



RESEARCH REPORT

What Child Care Arrangements Do Parents Want during Nontraditional Hours?

Insights from Parents in Connecticut, the District of Columbia, and Oklahoma

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Contents

Acknowledgments	v
Executive Summary	viii
Introduction	1
Research Methods	3
Focal Communities	3
Survey Analysis to Assess the Potential Demand for Nontraditional-Hour Child Care	4
Parent Interviews	4
Key Informant Interviews	5
What’s in This Report?	6
Setting the Context: What Is the Potential Demand for Nontraditional-Hour Child Care in Our Focal Sites?	7
Findings from the Parent Interviews	10
What Were the Characteristics of the Parents We Interviewed?	10
What Child Care Arrangements Did Parents Recommend and Use during Nontraditional Hours?	12
What Role Did Children’s Needs Play in Shaping Parents’ Recommendations for Nontraditional-Hour Child Care Options?	17
What Other Issues and Constraints Did Parents Report Concerning Nontraditional-Hour Care?	21
Implications for Policy and Practice	26
1. Take Steps across Child Care Policy Areas to Improve Supports for Nontraditional-Hour Child Care	27
2. Make Child Care Assistance through the CCDF More Available for Parents Working Nontraditional-hour Schedules	29
3. Support the Supply of Nontraditional Care Options That Parents Want	35
4. Ensure Systems That Protect Children’s Health and Safety and Encourage Quality Child Care Also Support Nontraditional-Hour Care Arrangements	36
5. Provide Parents with Information about Nontraditional-Hour Child Care Arrangements	41
6. Support Access to Nutritional Supports for Nontraditional-Hour Child Care through the Child and Adult Care Food Program	43
Conclusions and Next Steps	45
Appendix A. Objectives, Scope, and Methodology	48
Appendix B. Background on Key Child Care Policy Systems	57

Appendix C. Relative and License-Exempt Home-Based Care in the Focal Sites and Subsidies	61
Notes	63
References	68
About the Authors	70
Statement of Independence	71

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Executive Summary

Understanding the child care needs of parents working nontraditional-hour schedules is a growing area of interest for federal and state policymakers.¹ Currently, almost 5 million children (or about one-third of children) younger than age 6 living in families with working parents have parents who work before 7:00 a.m. or after 6:00 p.m. on weekdays or on weekends. Further, children of color, children in families with low incomes, and children in single-parent families are disproportionately likely to have parents working these hours.² Research indicates that those families face extra challenges finding child care, and they are less likely to get child care assistance (Rachidi et al. 2019). Despite these realities, however, very little is known about what child care arrangements these parents want during nontraditional hours or about the policy constraints and opportunities that may affect their ability to access the care they want.

This executive summary presents findings from a mixed-methods study that begins to explore these questions. Specifically, our research team designed this study to answer the following questions:

1. What do we know about the potential demand for child care during nontraditional hours?
2. What child care arrangements do parents of young children recommend and use for nontraditional hours?
3. What role do children's needs play in shaping parents' recommendations for nontraditional-hour child care?
4. What other constraints and issues do parents report concerning nontraditional-hour child care?
5. What are the implications of the answers to these questions for policy and practice?

Our Approach

To address these questions, we worked with state and local partners to conduct a mixed-methods study focused on Connecticut, the District of Columbia, and Oklahoma from January 2020 through October 2021. Our study involved the following components:

- **Survey data analysis.** We analyzed data from the 2014–18 American Community Survey (ACS) and the 2016 Survey of Income and Program Participation (SIPP) for each state and the District of Columbia to identify how many children younger than age 6 with working parents had

parents who were working nontraditional-hour schedules and to understand these children’s characteristics. In early 2021, we published three briefs—one for each site—with our study findings (Adams et al. 2021a, 2021b, and 2021c).

- **Parent interviews.** In a select community in each state and the District of Columbia (described more in a later section), we interviewed 41 parents working nontraditional hours who had at least one child age 5 or younger and had not started kindergarten. We asked these parents what child care arrangements they would recommend to a hypothetical friend to use during different time frames (before 7:00 a.m., after 6:00 p.m., overnight, and on weekends). Parents were also asked about considerations that shaped their views.
- **Stakeholder interviews and document review.** We talked with local, state, and national stakeholders, experts, and policymakers, and reviewed policy documents to understand the policy context shaping parents’ ability to access the nontraditional-hour care options they felt were best for their young children.

We worked with our state partners to identify a geographical area in each state and Washington, DC, for our parent interviews. We focused on a set of urban-suburban communities in Connecticut (New Haven, West Haven, Hamden, Fair Haven, and Hartford), select neighborhoods in the District of Columbia, and a mostly rural area including several counties in southeastern Oklahoma. These sites were chosen to provide a mix of rural, urban, and suburban communities; include parents from a variety of racial and ethnic groups; and engage working parents with lower incomes. For more information on our methodology, see the description in the full report and appendix A.

Key Findings

The following section summarizes our key findings for each of the primary research questions previously mentioned. We first set the context by examining the potential demand in our focal states and Washington, DC, and then present the findings from our parent interviews. We conclude with a discussion of the implications of these findings for policy and practice.

Setting the Context: What Was the Potential Demand for Nontraditional-Hour Child Care in Our Focal Sites?

As shown in figure E.1, our analyses of national survey data for Connecticut, Oklahoma, and Washington, DC, revealed the following (Adams et al. 2021a, 2021b, and 2021c):³

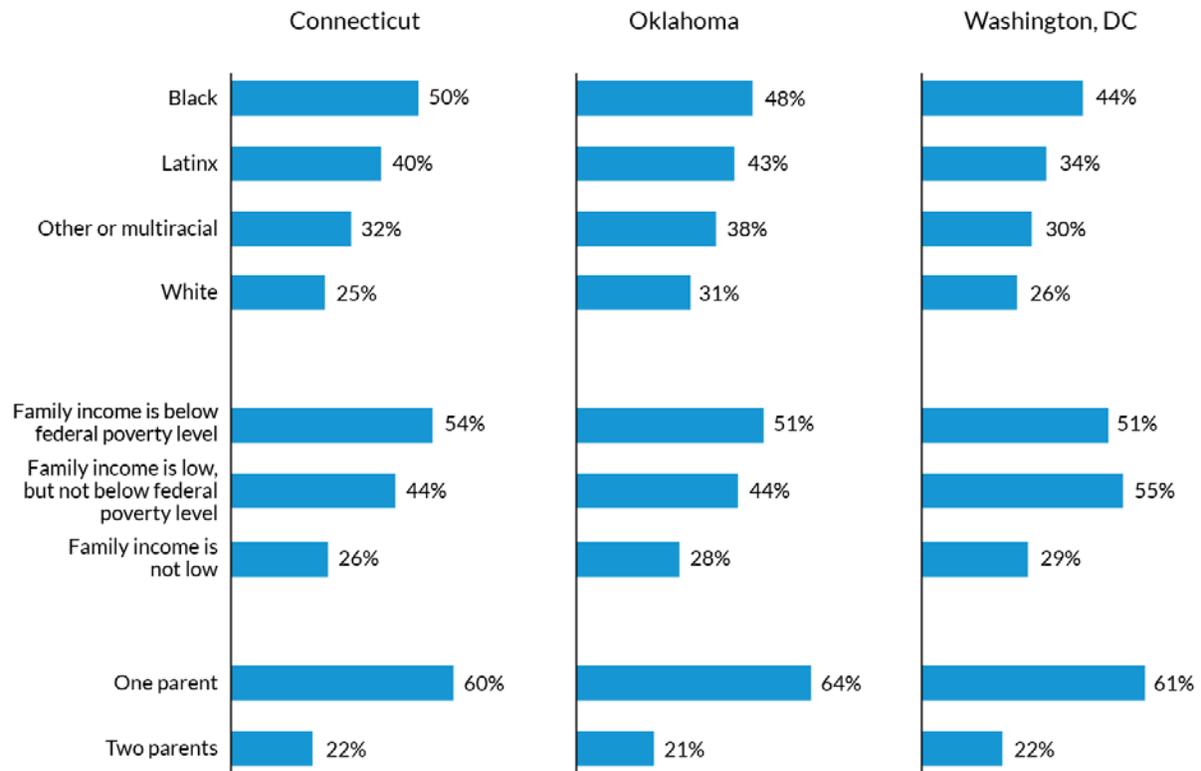
- About one-third of all young children living in families with working parents had all parents in their household working nontraditional hours.
- In the two states and Washington, DC, children living in families—who were often families of color—facing structural barriers to opportunity were even more likely to have all parents working nontraditional-hour schedules:
 - » About one-half of all children living with working parents whose family income is below the poverty level have all parents in their household working nontraditional hours.
 - » Black and Latinx children are more likely than white children to have all parents in their household working nontraditional hours.
 - » Sixty percent or more of young children living in single-parent households with working parents have all parents in their household working nontraditional hours.

Similar patterns were also found nationwide (Schilder et al. 2021).

Although not shown in figure E.1, in the two states and Washington, DC, children were less likely to have parents who worked overnight than early mornings, evenings, or on weekends, though there was some variation.

FIGURE E.1

Share of Children with All Parents in Their Household Working Nontraditional Hours, by Place and Selected Characteristics



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Sources: Urban Institute analysis of Census Bureau microdata from the 2014–18 American Community Survey downloaded from IPUMS-USA and from the 2016 Survey of Income and Program Participation. See Adams and colleagues (2021a, 2021b, and 2021c).

Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent. For children living with two parents, both parents had to be working for the child to be considered having all parents working. Children with parents working during nontraditional hours (NTH) had all parents predicted as working or commuting during NTH (6:00 p.m.–6:59 a.m. weekdays or anytime Saturday or Sunday). For children living with two parents, both parents had to be working or commuting either during the same weekday hour or anytime during the weekend to be considered working NTH in that period. Families with incomes below poverty have incomes below 100 percent of the federal poverty level (FPL), families with low incomes have incomes below 200 percent FPL, and families with higher incomes or incomes that are not low have incomes at or above 200 percent FPL. For family income, a small group of children living with unrelated household members or in group quarters fall into a “Not Applicable” category, in which poverty status is not calculated (not shown here). The “other or multiracial” group includes Asians and Pacific Islanders, Native Americans, those that identified as another race outside of these categories, and those that identified with more than one race.

The finding that children of color are disproportionately likely to have parents who work these nontraditional-hour schedules highlights the role that structural racism has played in limiting access to good education and employment opportunities for these families (Brown et al. 2019).⁴ This finding

underscores the importance of ensuring that our public child care investments support these families and children as part of an effort to achieve greater equity.

Findings from the Parent Interviews

To understand the findings from the parent interviews, it is useful to first understand that the parents we interviewed were almost all mothers. Our sample was diverse, representing a variety of races and ethnicities (Asian/Middle Eastern, Black/African American, Latina,* Native American, and white). They all worked nontraditional hours but varied widely in the types of jobs they held and their work schedules. Many parents had schedules that changed on a regular basis. We asked parents several questions about the child care arrangements they would recommend for different times, why they would recommend them, and what constraints and issues they faced with nontraditional-hour care (see the full report or appendix A for more information on our sample of parents). The key findings are described in the following sections.

WHAT NONTRADITIONAL-HOUR CHILD CARE ARRANGEMENTS DID PARENTS OF YOUNG CHILDREN RECOMMEND AND USE?

When asked what child care arrangements they would recommend to a hypothetical friend who worked nontraditional hours, we heard the following responses:

- For nontraditional-hour periods, most parents across each site and across racial and ethnic groups recommended care in the child’s home by a relative or friend as their first choice. Care in the child’s home also was recommended during the time the child was sleeping and care in someone else’s home was the second-best option for overnight periods.
- The child care arrangements parents recommended for weekends depended on what the child was doing during the week, with parents suggesting that being at home would be better for children who were in licensed child care during the week and that care involving activities would be preferable for children who were at home during the week. These findings were consistent across locations and among parents of different races and ethnicities.

