
Median household income	121	\$65,000
Receives child care subsidy	56	41%

Source: 2022 DC Parent Survey.

Notes: The responding sample sizes for these items ranged from 121 to 137 respondents. Cells with fewer than 10 observations are suppressed. The racial or ethnic group “Other races” includes multiple groups, including Asian, that are too small to report separately without compromising confidentiality. Sixteen participants (11.7 percent of sample) chose to skip the question about household income; therefore, our calculations about median household income are based on a sample size of N = 121. Languages spoken at home are not mutually exclusive and do not sum to 100 percent. Some categories may not sum to 100 because of rounding.

TABLE 4
Demographic Characteristics of Focal Children of Surveyed Parents
Children younger than age 6 enrolled in DC licensed child care facility

Characteristic	N	%
Child’s age category		
Infants (younger than 12 months)	20	15%
Toddlers (12 to 36 months)	83	61%
Preschoolers (37 to 60 months)	34	25%
Has siblings		
No	60	44%
Yes	77	56%
Older siblings	65	84%
Younger siblings	12	16%
Race and ethnicity		
Black or African American alone	70	51%
Hispanic, Latino, or Spanish origin	13	10%
White alone	30	22%
Asian	-	-
Two or more races	22	16%

Source: 2022 DC Parent Survey.

Notes: The responding sample sizes for these items were 137. Parents responded to the survey for a single select child they recently enrolled in child care.

We see that parents in our sample closely resemble the DC adult population in terms of race and ethnicity.⁴ Parents largely identified as Black or African American (53 percent), while 23 percent identified as white, 13 percent identified as Hispanic, Latino, or of Spanish origin, and another 11 percent included parents who identified as another race or ethnicity (table 3). Similarly, the focal children of the parents we surveyed are racially and ethnically comparable with the overall racial and ethnic diversity of young children in DC (table 4), based on our comparison with data from the Kids Count Data Center.⁵

DC ranks among the most educated large cities in the US, so we see that more than half of our survey sample has a minimum of a bachelor’s degree. The percentages here closely mirror published data on educational attainment among DC adults.⁶ Parents across a wide range of income levels were

surveyed, capturing the economic diversity in the District. However, the median household income of surveyed parents was \$65,000—much lower than the overall median household income of DC families with children (\$105,010 in 2020).⁷ Nearly 41 percent of parents were receiving a child care subsidy at the time of the survey. This is similar to the percentage of total licensed capacity for children receiving subsidy (46 percent), as reported by OSSE in 2019.⁸ DC does not have a waiting list for subsidies. The income threshold to enroll is 250 percent of the federal poverty level, which is higher than the threshold in many other states.

More than half of parents (61 percent) were looking for care for toddlers between ages 12 and 36 months, whereas 25 percent were looking for care for preschoolers ages 3 to 5 and 15 percent for infants younger than 12 months. About half (56 percent) of focal children had a sibling and most of those siblings were older (84 percent).

The wards in which parents were using child care closely matched the wards where they lived (table 5). Most parents (93 percent) used child development centers. The majority of the parents we surveyed (79 percent) were using providers participating in Capital Quality. More than half of parents were using child care providers with a Capital Quality designation of High-quality or Quality. Less than 20 percent of parents were using providers with Progressing designations and 9 percent were using providers with a Preliminary designation. We had no parents in our sample who were using providers with a Developing Capital Quality designation.

Although we did not draw a random sample, our recruitment approach generated a racially and economically diverse sample of families with a sizeable subsample of families who receive a subsidy. The variation in ward of residence, child age, presence of a sibling, and birth order also offers diverse perspectives to strengthen the validity of findings and to inform OSSE's priorities around equitable access for DC families.

TABLE 5

Distribution of Survey Sample by Location and Characteristics of Their Child Care Facilities*The count and share of surveyed parents*

Characteristic of child care facility	N	Percent
Ward		
Ward 1	15	11%
Ward 2	10	7%
Ward 3	10	7%
Ward 4	23	17%
Ward 5	10	7%
Ward 6	19	14%
Ward 7	30	22%
Ward 8	20	15%
Facility type		
CDC	128	93%
CDH or CDX	9	7%
Capital Quality-participating		
Yes	108	79%
No	29	21%
Capital Quality designation		
High-quality	31	23%
Quality	40	29%
Progressing	25	18%
Preliminary	12	9%
Nonparticipant	29	21%

Sources: 2022 DC Parent Survey, child care licensing data reflecting facilities in November 2021, and Capital Quality administrative data obtained from the DC Office of the State Superintendent of Education.

Notes: The sample size for this table is 137. Capital Quality participation status and designation are from November 2021 records; however, the designations shown are based on observations conducted in 2019 before the COVID-19 pandemic.

Notes

- ¹ Research briefs and other study products may be found on the project landing page on the Urban Institute website: “DC Child Care Policy Research Partnership,” accessed October 7, 2022, <https://www.urban.org/policy-centers/center-labor-human-services-and-population/projects/dc-child-care-policy-research-partnership>.
- ² “Population by Age Group by Ward in District of Columbia, 2020, Children under 5,” Annie E. Casey Foundation Kids Count Data Center, updated March 2022, <https://datacenter.kidscount.org/data/tables/6747-population-by-age-group-by-ward?loc=10&loct=21#detailed/21/1852-1859/false/574/123/13833>.
- ³ “Population by Ward,” DC Kids Count, accessed October 7, 2022, <https://dckidscount.org/demographics/>.
- ⁴ “Race and Ethnicity of Adults and Children,” DC Office of the Deputy Mayor for Education, accessed October 7, 2022, <https://edscape.dc.gov/page/pop-and-students-race-and-ethnicity-adults-and-children>.
- ⁵ “Child Population by Race and Age Group in District of Columbia, 2020, Age Group 0–4,” Annie E. Casey Foundation Kids Count Data Center, updated October 2022, <https://datacenter.kidscount.org/data/tables/8446-child-population-by-race-and-age-group?loc=10&loct=3#detailed/3/any/false/574/68,69,67,12,70,66,71,13|62/17078>.
- ⁶ Richard Florida, “Where Do College Grads Live? The Top and Bottom U.S. Cities,” *Bloomberg*, August 23, 2019, <https://www.bloomberg.com/news/articles/2019-08-23/ranking-america-s-most-educated-cities>.
- ⁷ “Median Income of Families with Children by Ward in District of Columbia, 2020,” Annie E. Casey Foundation Kids Count Data Center, updated March 2022, <https://datacenter.kidscount.org/data/tables/6749-median-income-of-families-with-children-by-ward#detailed/3/any/false/574/any/13835>.
- ⁸ Fiscal Year 2019 Performance Oversight Hearing Responses: “Question 16,” DC OSSE, accessed October 7, 2022, <https://osse.dc.gov/page/fy19-performance-oversight-questions>.

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