* Throughout the report, we use “Latina” to describe interviewed parents of Latin American descent because they self-identified as such. We use “Latinx” to describe people of Latin American descent when discussing American Community Survey data. The authors acknowledge this may not be the preferred identifier, and we remain committed to employing inclusive language whenever possible.

- A few parents recommended licensed child care during most nontraditional-hour time frames; some parents recommended that if the child was in a licensed family child care home or center during the day, extending the hours slightly could benefit the child and family.
- When asked about their own child care arrangements during their nontraditional work hours, most parents reported relying primarily on family and friends for child care, with the care being provided either in their own homes or in the homes of their family or friends. In contrast, when asked about the care settings they used during the day, a majority used group care settings such as child care centers or family child care settings, though a sizeable share reported their children were cared for in their own home or the home of a friend or relative during the day.

WHAT ROLE DID CHILDREN'S NEEDS PLAY IN SHAPING PARENTS' RECOMMENDATIONS FOR NONTRADITIONAL-HOUR CHILD CARE OPTIONS?

Parents reported that their children's needs shaped their recommendations for child care arrangements. Specifically, they reported the following:

- Children's needs were a primary reason given for recommending specific nontraditional-hour child care arrangements. A majority of parents recommended care in the child's home during most time frames to support key developmental priorities such as children having a sense of stability, security, and routine; sleeping in their own bed; getting a good night's sleep; and having unrushed meals in their home.
- Parents often recommended and used different child care arrangements during traditional weekday hours compared with the those they recommended and used during nontraditional hours because they believed that children needed different things during these times. A majority of the parents in our study used some form of group care during daytime hours, including Head Start, Early Head Start, prekindergarten, or licensed child care programs.
- A majority of parents recommended that caregivers who they did not know well should have some training in topics such as CPR, first aid, or child development. Although many parents did not feel such training was necessary for family or friends, they thought it could be helpful if their family and friends were interested in it.

WHAT OTHER ISSUES AND CONSTRAINTS DID PARENTS REPORT CONCERNING NONTRADITIONAL-HOUR CARE?

Parents reported several other issues and constraints regarding nontraditional-hour child care:

- Parents discussed the important role that consistent, reliable care played in allowing them to work.
- Parents described the cost of child care as an important issue. They reported a range in how much they paid for their nontraditional-hour care arrangements, with some offering caregivers gas money, groceries, or small amounts of money and some reporting high out-of-pocket costs. No parents we interviewed reported using child care subsidies for nontraditional-hour care, though about two-thirds of them reported getting subsidies or free or low-cost care such as Head Start or state-provided prekindergarten for the care they used during the day.
- Parents who relied on family and friends reflected on the challenges faced by parents who do not have such support systems to provide care.
- Across our sites, parents reported that the supply of nontraditional-hour child care options available was inadequate.
- Parents reported using multiple arrangements. They also discussed sometimes having to patch together child care arrangements when their primary arrangement fell through and having to rely on arrangements that were less than ideal when their schedules changed.

Implications for Policy and Practice

We also explored the implications of the research findings for several major areas of child care policy, the extent to which those policy areas support the recommendations of the parents we interviewed, and suggestions for policy changes that could better support the families. For this analysis, we relied on the information we gathered from parents, along with interviews we conducted with a range of stakeholders and experts—including from our focal sites and states and national experts—as well as a review of key policy documents. We include additional details and resources about several of these policy areas in appendix B. The specific policy actions, summarized in box E.1, are briefly described below.

1. TAKE STEPS ACROSS CHILD CARE POLICY AREAS TO IMPROVE SUPPORTS FOR NONTRADITIONAL-HOUR CHILD CARE

Our review of existing federal and state child care policies in the context of what we learned from parents suggests the following:

- **Existing policies and systems are not designed to support the nontraditional-hour child care arrangements that parents we interviewed believed were best for their children.** This

disconnect primarily exists because those policy areas are not aligned with nontraditional-hour care in one of or more of the following ways:

- » They assume that parents are working a stable schedule, that the schedule is based on an eight-hour workday (plus commuting time), and that the schedule involves a traditional Monday–Friday workweek, or a combination of those. However, the complex and changing schedules of parents working nontraditional hours are not consistent with any of those assumptions.
 - » They are based on children’s developmental and care needs during the day and do not recognize that children’s developmental and care needs are different during nontraditional hours.
 - » They mostly support licensed center-based and licensed home-based settings and do not support the in-home child care and care by relatives and friends that parents in our study recommended for children during nontraditional hours. Stakeholders and policymakers in each child care area should systematically review their policies and practices to assess whether and where these assumptions may be shaping their policies in ways that make their supports less available to parents working nontraditional hours.
- **Policymakers should engage with parents who are working nontraditional hours, as well as with the providers who are currently meeting their needs, to learn about their specific child care needs and preferences** and they should continue working with them as policy changes are made.

Making public child care resources more available to parents working nontraditional hours can help address historic inequities in access to these supports. As noted previously, parents with low incomes and parents of color are disproportionately likely to work nontraditional-hour schedules. Taking these recommended actions can help make current child care investments and services more accessible to these families and thus can help address some of the inequities in the child care system’s current structure (Adams and Pratt 2021).

2. MAKE CHILD CARE ASSISTANCE THROUGH THE CHILD CARE AND DEVELOPMENT FUND MORE AVAILABLE FOR PARENTS WORKING NONTRADITIONAL-HOUR SCHEDULES

Parents who use nontraditional-hour child care reported constrained child care options, particularly for those parents who do not have access to support systems that can afford to help them, and they reported concerns about the cost of care. Although child care subsidies supported by the Child Care and Development Fund (CCDF) are designed to help defray some or all of the costs of child care for working

parents with low incomes, the parents we spoke with recommended in-home care and care by relatives and friends as the best for their children during nontraditional hours, and this care arrangement is not commonly supported in state CCDF subsidy systems.

To improve the likelihood that parents who are eligible for and need subsidies can use them for the nontraditional-hour child care arrangements they want, the federal government and state agencies responsible for overseeing the implementation of the CCDF can take the following steps:

- Expand and simplify access to child care subsidies for relatives and other providers who care for children in the child’s home or their own home.
- Ensure that subsidy payment rates fully support nontraditional-hour care providers, including by taking the following actions:
 - » convening a working group of experts to provide states with guidance on how to establish payment rates—for relative and in-home caregivers and for nontraditional hours—that focus on recognizing and supporting these essential forms of care;
 - » examining the implications of the small number of children being cared for when establishing rates and determining appropriate payment levels; and
 - » exploring strategies that stabilize the payments for providers to ensure they are available for families whose schedules change, such as paying for enrollment rather than attendance.
- Ensure that approaches to authorizing hours of care accommodate the complexities of nontraditional-hour work schedules through steps such as the following:
 - » authorize hours in ways that accommodate families, children, and caregivers when parents’ work schedules do not fit traditional workweek assumptions (i.e., eight-hour days, five-day weeks during weekdays); and
 - » consider more than work hours and commuting hours in authorizing hours of care.
- Ensure that parents can use subsidies for multiple providers to cover their full child care needs.

3. SUPPORT THE SUPPLY OF NONTRADITIONAL-HOUR CARE OPTIONS THAT PARENTS WANT

The CCDF includes funds that states can spend to improve the supply of child care. Existing data on strategies that states are planning suggest that very few states were planning to support in-home or relative care to improve the supply of quality nontraditional-hour care.⁵ Our findings suggest that states should also consider the following steps to support the supply of care options that parents recommend:

- Make in-home care and care by relatives and friends a priority for efforts to support the supply of nontraditional-hour child care.
- Explore incentives and challenges in helping licensed programs extend their hours slightly in the morning and evening, though this suggestion may be challenging now given the staffing shortages experienced by many child care providers.

4. ENSURE SYSTEMS THAT PROTECT CHILDREN'S HEALTH AND SAFETY AND ENCOURAGE QUALITY CHILD CARE ALSO SUPPORT NONTRADITIONAL-HOUR ARRANGEMENTS

Parents made it clear that they wanted nontraditional-hour child care options to meet their children's care and developmental needs during evening, overnight, and early-morning hours. They also shared that though they did not feel that training in areas such as CPR, first aid, and child development was necessary for relatives, they did feel this training was necessary for caregivers who they did not know well.

The child care field has the following areas of policy focused on children's health and safety in child care and on supporting the quality of child care overall:

- The **CCDF** is involved in establishing basic health and safety standards for programs that serve children receiving subsidies and has funds that states can use to support the quality and supply of care.
- **State child care licensing systems** provide a threshold of health and safety that programs must meet to operate legally, and they determine which providers are exempt from these requirements. Relatives usually do not have to be licensed unless caring for unrelated children; states vary in whether smaller providers caring for a few children in their home must be licensed or are exempt from licensing.
- **State quality rating and improvement systems (QRIS)** are systems that set higher quality standards that states use to assess and report the quality of child care available, and they offer supports for child care providers to engage in quality improvement activities. Most QRIS do not include license-exempt home-based providers such as the caregivers parents recommended for nontraditional-hour care. In 2019, only two states included license-exempt home providers in their QRIS.⁶

In considering these systems, it is important to recognize that there have been recent calls to revise the standards and requirements of state licensing and QRIS systems (and CCDF systems, which rely heavily on licensing and QRIS) to better reflect the needs, realities, and preferences of communities of

color, people who have come from other countries or speak languages other than English, and those with different socioeconomic backgrounds (Adams and Pratt 2021).

As the parents we spoke with recommended, these systems could be more relevant and support nontraditional-hour child care in the following ways:

- Identify appropriate ways to support children’s health and safety when cared for by relative and home-based care providers who may not be subject to licensing rules.
- Incorporate parents’ and providers’ definitions of quality of nontraditional-hour care in quality standards for the CCDF, licensing, and QRIS.
- Consider refinements to CCDF requirements and licensing for relatives and other small home-based providers to build on coaching and home-visiting models.
- Take the following steps to make quality supports more relevant and accessible to relative providers and other people caring for children during nontraditional hours:
 - » Explore strategies to make training for CPR, first aid, and sudden infant death syndrome prevention easily available, affordable, and accessible to all people caring for children during nontraditional hours.
 - » Recognize the unique training needs and motivations of relative providers and smaller home-based providers caring for children.
 - » Make sure that the content of professional development opportunities for nontraditional-hour caregivers is relevant to those time frames.
 - » Change the timing and mode of professional development opportunities to better accommodate the time frames that nontraditional-hour child care providers work.
- Consider providing extra supports to address the challenges children may face because of irregular schedules.

5. PROVIDE PARENTS WITH INFORMATION ABOUT NONTRADITIONAL-HOUR CHILD CARE ARRANGEMENTS

Many parents who use care during nontraditional hours reported that they felt quite lucky that they were able to find someone to care for their child during these hours and noted that they felt badly for parents who did not have support networks or other ways to find needed care. When asked about searching for child care, many parents were not aware of how to find child care—especially during

nontraditional hours. The CCDF has requirements on informing parents about child care. States could take the following steps to better inform parents about nontraditional-hour child care:

- Ensure state child care websites include information about nontraditional-hour child care.
- Provide parents a registry of people who have been screened and can provide nontraditional-hour child care in the child’s home.

6. SUPPORT ACCESS TO NUTRITIONAL SUPPORTS FOR NONTRADITIONAL-HOUR CHILD CARE THROUGH THE CHILD AND ADULT FOOD CARE PROGRAM

The Child and Adult Care Food Program (CACFP) helps pay for meals provided to children in child care. Our review suggests that like other programs described previously, nontraditional-hour child care settings overall—and relative, in-home, and license-exempt settings in particular—face challenges when it comes to benefiting from the CACFP. Policymakers could take the following steps:

- Review nutrition supports to assess whether the program design reflects the actual hours and irregular schedules of children whose parents work nontraditional hours.
- Allow relative and license-exempt caregivers to participate in the CACFP.

BOX E.1

Summary of Suggested Policy Steps to Support Nontraditional-Hour Child Care

1. Take steps across child care policy areas to improve supports for nontraditional-hour child care

- Engage with parents working nontraditional hours and the providers currently meeting these parents’ needs to ensure that policy changes address their needs. Include parents who may not be connected to formal child care systems and the relative and in-home providers parents recommend, and sustain engagement over time.
- Conduct a systematic review of policies and practices across all systems that support child care to ensure they adequately support the options parents want and need.

2. Make child care assistance through the Child Care and Development Fund more available for parents working nontraditional-hour schedules

- Expand and simplify access to child care subsidies for relatives and other providers who care for children in the child’s home or their own home.
- Ensure that subsidy payment rates fully support nontraditional-hour care providers.
 - » Provide states with guidance on establishing appropriate payment rates for relative and in-home caregivers and on establishing payment rates for nontraditional hours.

- » Examine the implications of the small number of children being cared for when establishing rates or determining appropriate payment levels.
- Explore strategies that stabilize the payments for providers to ensure they are available for families whose schedules change.
- Ensure approaches to authorizing hours of care accommodate the complexities of nontraditional-hour work schedules.
 - » Authorize hours in ways that accommodate families, children, and caregivers when parents' work schedules do not fit traditional workweek assumptions (i.e., eight-hour days, five-day weeks during weekdays).
 - » Consider more than work and commuting hours in authorizing hours of care.
- Ensure that parents can use subsidies for multiple providers to cover their full child care needs.

3. Support the supply of nontraditional-hour care options that parents want

- Include in-home care, relative care, and other license-exempt home-based options as priorities for efforts to support the supply of nontraditional-hour child care.
- Explore incentives and challenges in helping licensed programs extend their hours slightly in the morning and evening.

4. Ensure systems that protect children's health and safety and encourage quality child care also support nontraditional-hour care arrangements

- Identify appropriate and inclusive ways to support children's health and safety when cared for by relative care providers and small home-based license-exempt providers.
- Incorporate parents' and providers' definitions of quality of nontraditional-hour care in quality standards for the CCDF, licensing, and QRIS.
- Consider refinements to CCDF, licensing, and QRIS requirements and supports for relatives and other small home-based providers to build on coaching and home-visiting models.
- Take steps to make quality supports more relevant and accessible to relative providers and other people caring for children during nontraditional hours.
 - » Explore strategies to make training for CPR, first aid, and sudden infant death syndrome prevention easily available, affordable, and accessible to all people caring for children during nontraditional hours.
 - » Recognize the unique training needs and motivations of relative providers and license-exempt home-based providers caring for children.
 - » Make sure that the content of professional development opportunities for nontraditional-hour caregivers is relevant to those time frames.
 - » Change the timing and mode of professional development opportunities to better accommodate the hours that nontraditional-hour child care providers work.

- Consider providing extra supports to address the challenges children may face because of irregular schedules.

5. Provide parents with information about child care arrangements

- Ensure state child care websites include information about nontraditional-hour child care. Provide parents a registry of people who have been screened and can provide nontraditional-hour child care in the child's home.

6. Support access to nutritional supports for nontraditional-hour child care through the Child and Adult Care Food Program

- Review nutrition supports to assess whether the program design reflects the actual hours and irregular schedules of children whose parents work nontraditional hours.
- Consider expanding access to relative and license-exempt caregivers.

Conclusion

Almost 5 million children have parents who work nontraditional-hour schedules—more than one-third of all children younger than age 6 with working parents in the US. These numbers are even higher when considering children from families with low incomes. Thus, a sizeable percentage of children whose families are a priority for public child care investments have parents who work nontraditional hours. Further, children of color are disproportionately likely to have parents who work these nontraditional-hour schedules, highlighting the impact that structural racism has had in limiting access to good education and employment opportunities for these families. Ensuring that families in which parents work nontraditional-hour schedules can access public resources is important to meeting our societal goals for more equitably supporting parental work and child development for all children and families.

Most families with nontraditional-hour schedules we interviewed recommended child care in the child's home and care by relatives and friends during most nontraditional periods, except some parents recommended that if the child was in a licensed family child care home or center during the day, extending the hours slightly could benefit the child and family. However, when comparing these recommendations with our public child care policy areas, we found that in general these care settings are not supported by our publicly funded child care policies and practices. Further, current child care policies often appear to assume that parents work traditional hours and regular schedules, and concepts of quality care are designed around what children need during daytime hours. These assumptions are not accurate for the one-third of all children living with parents who work

nontraditional hours and result in our investments in child care being less accessible to these children and their families.

Our findings highlight how important it is that policymakers address the child care needs of families with parents who work nontraditional hours and suggest that policymakers revisit these core assumptions that appear to underlie current child care policy. The findings also suggest that if policymakers are to meet the child care needs of *all* families, it is important to anchor policies in the realities, preferences, and unique needs of families working nontraditional hours, as well as those of the providers serving them. Addressing these issues is timely as our country works to build more equitable access to child care given that even higher percentages of young children whose parents work nontraditional-hour schedules live in families whose incomes are low, are children of color, and are children in single-parent families. Supporting the child care arrangements that these families want and can help meet the needs of all working families as they try to ensure their children’s well-being and healthy development.

Introduction

Understanding the child care needs of parents working nontraditional-hour schedules is a growing area of interest for federal and state policymakers.⁷ Currently, almost 5 million children younger than age 6 living in families with working parents have parents who work before 7:00 a.m. or after 6:00 p.m. on weekdays or on weekends.⁸ This is about one-third of all children younger than age 6 living in families with working parents, a share that rises to about one-half for children living in families with low incomes.⁹ Families working nontraditional hours face extra challenges finding child care and are less likely to get child care assistance (Rachidi et al. 2019). The ongoing COVID-19 pandemic has also focused attention on addressing the child care needs of essential workers, many of whom work nontraditional-hour schedules¹⁰ and are disproportionately people of color.

Despite the increased policy attention, limited research has focused on understanding parents' perspectives about the nontraditional-hour child care arrangements they want or on the policy constraints and opportunities that affect parents' ability to access the care they want. Such research is needed to improve access to child care that meets the needs of families who are working nontraditional-hour schedules. This need is further underscored by the growing awareness of the structural inequities and barriers in employment and education that have limited opportunities available to Black and Latinx people, as well as women (Dill and Duffy 2022).¹¹ These structural inequities are likely to contribute to the disproportionate representation of Black and Latinx families among families with nontraditional-hour work schedules (Sandstrom et al. 2019).¹² In addition, Black and Latinx mothers have faced additional challenges given the greater impact of the pandemic-induced economic downturn on their employment and income.¹³ As a result, understanding more about how to meet the child care needs of these families has important implications to support more equitable policies for Black and Latinx families and support a more equitable economic recovery.

We designed this study to fill these knowledge gaps, with a focus on informing federal and state policymakers who wish to strengthen access to child care for families with nontraditional-hour schedules. Specifically, we address the following research questions:

1. What do we know about the potential demand for child care during nontraditional hours?
2. What child care arrangements do parents of young children recommend and use for nontraditional hours?
3. What role do children's needs play in shaping parents' recommendations for nontraditional-hour child care?

4. What other constraints and issues do parents report concerning nontraditional-hour child care?
5. What are the implications of the answers to these questions for policy and practice?

Research Methods

To address these research questions, we employed a mixed-methods approach focused on communities in two states and Washington, DC. Between early 2020 and late 2021, we analyzed existing survey data to understand the potential demand for nontraditional-hour child care, conducted interviews with parents and key stakeholders, and reviewed documents from each state and DC. We briefly describe each of these items in the following sections. For a more in-depth discussion, see appendix A.

Focal Communities

We focused our study on communities with diverse demographic characteristics and child care policies in Connecticut, the District of Columbia, and Oklahoma. The sites were chosen to provide a mix of rural, urban, and suburban communities; include parents from a variety of racial and ethnic groups; and allow us to speak with parents with lower incomes.¹⁴

- Connecticut communities included New Haven, West Haven, Hamden, Fair Haven, and Hartford. These communities represent a mix of urban and suburban neighborhoods that include families across income groups. In the New Haven region, for example, of the children younger than age 6 with working parents who worked nontraditional hours, about 37 percent were Latinx, 37 percent were white, 21 percent were Black, and 6 percent identified as multiracial or other).¹⁵
- Oklahoma communities included the following counties in the southeastern region of the state: Atoka, Bryan, Choctaw, Coal, Haskell, Hughes, Latimer, LeFlore, McCurtain, Pittsburg, and Pushmataha. These counties are rural with high percentages of families with young children living below the state median income. In these communities, of the children younger than age 6 with working parents who worked nontraditional hours, about 44 percent were white, 26 percent were Native American, 26 percent were multiracial or other races, and 13 percent were Latinx.¹⁶
- Washington, DC, neighborhoods included Wards 5, 7, and 8. These neighborhoods are urban and have high percentages of families with low incomes and high shares of families who are Black/African American. In Anacostia, for example, of the children younger than age 6 with working parents who worked nontraditional hours, about 91 percent were Black and 6 percent were Latinx.¹⁷

Survey Analysis to Assess the Potential Demand for Nontraditional-Hour Child Care

We began by analyzing data from the US Census Bureau’s 2014–18 ACS and the 2016 SIPP to better understand the potential demand for nontraditional-hour child care. Together with state partners, we reviewed ACS and SIPP data to determine the communities (noted previously) from which we would recruit parents to participate in interviews.¹⁸

Parent Interviews

We conducted interviews with parents from the focal communities and with local, state, and national stakeholders. Across the communities, we recruited a total of 41 parents. We screened parents to ensure study participants had children younger than age 6, had worked nontraditional hours, and had used some form of nonparental child care.

For the interviews, we presented scenarios to participating parents and asked them to recommend to a hypothetical friend the child care arrangement they believed would be best. We asked parents to imagine that any child care option would be available and affordable and to answer questions based on the following specific periods: (1) early morning (before 7:00 a.m.), (2) evening (after 6:00 p.m.), (3) overnight, (4) weekends, and (5) during the day. We gave parents the following options to choose from in considering what to recommend to their hypothetical friend:

- a person caring for the child in the family’s home—noting this person could be a family, friend, or a hired nanny or babysitter;
- a person caring for the child in the caregiver’s home—noting this could be a licensed family child care home or a friend or relative’s home; or
- a licensed child care center.

We also asked respondents if their answers would be different under the following conditions: (1) if their hypothetical friend worked irregular hours that shifted from week to week; (2) if the hypothetical friend had asked before the COVID-19 pandemic; and (3) if the friend also had a school-age child.

Finally, we included questions about the families’ demographic characteristics (including age and race/ethnicity), parents’ work schedules, child care arrangements the parents were currently using, and parents’ thoughts about different aspects of child care. To learn about parents’ perspectives on

different attributes of child care, we asked them about a range of attributes including reliability of care, cost, location, warmth of the caregiver, the focus on curriculum, similarity of culture, and similarity of language.

Key Informant Interviews

We interviewed people with a variety of perspectives on these issues, including national experts, state leaders, and community members to obtain their perspectives on the state, local, and community child care contexts. The national experts we interviewed are knowledgeable about federal and state child care policies and include people working in advocacy and research organizations.

What's in This Report?

Having discussed background and methods, we next present the following sections:

- **Setting the context: the potential demand for nontraditional-hour child care in our focal sites.** This section describes the potential demand for nontraditional-hour child care in the two states and Washington, DC, and the characteristics of children whose parents work nontraditional hours based on our analysis of data from the ACS and SIPP.
- **Findings from the parent interviews.** This section begins with a brief description of the parents we interviewed for this report. We then describe the care arrangements these parents recommended and used for various nontraditional-hour periods, the important role that children's needs played in shaping their recommendations, and other constraints and issues that they raised about nontraditional-hour child care.
- **Implications for policy and practice.** This section explores the policy implications of the findings across several child care policy domains.
- **Conclusion.** We conclude with a discussion of important questions and issues that need further exploration and provide some concluding thoughts.

Setting the Context: What Is the Potential Demand for Nontraditional-Hour Child Care in Our Focal Sites?

To understand the scope of the potential demand for nontraditional-hour child care, our first step was to find out how many children younger than age 6 with working parents had all parents in their household working nontraditional hours in our two states and Washington, DC. To do this, we analyzed data from the 2014–18 ACS and the 2016 SIPP. Because our goal was to identify the potential need for child care for children living with two parents, we only counted the children in two-parent families if both parents were working or commuting either during the same weekday nontraditional hours or anytime during the weekend.¹⁹ For more details on our findings for each site, see our site-specific reports (Adams et al. 2021a, 2021b, 2021c).²⁰

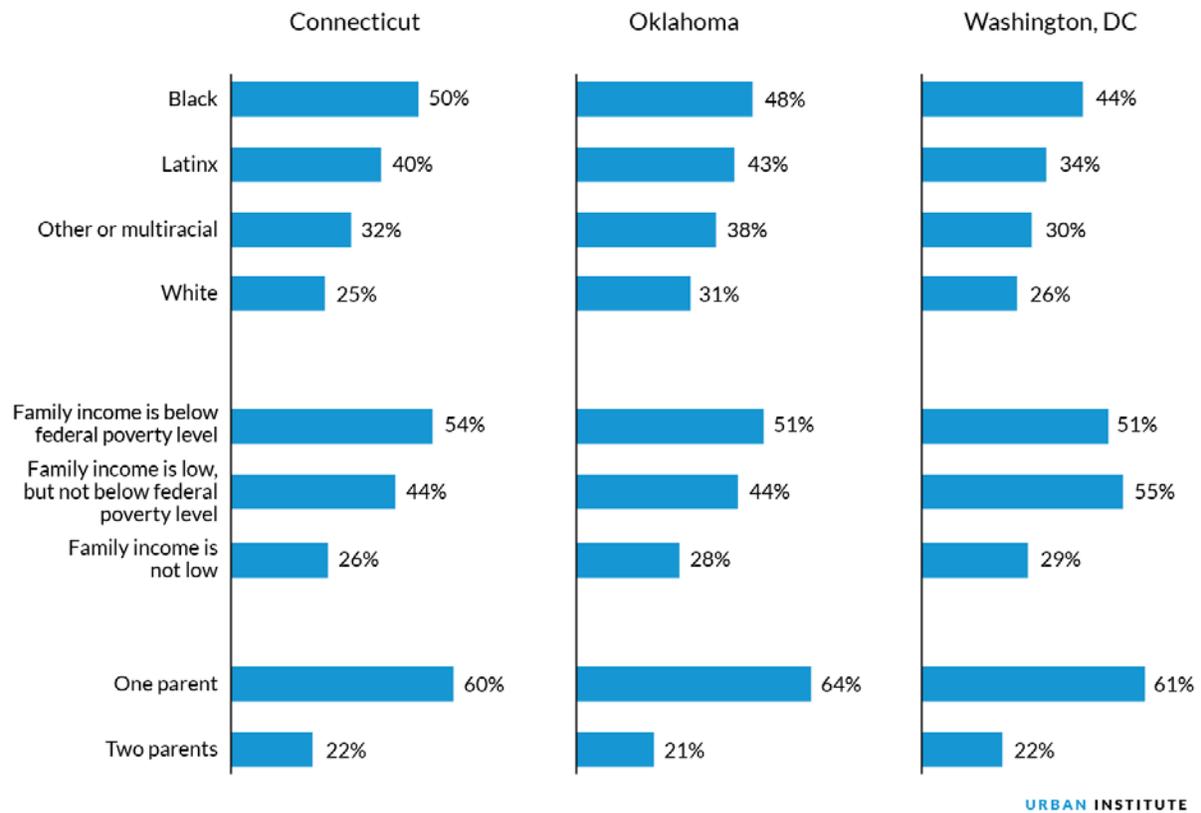
As shown in figure 1, our key findings regarding potential demand for nontraditional-hour child care include the following:

- Across Connecticut, DC, and Oklahoma about one-third of children younger than age 6 that were living with working parents had all parents working nontraditional-hour schedules, a share similar to the national average.
- In the two states and DC, children living in families that were facing structural barriers to opportunities—often families of color—were even more likely to have all parents working nontraditional-hour schedules. Again, this pattern was seen nationally as well. Specifically, across the three focal sites, nontraditional-hour work schedules were much more common for
 - » children who were **Black, Latinx, multiracial**, or another unspecified race, with the share of Black children with working parents whose parents all work nontraditional hours reaching between 44 and 50 percent depending on the area;
 - » children living in families with **lower incomes**; for example, in all three sites, one-half of all children younger than age 6 with working parents whose family incomes were below the federal poverty level had all parents working nontraditional-hour schedules; and

- » children living in **single-parent** families; in the two states and DC, almost two-thirds of children younger than age 6 with working parents who lived in single-parent families had all parents in their household working nontraditional-hour schedules.

Although not shown in figure 1, in Connecticut, DC, and Oklahoma, children were less likely to have parents who worked overnight than parents who worked early mornings, evenings, or weekends, although there was some variation across the sites.

FIGURE 1
Share of Children with All Parents in Their Household Working Nontraditional Hours, by Place and Selected Characteristics



Sources: Urban Institute analysis of Census Bureau microdata from the 2014–18 American Community Survey downloaded from IPUMS-USA and from the 2016 Survey of Income and Program Participation. See Adams et al. 2021a, Adams et al. 2021b, Adams et al. 2021c.

Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent. For children living with two parents, both parents had to be working for the child to be considered having all parents working. Children with parents working during nontraditional hours (NTH) had all parents predicted as working or commuting during NTH (6:00 p.m.–6:59 a.m. weekdays or anytime Saturday or Sunday). For children living with two parents, both parents had to be working or commuting either during the same weekday hour or anytime during the weekend to be considered working NTH in that period. Families with incomes below poverty have incomes below 100 percent of the federal poverty level (FPL), families with low incomes have incomes below 200 percent FPL, and families with higher incomes or incomes that are not low have incomes at

or above 200 percent FPL. For family income, a small group of children living with unrelated household members or in group quarters fall into a “Not Applicable” category, in which poverty status is not calculated (not shown here). The “other or multiracial” group includes Asians and Pacific Islanders, Native Americans, those that identified as another race outside of these categories, and those that identified with more than one race.

Nationally, 36 percent of children with working parents have all parents in their household working nontraditional hours (and children whose families face structural barriers to opportunities are also more likely to live with working parents who all work nontraditional-hour schedules.²¹ For example, 51 percent of Black/African American children and 41 percent of Latinx children live with working parents who all work nontraditional-hour schedules; 46 percent of children in families with incomes below 200 percent of the federal poverty level and 53 percent of children in families with working parents with a high school education or less have all parents in their household working during nontraditional hours.²²

The finding that children of color are disproportionately likely to have parents who work these schedules highlights the impact that structural racism has had in limiting access to good education and employment opportunities for these families (Brown et al. 2019). This finding underscores the importance of ensuring that our public child care investments support these families and children as part of an effort to ensure greater equity.

We also looked at the nontraditional-hour work patterns of parents working in essential industries—that is, parents working in the businesses most likely to have continued operating during the pandemic. We found that one-half or more of the children younger than age 6 with parents working nontraditional-hour schedules across the three sites lived in families with parents who worked in essential industries (Adams et al. 2021a, 2021b, 2021c). For children in these families, we found similar patterns to those we found for families overall. That is, these families were also much more likely to be families of color, have lower incomes, and be single-parent families.

Findings from the Parent Interviews

This section presents what we learned from interviewing parents across our three sites:

- What were the characteristics of the parents we interviewed?
- What child care arrangements did parents recommend and use during nontraditional hours?
- What role did children's needs play in shaping parents' recommendations for nontraditional-hour child care options?
- What other constraints and issues did parents report concerning nontraditional-hour child care?

What Were the Characteristics of the Parents We Interviewed?

Before focusing on what parents told us about the child care arrangements they would recommend for nontraditional hours, it is useful to know more about the parents we interviewed. Specifically, all the parents we interviewed worked nontraditional-hour schedules, all identified as female, and all had at least some children younger than age 6. The median age was 30, though they ranged in age from 19 to 47. Our parent sample was diverse in races and ethnicities; within the sample, 22 identified as Black/African American, 10 identified as white, 6 identified as Native American, 4 identified as Latina,* and 1 identified as Asian/Middle Eastern. (These numbers do not add to 41 because one parent identified as Black and Latina and another parent identified as white and Latina.)

Most parents reported working in the mornings and evenings, with fewer parents working weekend shifts. Several parents reported working until midnight or 2:00 a.m. and coming home from work in the middle of the night, and a couple reported working overnight. A majority reported that the nontraditional hours they worked were not consistent from week to week. In some cases, parents worked occasional weekends but mostly during the week, and in other instances parents' schedules

* Throughout the report, we use "Latina" to describe interviewed parents of Latin American descent because they self-identified as such. We use "Latinx" to describe people of Latin American descent when discussing American Community Survey data. The authors acknowledge this may not be the preferred identifier, and we remain committed to employing inclusive language whenever possible.

varied widely from week to week. We did not ask parents about their income but nearly all reported that their children were eligible for child care subsidies, Head Start, or reduced fees for preschool (though a few study participants told us they did not receive child care subsidies because their household income was slightly more than the highest eligible income). Box 1 provides information on the types of employment and work schedules of the parents we interviewed.

BOX 1

Types of Employment and Work Schedules of the Parents We Interviewed

Parents worked different times of day and held a variety of jobs

- **Many parents worked early in the morning** before 7:00 a.m. in occupations such as teaching and nursing. Others were staff members at coffee shops and data security centers. One parent was a transportation dispatcher, and another was an electrical apprentice.
- **Several parents worked weekends** such as working as a caseworker or in a lab, as grocery store stockers, as a customer service associate, and as a staff member in a dentist's office.
- **A few worked overnight** such as caseworkers providing services in a homeless shelter, people working in health care settings, and a mother who works in telecommunications who is on call and needs to work occasional overnights.
- **Many worked late evenings** including parents working in the medical field, as a lab assistant, a behavioral health staff member, a veterinarian's technician, staff at a fast-food restaurant, and COVID-19 testing staff.

Parents' work schedules varied in their stability

- **Shifting schedules reported by a majority of parents.** For example, a mom from Connecticut who works three 12-hour shifts and weekends reported that her husband is a construction worker and he often leaves the house before her shift begins and works occasional weekends when she is also working.
- **Set nontraditional-hour schedules reported by many parents.** For example, one mother in Oklahoma works a regular evening schedule that ends at about 1:00 a.m. at a fast-food restaurant; one mother in Washington, DC, works for a telecommunications company early in the morning; and one parent works as a pharmacy shift manager from 4:30 a.m. until 1:00 p.m. daily.
- **Mix of set and shifting schedules reported by some.** Across all three locations, a few parents reported that their schedules are mostly set but shift occasionally. For example, a mother from Oklahoma who works as a veterinary technician works a set schedule during the week but works one weekend a month. A parent from Connecticut works as a lab technician and his schedule shifts based on the lab's needs. And a parent who works in the District of Columbia as

a hair and makeup stylist works weekends, nights, and early mornings if weddings or special events are scheduled during those times.

What Child Care Arrangements Did Parents Recommend and Use during Nontraditional Hours?

In this section, we describe the child care options that the parents we interviewed recommended separately for morning, evening, and overnight hours; the options they recommended on weekends; and the options they suggested if parents had irregular nontraditional work hours. We also discuss their responses as to whether their recommendations would have been different before the pandemic and conclude with a description of the care arrangements they used. As can be seen in the following sections, parents across locations and across racial and ethnic groups were uniform in their responses to the questions.

Parents Mostly Recommended Child Care for Young Children in Their Own Homes during Most Nontraditional-Hour Periods

Across most nontraditional-hour periods, most parents across each site and across racial and ethnic groups recommended care in the child's home by a relative or friend as their first choice. Care in the child's home also was recommended during the time the child was sleeping and care in someone else's home was the second-best option during the overnight period. These recommendations were consistent across respondents of different racial and ethnic groups and across sites. In the next sections, we present parents' recommendations for the best care arrangements for each time and under different conditions.

VERY EARLY IN THE MORNING, A MAJORITY OF PARENTS RECOMMENDED CHILD CARE FROM A FRIEND OR RELATIVE IN THE CHILD'S OWN HOME

Across the three focal sites and among parents with different racial and ethnic characteristics, a majority recommended that their hypothetical friend use in-home child care early in the morning. Comments from one Oklahoma mother who works multiple jobs were similar to those provided by other study participants. She reflected on waking a child quite early in the morning and stated, "It's easier to let them [young children] continue to sleep and stay on their schedule and have someone come

into your own home where everything is adjusted, and you don't have to get the baby up and ready and haul them everywhere.”

It's easier to let them [young children] continue to sleep and stay on their schedule and have someone come into your own home where everything is adjusted, and you don't have to get the baby up and ready and haul them everywhere.

—Mother from Oklahoma

The main exception to this finding is that some study participants noted that if the child attended licensed child care during the day, it would be helpful if that child care provider extended hours slightly to provide greater continuity for the child. For example, a mother from Connecticut who works in food service reported that she preferred having her child go early to the licensed child care program that her child attended during the day. She noted this was “because of amenities and having a consistent place for the child [in the morning].”

FOR CARE IN THE EVENING, MOST PARENTS ACROSS EACH LOCATION RECOMMENDED CARE IN THE CHILD'S HOME AS THE BEST CHILD CARE ARRANGEMENT

Nearly all parents across all three locations and racial and ethnic characteristics recommended care in the child's own home in the evening. Parents noted the importance of children having dinner at home, sleeping in their own beds, and having consistent regular evening routines. Similar to the finding for early mornings, some parents suggested it would be best to extend hours of care if the child was attending licensed care during the day for continuity of care for the child, though most recommended this only until dinner time.

The kids may get cranky—they want to get comfortable and want to be around a familiar face so they can sleep and eat dinner with their family.

—Mother in Washington, DC

FOR OVERNIGHT CARE, NEARLY ALL STUDY PARTICIPANTS RECOMMENDED CARE IN THE CHILD'S HOME

Nearly all parents in all three locations recommended that children be cared for in their own home by a relative or someone the child knows well if the parent had to work overnight and again recommended care in the home of a relative or someone known to the family as the next best alternative. A parent from Connecticut who works overnight as a clinical nurse specialist said she would recommend in-home care—either in her own home or in someone else's home—and that “it is important to find somebody that you trust...so you're not stressed when you're at school, at work.”

FOR IRREGULAR, NONTRADITIONAL-HOUR SCHEDULES, MANY PARENTS RECOMMENDED IN-HOME CARE OR CARE IN SOMEONE ELSE'S HOME

Most parents also noted the importance of reliable in-home child care for a young child whose parents have irregular, nontraditional-hour schedules. Many study participants noted that shifting schedules can cause stress for the parent and child, in part because most care arrangements require parents to commit to consistent hours. For example, a parent from Oklahoma who works irregular, on-call hours stated that she would recommend to her friend in-home care in the evenings. She reflected on her own experiences noting, “keeping kids' schedules consistent is a big thing for our household. Someone being me when I'm not available is super helpful.” Similarly, a mother from Washington, DC, who works irregular, nontraditional hours at a call center stated she would recommend in home care “because day care might not be able to adjust to those hours. Having a dedicated babysitter who is a family or friend who might be more dependable.” (This mother used the term “day care” to describe her nontraditional-hour child care even though it was not during the day.)

Recommendations were fairly consistent across all three locations and for parents across all racial and ethnic groups. One interesting exception was that a few parents from Washington, DC, told us they would recommend that their hypothetical friend get a different job, one with a stable schedule, noting that the stress caused by an irregular schedule would be problematic for both the parent and her child. These parents reflected on their own experiences and told us they had changed employment because their irregular-hour jobs created stress for their children and families.

SEVERAL PARENTS RECOMMENDED LICENSED CHILD CARE UNDER SOME CIRCUMSTANCES

Although most parents recommended care in the child's own home for most nontraditional hours, a few parents noted that they preferred licensed care during most nontraditional-hour time frames because licensed providers must follow health and safety standards. Other parents who recommended in-home care as their first choice suggested that it would be nice to have a backup child care center in case the

primary child care fell through or they were called into work unexpectedly. And, as noted, some parents recommended that if the child was in a licensed family child care home or center during the day, extending the hours slightly could benefit the child and family.

THE CHILD CARE ARRANGEMENTS PARENTS RECOMMENDED WERE SIMILAR WHEN PARENTS WERE ASKED IF THE HYPOTHETICAL “FRIEND” HAD A SCHOOL-AGE CHILD

When asked if their recommended child care arrangement would differ for the hypothetical friend if she also had a school-age child, most respondents indicated that their recommendations would be the same. A few parents noted that they would need to consider transportation for the school-age child if the friend worked early in the morning and if a child care center was open and operating near the school. Some parents said that if a center was either in or near the elementary school and offered extended hours, it would be helpful if both children could attend the same program until early evening. Nonetheless, recommendations for very early in the morning, late in the evening, and overnight were similar to those recommendations for younger children across all three locations and for parents with different demographic characteristics.

The Child Care Arrangements Parents Recommended for Weekends Depended on What Children Were Doing during the Week

When asked about the child care arrangements they would recommend to their hypothetical friend for child care if she worked on weekends, parents provided a range of responses. Many parents asked what the child was doing during the week or considered what the child’s routine was during the week. Some said that they believe the best child care option for weekend days is the child care setting that would allow the child to have experiences that are not available to the child during the week. Parents who recommended in-home care for weekends noted it would be best for the child to be able to relax and unwind from the week if the child was in licensed care during the week. Similarly, when asked about recommendations for a school-age child, more parents reported that they would recommend a center with activities during the day on the weekends because they would want the school-age child to be engaged in fun activities.

Most Parents Reported That the Covid-19 Pandemic Had Limited Impact on the Care Arrangements They Believe Are Best during Nontraditional Hours

When asked if their recommendations for nontraditional-hour care arrangements that would be best for children would have been different before the COVID-19 pandemic, most reported that their recommendations would have been the same. A few parents reported that since the pandemic, the child care facilities in their communities had reduced their hours of operation and no longer operated early in the morning or later in the evening, but most noted these adjustments did not change their advice to their hypothetical friend. A couple of parents noted that in the early days of the pandemic, they would have been more likely to recommend a family child care home than a center because of concerns about the virus. However, most reported that their ideas about the best child care arrangements for nontraditional hours—namely care in their own home or in a friend or relative’s home—were not affected by the COVID-19 pandemic. This was also the care arrangement most parents preferred during the pandemic.²³

Parents Reported Using Child Care Arrangements during Nontraditional Hours Similar to Those They Recommended

In addition to asking parents about the care arrangements they recommended to their hypothetical friend, we also asked parents about the care arrangements that they used while they were working. We found that the child care parents working nontraditional hours used while they were working was mostly consistent with the advice they would have given to their hypothetical friend. Across all three communities, most parents reported that they relied on family and friends for child care during the evenings, overnight, and early in the mornings, with the care being provided either in their home or in the home of their family or friends. This finding is consistent with other research that has surveyed parents on the nontraditional-hour care arrangements they use (Sandstrom et al. 2019).²⁴ In some instances, parents reported that the family and friends they relied on were licensed family child care providers or people who worked at a licensed center who were willing to care for their child early in the morning or late at night.

What Role Did Children’s Needs Play in Shaping Parents’ Recommendations for Nontraditional-Hour Child Care Options?

We also learned about the issues that parents considered as they thought about what they would recommend to their hypothetical friend. To assess what mattered most to parents, we analyzed parents’ responses to questions about why they recommended specific care arrangements during nontraditional hours, as well as their responses to questions about different attributes of child care and what they believed was most important.

In this section, we discuss two issues parents discussed that had to do with their children’s needs:

- the importance of considering children’s developmental and care needs
- training for caregivers

Children’s Needs Were the Biggest Reason Given for Recommending Specific Nontraditional-Hour Child Care Arrangements

Across all three locations and racial and ethnic groups, parents reported that what was best for young children’s growth and development was the primary reason for recommending specific care arrangements. In the following sections, we describe their thoughts on the importance of stability, routines, and nurturing caregiving, and whether it is important for caregivers to share the child’s culture. In addition, we describe their opinions on whether children’s needs during daytime weekday hours are different from their needs during nontraditional hours.

PARENTS NOTED THE IMPORTANCE OF STABILITY, SECURITY, AND ROUTINES

Nearly all parents said that children’s comfort, sense of stability and routine, and sense of being in an environment they know were very important factors driving their decisions about the nontraditional-hour child care arrangements they recommended. Parents’ considerations of what was best for children were consistent with and supported by child development research that underscores the importance of relationships, routines, a sense of security, good sleep, and eating meals with family (Adams and Kuhns 2020; Roche and Ghazarian 2012; Spagnola and Fiese 2007).

Several reasons parents gave for recommending care in the child’s home during nontraditional hours have already been expressed in previous quotes in this report. But in summary, they included the following:

- It is important for children to have dinner at home.
- Children need to have regular nighttime routines such as bathing, brushing their teeth, and reading bedtime stories.
- Sleeping in their own beds with their own toys is important for children to have sound sleep and feel safe and secure.
- Getting a good night’s sleep is important, and children who are awakened when parents return home late from work or are awakened early in the morning do not get adequate sleep.
- Children can feel stressed if their parents are waking them in the night or wake them too early in the morning.
- Waking in their own beds is important for children to start the day off right.
- Having an unrushed morning routine is important for young children.

Further, as reflected in the earlier discussion about parents wanting to have their child at their daytime program for the hour before or the hour after the program’s normal hours, concerns about consistency and minimizing disruptions were key in parents’ reasoning for that suggestion as well.

PARENTS REPORTED THAT A WARM AND NURTURING CAREGIVING IS VERY IMPORTANT

When asked directly about the attributes of care that mattered, most parents reported they believe the most important aspect of care, especially for very young children, is that their child is cared for by someone who is warm and nurturing. A mother who works at a nonprofit said that whether the caregiver was warm and nurturing is “really, really important. I want my baby to feel loved. I want her to be happy where she is.”

[Whether a caregiver is warm and nurturing is a] dealbreaker—[it’s] really important. My son is super loving; he loves affection and likes attention; if they can’t be loving it’s not going to work for us.

—A mother from Washington, DC

PARENTS OFTEN RECOMMENDED AND USED DIFFERENT CHILD CARE ARRANGEMENTS DURING TRADITIONAL WEEKDAY HOURS THAN FOR NONTRADITIONAL HOURS

Multiple study participants told us they believed children’s needs during traditional daytime hours are different than during the nontraditional times we asked them about. Specifically, even though most parents we interviewed suggested care in the child’s home or the home of someone they knew well during nontraditional hours, when asked what child care arrangement they would recommend for a friend during the traditional weekday, most parents recommended center-based care as their first choice and family child care as their second choice. Another smaller share recommended in-home care for young children to best meet young children’s needs during the traditional work day.

When asked specifically about the care arrangement they used during the day, most parents we interviewed reported that their children attended Early Head Start, Head Start, publicly funded prekindergarten, center-based care, or licensed family child care. These findings were mostly consistent across the sites and for parents with different demographic characteristics, with a few exceptions. A slightly larger share of parents from Washington, DC, reported using and recommending center-based care compared with the other locations. Parents in Connecticut were more likely to report using a mix of care options during the day, including public prekindergarten. Finally, parents from Oklahoma, which was a largely rural site, were more likely to report using both licensed and unlicensed family child care and care in their own homes during the day.

Several parents noted the importance of licensed group care for children as they were learning to talk, play with others, and engage in early learning activities, and that they wanted different activities during the day, including curriculum, a focus on school-readiness skills, and social interactions for their children. Many of the same parents who noted the importance of in-home child care for stability, security, and routines during nontraditional hours prioritized the importance of physically and cognitively stimulating activities during the day. For example, one parent in Connecticut who works late nights as a COVID-19 testing staff member told us she prefers child care during the day because “it helps with preparing them for school, basically, the daycare my daughter is in, we just put her in preschool; she’s with other kids, she learns, she learns how to work with other kids and listen to adults more. It helps with their cognitive skills and early learning development.”

CONSIDERATION OF THE IMPORTANCE OF SHARED CULTURE AND LANGUAGE WAS NUANCED

When asked about culture and language compatibility between the family and the caregiver, parents provided nuanced reactions. Many reported that they need to be able to communicate with the child care provider, but they also believe it is important for young children to be exposed to different cultures

and languages. When probed about their responses, several noted that the most important issue is that caregivers demonstrate respect of their culture and language but that they thought their child would benefit from being cared for by someone who values diverse languages and cultures.

A Majority of Parents Recommended Some Training for Unfamiliar Caregivers

We also asked parents who recommended care in their own home or the homes of family and friends whether they would recommend that the caregiver have training, such as in child development, first aid, or CPR. We found that many parents felt that such training was not necessary if the caregiver was someone they knew, such as a relative or a friend. As one Connecticut mother who works two jobs and has a baby told us, “with the family or friend, [they need] no special training. I wouldn’t be taking my child to a family or friend that I didn’t trust, I wouldn’t bring my child to anyone I didn’t feel comfortable with.” However, some parents did note that it would be nice if such training was available for their family and friends. On the other hand, parents were more likely to recommend that such training be required if their hypothetical friend did not have family or friends, or someone they knew and trusted, who could care for their child. Moreover, a few study participants noted that their own children had health issues and therefore they always recommend first aid or CPR.

With the family or friend, [they need] no special training. I wouldn’t be taking my child to a family or friend that I didn’t trust. I wouldn’t bring my child to anyone I didn’t feel comfortable with.

—A mother from Connecticut

In addition, some parents we interviewed brought up additional safety protections that they would recommend:

- Although we did not explicitly ask all parents about background checks for in-home caregivers, across our sites a few parents volunteered that for parents lacking a relative or close friend, they would recommend background checks, some screening, and some evidence of qualification. The few people who noted the importance of background checks said they would only hire someone to care for young children in their home if they had a way to check to ensure the person was trustworthy. For example, a mother from Oklahoma stated, “I do background

checks no matter who you are.” However, a couple of parents volunteered that they would not need background checks for relatives because they were fully aware of the positive and negative aspects of their relatives’ backgrounds.

- A few parents volunteered that video cameras would be important during specific nontraditional-hour periods. For example, a single mother who works in Connecticut and has an infant stated she believes it is important to “have a camera in the room with the baby...as far as that age, if you have a nanny or a family member, [have] cameras.” Another mother from Connecticut stated that she checks the video feed because it gives her a chance to connect with her child about what she experienced during care. Thus, the reasons for recommending cameras ranged from safety issues to being able to engage with their child and child care providers.

What Other Issues and Constraints Did Parents Report Concerning Nontraditional-Hour Care?

In our interviews, parents brought up several other important issues and constraints about nontraditional-hour child care:

- importance of reliable care to allow parents to work
- cost of nontraditional-hour child care options
- challenges with finding nontraditional-hour child care
- inadequate supply of nontraditional-hour care
- location of care
- issues of safety
- challenges when care falls through

Each issue is discussed briefly in the next sections.

Parents Reported the Importance of Consistent, Reliable Care for Working Parents

Most parents reported that consistent and reliable care is very important to working parents. Several study participants across all three locations noted that reliable care is essential for them to be able to

work. For example, a mother of three from Washington, DC, reflected on her own experience and the importance of having reliable care:

I drop her to her grandmother. It is really a blessing that she works at the daycare where [child's name] is in. If it weren't for her grandmother, she wouldn't be able to come in early. God is good because I would have probably had to quit my job. It wouldn't make sense to work and put in so much to not make any income...And if you don't have that consistent care, whether it is you taking them someone, if that is not consistent it makes it this question of, "Is this worth it?" ringing in your head.

Cost Is Important to Most Parents, Yet Few Parents Access Subsidies for Nontraditional-Hour Care

When asked about different aspects of child care, many parents reported that the cost of child care is "very important." In considering the issue of cost, however, many parents in our study reported using care during both nontraditional hours and daytime hours. Therefore, these parents said they needed to consider the cost of all the child care arrangements they use.

Parents reported a wide range in how much they paid for nontraditional-hour child care. Several parents who used in-home care provided by family or friends reported offering caregivers gas money, groceries, dinner, and small amounts of money to thank them. Several parents reported that they traded child care with neighbors who also had young children. In contrast, several reported high out-of-pocket expenses when paying people to care for their children during nontraditional hours, with a mother from Washington, DC, reporting that her child care costs for the nontraditional-hour child care are higher than her mortgage. One Oklahoma parent told us that she pays \$5 a day just to keep the child care option available and \$24 a day when she uses care.

Despite these costs, no parents we interviewed used subsidies for the nontraditional hours, although about two-thirds of study participants reported using child care subsidies, or free or reduced-cost care, during daytime hours. For example, during the day, several parents reported using Early Head Start or Head Start, which are free to families; some parents reported that their children attended the state prekindergarten program, which they reported required parents to pay on a sliding-fee scale; and many parents using licensed family child care or center-based care during the day reported receiving child care subsidies to help them pay for their care. A mother from Connecticut who works two jobs and gets subsidies to help pay for the care she used during the day highlighted the important role of subsidies in sentiments that were echoed by other parents who accessed subsidies. She said, "Care for Kids [the state child care subsidy program] pays \$800 dollars a month, I pay \$350 dollars a month...[1]"

think it's phenomenal. You'd be paying for another mortgage with the cost of child care. I don't have the flexibility of having a spouse. Care for Kids is the only way I can have care for my child."

Parents Relying on Family and Friends Reflected on Challenges of Finding Nontraditional-Hour Child Care

Many parents told us that they were fortunate to have "a social support system" or that they had relatives who lived close who they relied on for nontraditional-hour care. In many instances, these parents told us they were concerned that they were causing stress to their friends and relatives by relying on them to "help."

Many study participants told us they felt bad for parents who did not have friends and family who could provide nontraditional-hour child care. These parents told us that it would be helpful to parents to have access to information about in-home care that was vetted. Several said they did not know of options for families who did not have friends or relatives to care for their children during nontraditional hours.

Across all three locations, many study participants who relied on family or friends told us they felt fortunate to have this care arrangement. In Connecticut, several parents told us that in the absence of personal relationships that allowed them to have child care, they would need to reduce their work hours. Although we did not systematically ask about how child care affected employment, we also heard from several parents in Washington, DC, and Oklahoma that in the absence of personal relationships with caregivers, they would need to change employment.

*I have parents who watch them...In a realistic world, not everyone has parents like I do.
—A mother from Oklahoma*

Parents Reported That the Supply of Nontraditional-Hour Child Care Is Inadequate

Most parents who participated in the study told us they believe few child care options were available to parents who need nontraditional-hour child care. As noted, most parents recommended care in their child's home provided by a friend or relative. However, study participants also told us that nontraditional-hour options in licensed family child care and center-based care in their areas were

inadequate. Data on licensed care show a limited supply of care offered during nontraditional hours across the three sites (box 2), though limited state or community-level data are available on child care provided by relatives or friends in the child’s home or in the home of the caregiver.

BOX 2

All Three Sites Reported Limited Supply of Licensed Care for Nontraditional Hours

Data are not available on the supply of relative and license-exempt home-based options in the two states and Washington, DC. However, data from the focal communities corroborate parent reports that a limited supply of licensed child care is available during nontraditional hours.

- A needs assessment conducted by United Way of Greater New Haven reported that “[q]uality care is lacking during nonstandard hours, like evenings and weekends, schedules more typical for low-income earners than those with higher paying jobs.”²⁵
- Our analysis of data from the Oklahoma Department of Human Services shows that in the southeast counties of focus for this study, only 5 percent of the licensed family child care providers and centers offer nontraditional-hour care.
- In the District of Columbia, a 2021 report showed that before the pandemic, 39 percent of facilities were licensed to offer nontraditional-hour child care, but the share that offers care during those hours had been steadily decreasing (Greenberg et al. 2021).

Parents Reported Using Multiple Arrangements and Patching Together Child Care

As noted earlier, many parents reported that the care arrangement they used during the day was different than the care they used during nontraditional hours, which means that they had to rely on multiple child care arrangements to cover their child care needs. For example, a mother from Connecticut who worked irregular hours at two different jobs told us that she used multiple arrangements, which was similar to the experiences reported by other parents with irregular hours. Parents also told us they used different forms of care when their schedules shifted and when their primary arrangement fell through. Several parents noted that when their schedules shifted, they often relied on arrangements that were not ideal. For example, a mother who worked at a store on the weekends reported bringing her child to the store. Several parents reported feeling like they were imposing on family or friends when they needed backup child care.

Location of Care Is Important to Reduce Commuting Time and Related Stress

When asked about the importance of location when selecting child care, many parents across sites reported that for out-of-home care, it is important for the provider to be close to their home to minimize commuting time, reduce stress, and minimize disruptions in children's routines. For example, a parent from Oklahoma who reported that she uses a neighbor who lives behind her noted that the location is helpful because it makes early morning or late-night transitions easier. We heard from parents in the District of Columbia and Connecticut that location is also important when weighing out-of-home child care options.

Community Safety Concerns Affected the Care Arrangements Some Parents Use

A few parents noted that they had concerns about personal safety late at night and early in the morning. The parents who mentioned safety said they needed to think about their young children as well as themselves if the care arrangement requires them to be out when it is dark and few people are around. One parent who noted neighborhood safety concerns and high rates of crime stated, "It's safer to keep the kids inside and have a family member come over." Interestingly, we also heard from child care providers in our key informant interviews about safety concerns for their staff members when asking them to work late at night or very early in the morning

Implications for Policy and Practice

Our research suggests that nontraditional-hour work schedules are common for families with low incomes and families of color who have faced structural and systemic barriers to economic opportunity. As described in the preceding pages, most parents we interviewed recommended care in the child's home during most nontraditional-hour periods as the best option for children's development—especially in the evening and overnight—with care in someone else's home as the next best option. A majority reported that the costs could be challenging for parents with nontraditional-hour child care needs. Similarly, a majority suggested some health and safety training for unrelated caregivers and reported that parents without support networks were likely to face challenges finding care.

This section explores some of the implications of these findings for the major areas of child care policy, the extent to which these policy areas support the recommendations of the parents we interviewed, and suggestions for policy changes that could better support these families. Specifically, we discuss the following:

- taking steps across child care policy areas to improve supports for nontraditional-hour child care
- making child care assistance through the Child Care and Development Fund (CCDF) more available for parents working nontraditional-hour schedules
- supporting the supply of nontraditional-hour child care options that parents want and use
- ensuring that policies designed to protect children's health and safety and improve quality child care support nontraditional options
- providing parents with information about nontraditional-hour child care options
- supporting access to nutritional supports for nontraditional-hour child care

In addition to our interviews with parents, the information in this section was drawn from interviews that we conducted with a range of stakeholders and experts—including people from our focal sites and states and national experts—as well as from a review of key policy documents (appendix A). We also include additional details and resources on several of these policy systems in appendix B.

Each of the following sections includes specific examples in each policy area that could be part of such a review. These areas are summarized in box E.1 in the executive summary.

1. Take Steps across Child Care Policy Areas to Improve Supports for Nontraditional-Hour Child Care

Our review of existing federal and state child care policies reveals that **existing policies and systems are not designed to support the nontraditional-hour child care arrangements that the parents we interviewed believed were best for their children.** This challenge primarily arises because of some combination of the following three factors:

- Existing policy and system designs appear to assume parents are working schedules that
 - » are stable,
 - » are based on an eight-hour workday (plus commuting time), and
 - » involve work during the traditional Monday–Friday workweek.

However, the complex and changing schedules of parents working nontraditional hours are not consistent with these assumptions.

- Existing policies and systems are based on children’s developmental and care needs during the day, and they do not recognize that children’s developmental and care needs are different during nontraditional hours.
- Existing policies and systems mostly support licensed center-based and licensed home-based settings, and they do not support the in-home child care and care by relatives and friends that parents in our study recommended for children during nontraditional hours. The latter are the child care arrangements and caregivers used by millions of children nationwide.²⁶

These findings suggest that policymakers and stakeholders who are responsible for overseeing and implementing child care policies and are interested in improving supports for families working nontraditional hours should take the steps recommended below in each of the policy systems described in the next section.

Engage with Parents Who Are Working Nontraditional Hours, as Well as with the Providers Who Are Currently Meeting Their Needs

Our study underscores the importance of understanding the specific needs and preferences of parents working nontraditional hours, the providers supporting them, and the constraints that both groups face to inform state and community policymakers who want to support these families. Directly engaging parents who need nontraditional-hour child care and the providers they want to use is important for state and community policymakers to ensure that their policies help parents access the care arrangements they need and want for their children.

In reaching out to parents and providers, however, it is important for policymakers to take the following actions:

- **Engage parents who work nontraditional hours, including those who may not be connected to formal child care systems.** For example, include parents who are not using licensed settings, and work with trusted community intermediaries to engage parents who may not easily engage with public agencies because of negative experiences or concerns (Adams and Pratt 2021).
- **Reach out to the providers that parents use and recommend for nontraditional-hour child care** to better understand their needs and challenges, which also means not relying on established child care networks and potentially seeking trusted community intermediaries to facilitate the process.
- **Sustain the engagement with parents and providers over time** so that their insights can inform policies and practices at each stage of the process and provide a system of ongoing monitoring and accountability and transparency with parents and providers to allow them to assess progress.

Undertake a Systematic Review of Policies and Practices across All Systems That Support Child Care

As noted earlier, child care policy areas tend to have some common and systemic ways that their policies do not reflect the child care realities and preferences of parents working nontraditional hours. Stakeholders and policymakers should undertake a systematic review of all their policies to assess whether and where these oversights may be shaping their policies in ways that make their supports less available to parents working nontraditional hours.

The review could involve examining the specific issues identified in the subsequent sections (and summarized in box E.1 in the executive summary) and reviewing policies and practices across their systems to assess whether their policies support the following unique aspects of nontraditional-hour child care:

- hours that extend beyond the traditional eight-hour workday
- days of care that extend beyond the traditional Monday–Friday workweek
- schedules that regularly change
- the specific and unique developmental and care needs of children during evenings, overnight, early mornings, and on weekends
- care options in the child’s home or someone else’s home, by a relative or someone the family trusts

Recognize That Making Public Child Care Resources More Available to Parents Working Nontraditional Hours Can Help Address Historic Inequities in Access to These Supports

As noted previously, parents with low incomes and parents of color are disproportionately likely to work nontraditional-hour schedules. Taking the recommended actions can help make current child care investments and services more accessible to those families, and thus can help address some of the inequities in how the child care system is currently structured (Adams and Pratt 2021).

2. Make Child Care Assistance through the CCDF More Available for Parents Working Nontraditional-hour Schedules

Parents who use nontraditional-hour child care reported constrained child care options, particularly for those who do not have access to support systems that could help them, and they reported concerns about the cost of care. Although child care subsidies supported by the CCDF are designed to help defray some or all child care costs for working parents with low incomes (appendix B), the parents we spoke with recommended in-home care and care by relatives and friends as the best for children during

nontraditional hours, and this type of care is not commonly supported in state CCDF subsidy systems. Specifically, in 2019, nationwide

- only 1 percent of children served by the CCDF were cared for by relatives in the child’s home, and 1 percent by nonrelatives in the child’s home;
- only 3 percent were cared for by relatives in the relative’s home, and 1 percent by nonrelatives in their home; and
- only 11 states reported that 1 percent or more of children receiving subsidies were cared for in their own homes by a relative, and in 5 of those 11 states, the share was less than 2 percent.²⁷

Moreover, the share of children in the subsidy program who are served in home-based settings overall has declined since the late 1990s and more significantly since 2006 (Henly and Adams 2018).

To improve the likelihood that parents who are eligible for and need subsidies can use them for the nontraditional-hour child care arrangements they want, the federal government and state agencies responsible for overseeing the implementation of the CCDF can take the following steps.

Expand and Simplify Access to Child Care Subsidies for Relatives and Other Providers Who Care for Children in the Child’s Home or Their Own Home

As described in Adams and Dwyer (2021), a variety of reasons exist for the low levels of participation in the subsidy system of relatives and other license-exempt home-based providers. Some reasons are related to federal CCDF requirements that child care providers who receive subsidy payments must be either licensed or registered, or—if they are legally exempt from licensing—must meet additional health and safety protections (though relative care providers can be exempt from these requirements).²⁸ Also, states are required to have basic monitoring in situations in which nonrelative providers care for children in the child’s home, though again relatives appear exempt from these requirements.²⁹ (See appendix C for information on subsidies and these caregivers in our three focal sites.) Nonetheless, current federal guidance is not entirely clear and greater clarity about the flexibility that states have in how they approach allowing subsidies in these settings would be helpful.

States vary widely in how they approach the question of whether to allow these providers to participate in the subsidy system, and states vary widely in what they require of participating providers (Adams and Dwyer 2021). Other issues that can affect whether relatives and license-exempt caregivers participate in the subsidy system include the provider approval process (Adams and Pratt 2021), how much providers are paid (discussed more later), and the expenses states can incur if they set up the

monitoring and enforcement systems for these providers (Henly and Adams 2018). States interested in considering how to expand these caregivers' participation should look at each of the constraints to identify whether and how they can take steps to expand participation.

[A voucher that could be used for family and friends] would be nice because I dish out a lot of cash. It's not about "oh my family should do this or do that," it's all about people being there when you need them...Just because my friend is able and willing to take my kids doesn't mean she has everything [in terms of resources] to be able to take care of them.

—A mother from Washington, DC

Ensure That Subsidy Payment Rates Fully Support Nontraditional-Hour Care Providers

The question of how much to pay for nontraditional-hour care—both for in-home care and care by relatives and friends and for child care in licensed programs—was raised in several of our stakeholder and expert interviews. More than a dozen stakeholders across the three locations, including child care providers, state leaders, and community stakeholders, noted that child care subsidy rates for nontraditional-hour care are low. In turn, these low rates disincentivize offering care during nontraditional hours. For example, a provider from Oklahoma who offers nontraditional-hour care reported she only makes ends meet by offering two shifts—one from very early in the morning until 2:00 p.m. and another shift from 3:00 p.m. until midnight.

Our conversations with experts suggested a few specific policy issues that need additional exploration to ensure that subsidy payment rate approaches could adequately support nontraditional-hour child care, including for the relative and home-based providers that the parents we spoke with believed were best for their children during nontraditional hours. The policy issues that need additional exploration include the following:

- **Provide states with guidance on how to establish payment rates for relative and in-home caregivers**, as well as guidance on how to establish payment rates for nontraditional hours that focuses on recognizing and supporting these essential forms of care. Establishing rates for nontraditional-hour care, including for in-home care and care by relatives or friends and by licensed providers, can be complex:

- » There is no “market” for nontraditional-hour care that states can use to assess prices, and it is not clear how to determine how much it costs to provide care during these hours. This is further complicated by the fact that the term “nontraditional-hour child care” includes a set of time frames that involve very different needs of and demands on the caregiver—from early evening (which has the potential to involve picking the child up from their daytime care option, feeding the child, and helping get them ready for bed) to overnight (which involves being nearby in case the child needs help or wakes up, and potentially being awoken during the night when the parent gets off work) to early morning (which can involve waking the child up, getting them dressed, feeding them breakfast, and getting them to their daytime child care option) to weekends (which can involve any of the previously mentioned activities as well as taking the child to the library, park, and so forth). The heterogeneity of these demands creates an additional challenge in identifying appropriate rates.
- » The issue is even more complicated for relative caregivers and other home-based providers who are exempt from licensing because states vary widely in how they establish rates for these providers even for care during “traditional” work hours and appear to often base their rate decisions for these providers on reasons other than the cost of providing care (Adams and Dwyer 2021).
- » Given the growing interest in establishing rates using alternative methodologies (including a focus on the cost of quality care),³⁰ considering how to use that approach in setting rates for nontraditional-hour care and the home-based options parents recommended could be an important next step. However, one major challenge to that process is the lack of consensus on the definition of what “quality” care is during nontraditional hours or what it is in the child’s home. This issue is discussed more in the section on supporting quality.

Because of this complexity, it would be helpful for experts and stakeholders to convene and look at key issues that need to be explored to inform more supportive payment policies for nontraditional-hour child care providers. These issues could include (a) whether and how to establish a minimum payment level for providers serving small numbers of children; (b) how to value the time of caregivers who care for children during nontraditional hours and the range of activities in which these caregivers are involved; (c) what parents are currently paying for nontraditional-hour care; and (d) what payment would be sufficient to incentivize caregivers who might be interested in providing care but cannot afford to not have a job. The experts and stakeholders could identify what is already known on these topics, what additional actions are needed to address each of these questions, and appropriate policy strategies.

- **Examine the implications of the small number of children being cared for when establishing rates and determining appropriate payment levels.** Experts suggested that per child reimbursement rates for child care subsidies appear to assume that a provider cares for multiple children during nontraditional hours, rather than a single child, as might be the case when child care providers offer care during nontraditional hours. For example, one recent study found that the average monthly cost of care for an infant is \$1,230 per child, and on average licensed providers care for four infants at a time to receive a total of \$4,920 a month (Workman and Jessen-Howard 2018). However, if this same provider serves children during nontraditional hours, she might care for only one or two children during those hours and therefore will receive a much lower average hourly rate.

When I was 14, I was making \$5 an hour. I am 63 now and I had a child who was 6 and I was making \$1.50 an hour [during nontraditional hours]. I was making more money as a teenager than being a licensed provider. It just is not worth the money and time.

—Home-based provider from Washington, DC

- **Explore strategies that stabilize payments for providers to ensure they are available for families whose schedules change.** An additional issue is the instability of the hours of care for families who have irregular work hours and the challenges that instability creates for providers. Under current federal law, states can pay providers on the basis of enrollment and not attendance, which stabilizes the income for providers and allows them to be available to serve the child without losing money if they do not attend because of a change in their parent’s schedule. Yet, historically, states have paid on the basis of attendance, and current policies are not designed to support intermittent care. States should consider strategies such as paying for enrollment, rather than for attendance, or other strategies that will support providers’ ability to care for children whose parents have intermittent or irregular work schedules.

Ensure That Approaches to Authorizing Hours of Care Accommodate the Complexities of Nontraditional-Hour Work Schedules

States could examine existing approaches to authorizing hours of care to better support the complex needs of children and families needing nontraditional-hour care, as well as the needs of the providers caring for these children. These issues are all areas in which states have the flexibility to set their own policies under CCDF rules because “Lead Agencies are not required to limit authorized child care services strictly based on the work, training, or educational schedule of the parent(s) or the number of hours the parent(s) spend in work, training, or educational activities.”³¹ Steps that states should consider include the following:

- **Authorize hours in ways that accommodate families, children, and caregivers when parents’ work schedules do not fit traditional workweek assumptions (i.e., eight-hour workdays plus commuting time, five-day workweeks that run Monday–Friday).** Our study points to the importance of considering how to authorize hours of care and payment to ensure that these reflect the complex work schedules of parents who work nontraditional hours. For example, we heard from many parents working nontraditional-hour schedules that they work three days a week with 12-hour shifts, they work multiple jobs, or they have regular changes in their schedules—schedules that may not conform to the assumptions states have about the maximum number of hours parents can use each day.
- **Consider more than work and commuting hours in authorizing hours of care.** A related issue is whether some nontraditional-hour work schedules mean that states should consider more than the parent’s work hours and commuting time in authorizing the hours of care. This consideration might be necessary, for example, in a situation in which a parent works until 2:00 a.m. and the child is cared for at a relative’s house. In this case, some parents reported that they feel it is not good for the child or the caregiver to wake the child and caregiver in the middle of the night to take the child home, which might suggest the need to authorize additional hours to meet the child’s developmental needs for a good night’s sleep. Another example is that some parents reported that they sleep during the day when they work until the middle of the night, which can significantly increase the number of hours of child care coverage a family needs. Again, states have the flexibility to establish these rules as they see fit.

Ensure That Parents Can Use Subsidies for Multiple Providers to Cover Their Full Child Care Needs

As noted, several parents we interviewed worked multiple jobs and accessed multiple forms of care. Moreover, many reported using different care arrangements at different times of day because their care needs varied and they could not be met by a single provider. Given these findings, we recommend that states ensure their processes for subsidy intake, eligibility, and authorization account and pay for multiple arrangements, as well as arrangements that may change from week to week. To support states in improving these processes, the federal government could clarify how states can support families who need care offered by multiple providers.³²

3. Support the Supply of Nontraditional Care Options That Parents Want

The CCDF includes funds that states can spend to improve the supply of child care. Relatively little information is available on what states are doing to support nontraditional-hour child care, although a recent analysis of 2019–21 CCDF plans reported strategies in which states planned to expand the supply of nontraditional-hour child care.³³ The strategies include increasing reimbursement rates for care offered during nontraditional hours, using contracts to increase the supply and quality of care offered during these times, and supporting family child care networks. Yet the analysis showed very few states were planning to support in-home or relative care to improve the supply of quality nontraditional-hour care. Our findings suggest that states should also consider the following steps to support the supply of care options that parents recommend.

Make In-Home Care and Care by Relatives and Friends a Priority in Efforts to Support the Supply of Nontraditional-Hour Child Care

Given the traditional focus of our public child care systems on licensed care options, states also should explore how to best support and expand the availability of the arrangements parents recommend for nontraditional hours. Many of these steps are likely to be the ones suggested in other policy areas in this report—making subsidies more available, supporting quality, and so forth—but it is important that these providers also be a priority for supply-building strategies.

Explore Incentives and Challenges in Helping Licensed Programs Extend Their Hours Slightly in the Mornings and Evenings

Many parents we spoke with used licensed settings during the day, and they discussed the value in programs extending their hours slightly for parents whose work started just before or after the program's normal hours. Although worth exploring further, even before the pandemic, this suggestion would have been complex for licensed settings to implement, given staffing demands and the staff members' own family needs. However, this recommendation would likely be even more challenging currently because programs are reducing hours to address staffing shortages. Nonetheless, this question is worth keeping in mind for future consideration because parents felt that this strategy was optimal for children by minimizing the number of transitions and different caregivers the child had to deal with in a given day.

4. Ensure Systems That Protect Children's Health and Safety and Encourage Quality Child Care Also Support Nontraditional-Hour Care Arrangements

The child care field has several systems focused on children's health and safety in child care, as well as on supporting the quality of child care overall. This section explores whether and how these systems can best support the two major related findings from parents:

- Parents told us that their children's well-being was of primary concern when considering the child care arrangement during all time frames including nontraditional hours. Further, parents' priority for what children needed during nontraditional hours closely aligned with what child development specialists say children need during those times. However, the developmental and care needs of children during nontraditional hours are different in several ways compared with children's need during traditional daytime child care hours.
- A majority, though not all, of the parents we spoke with recommended that unrelated caregivers who are providing nontraditional-hour child care receive CPR and first aid training; however, many parents noted that this training was not necessary for people who are related or well known to the family.

As context, it is useful to know that three areas of child care policy come into play both in protecting children’s health and safety and in potentially supporting quality of care (see appendix B for more information on each of the policy systems).

- **The Child Care and Development Fund** is involved with these issues in two ways: first, as noted earlier, by requiring that programs meet health and safety standards to be able to serve children in the subsidy system, and second, by providing resources that states can use to support activities that promote quality and a greater supply of child care.
- **State child care licensing systems** establish and enforce a baseline of health and safety standards that programs must meet to operate legally, and they determine which providers are exempt from those requirements. Some states require all people who care for even one unrelated child to be licensed; other states set higher thresholds for the number of children a provider can serve in their home before having to be licensed or they exempt some providers (such as faith-based providers, drop-in programs) from licensing requirements.³⁴ As a result, relatives and other small home-based providers in these states can legally provide care without having to meet licensing regulations or oversight. (In this report, we often refer to these providers as “license-exempt” providers.)
- **State quality rating and improvement systems (QRIS)** are systems that set higher quality standards that states use to assess and report the quality of available child care, and they offer supports for child care providers to engage in quality-improvement activities. Much like child care licensing, QRIS vary substantially by state and are tailored to each state, territory, and community’s context. Most QRIS do not include license-exempt home-based providers such as the caregivers that parents recommended for nontraditional-hour care. In 2019, only two states included license-exempt home providers in their QRIS.³⁵

In considering these systems, it is important to recognize that there have been recent calls to revise the standards and requirements of state licensing and QRIS (and CCDF systems, which rely heavily on licensing and QRIS) to better reflect the needs, realities, and preferences of communities of color, people who have come from other countries or who speak languages other than English, and those with different socioeconomic backgrounds (Adams and Pratt 2021). Conversations with experts also reveal that these systems are not necessarily designed to focus on the unique strengths of home-based providers and therefore can be challenging for these providers. Ensuring that the quality standards, monitoring and compliance approaches, and supports for caregivers all reflect inclusive definitions of quality, are based on respect for the full range of providers, and value the perspectives of all parents is

essential in supporting more equitable investments and child care supports for all children (Adams and Pratt 2021).

Our interviews with parents, national experts, and stakeholders provided useful insights for ways to make policies in all three of these systems more relevant and supportive for nontraditional-hour time frames and for the nontraditional-hour child care settings the parents we spoke with recommended.

Identify Appropriate Ways to Support Children’s Health and Safety When Public Funds Are Used to Pay for Care by Relative Care Providers and Small Home-Based Providers Who May Not Be Subject to Licensing Rules

In general, the providers that the parents recommended for nontraditional hours are not included in any of the systems designed to protect children’s health and safety, other than the previously mentioned relatively small number of relatives and license-exempt providers that some states allow to participate in the child care subsidy system. And, to get public resources, almost all the systems require these settings to either be licensed or registered or to meet the alternative CCDF standards, though relatives can be exempt from these requirements.

Ensuring the health and safety of children in publicly funded child care is critical and taking steps to protect them must remain a high priority. However, we recommend that states review their standards and funding-related requirements for in-home caregivers and friends and relatives who may be caring for children in their home during these hours to ensure they are appropriate for these settings. When considering what is required of small home-based license-exempt providers to be able to benefit from public funds, we suggest policymakers examine the health and safety requirements in consultation with parents who need and want these caregiver arrangements, and in consultation with the full range of caregivers currently providing such care, including legally unlicensed providers and in-home caregivers who are currently not participating in the subsidy system. It is important to ensure the requirements are effective in protecting children’s well-being and are also appropriate for the care setting, time frames, and provider type.

Incorporate Parents’ and Providers’ Definitions of Quality of Nontraditional-Hour Care in Quality Standards for the CCDF, Licensing, and QRIS

Experts, stakeholders, and parents reported they believe quality child care is important regardless of the child care arrangements or the hours of care that children are cared for, but the features of quality

and associated measures should be very different for nontraditional-hour care. Parents across sites and demographic groups and stakeholders told us they believe quality care in the evenings, overnight, and mornings should focus on children's safe sleep, loving and nurturing environments, healthy and nutritious breakfasts and dinners with caregivers, and bedtime routines that include bathing, brushing teeth, story time, and consistent times for sleeping and waking. Similarly, they reported they believe it is important for children to have downtime on the weekends but also have access to stimulating activities such as going to a park, zoo, library, or another community activity if the child needs it.

However, several key informants told us they believe the measures used in most state systems for establishing health and safety through licensing, and for rating quality of child care in QRIS, use standards based on appropriate activities during the day that are not relevant for nontraditional-hour care.³⁶ Given these findings, it is not surprising to find that an analysis of the measures across states' QRIS reveals that many current measures of quality focus on daytime routines such as play and learning and do not account for the different activities and routines that parents and stakeholders most value during nontraditional hours such as downtime and sleeping.³⁷

Use of these measures and the overall framework for measuring the quality of nontraditional-hour care, and the links between QRIS ratings and subsidy payments in some states (Adams and Pratt 2021), seem likely to disincentivize those who might otherwise be interested in offering nontraditional-hour care and result in inequities around which providers can access QRIS resources and supports. Instead, identifying features of quality care offered by relatives or friends who care for young children in the evenings, overnight, or early mornings might more appropriately use measures that reflect children's needs during these hours and what parents value, rather than measures appropriate for assessing stimulating engagement during the day.

Consider Refinements to CCDF Requirements and Licensing for Relatives and Other Small Home-Based Providers to Build on Coaching and Home-Visiting Models

Multiple stakeholders suggested looking at what has been learned from coaching and home-visiting approaches to support the quality of relatives and legally exempt home-based providers offering nontraditional-hour child care. Approaches that focus on coaching, home visiting, and other ways to develop relationships with caregivers can play an important role, though again it is essential that these approaches be based on inclusive definitions of quality and a strengths-based approach.

Take Steps to Make Quality Supports More Relevant and Accessible to Relative Providers and Other People Caring for Children during Nontraditional Hours

Experts and stakeholders suggested several ways to make quality supports more effective and available for nontraditional-hour child care providers:

- **Explore strategies to make training in CPR, first aid, and sudden infant death syndrome (SIDS) prevention easily available, affordable, and accessible to all people caring for children during nontraditional hours.** To meet parents' recommendations that caregivers, particularly nonrelative caregivers, have basic health and safety training, it is essential that such training opportunities be readily available, affordable, or accessible to license-exempt providers. States could work with local community agencies and trusted service providers to provide free or low-cost training at various times and locations and conduct outreach efforts targeted to people who have friends and relatives caring for their children.
- **Recognize the unique training needs and motivations of relative providers and smaller home-based providers caring for children.** Research suggests that relatives and other small license-exempt home-based providers are often interested in training and support (Brandon et al. 2002; Shivers n.d.). However, the content of the training needs to reflect the providers' interests and priorities. In 2019, for example, most unregulated home-based providers reported that their primary reason for caring for children was to help the children and parents, and not because they saw caring for children as a career.³⁸ As a result, they are likely to have interests different from other providers (Home Grown 2021). Building on these motivations and interests, rather than approaching these caregivers as child care professionals or assuming that they want to become licensed, will help build their interest and engagement.
- **Make sure that the content of professional development opportunities for nontraditional-hour caregivers is relevant to those time frames.** Stakeholders recommended revisions to professional development offerings to better meet the needs of both licensed and license-exempt nontraditional-hour child care providers. For example, some stakeholders suggested that existing professional development opportunities should adequately address the specific care needs of children at different times of the day and days of the week, and others noted that specific training focusing on early morning, evening, and overnight routines is important. Moreover, one key informant recommended special attention to providing overnight care providers with information to ensure they would be prepared for children who might experience difficulty falling asleep, nightmares, falling out of bed, or difficulty waking.

- **Change the timing and mode of professional development opportunities to better accommodate nontraditional-hour child care providers' work schedules.** Child care providers who offer nontraditional-hour child care reported that they believe professional development offerings were valuable but that they should be scheduled at more convenient times for their work schedules. One family child care provider that operates on the weekends reported that she is required to participate in some trainings and she must bring the children she cares for with her, with activities to keep them busy, while she attends the training. Several providers reported that they attended virtual or online training but that they can only participate in these activities when they are not caring for young children, and it would be helpful if the timing of online professional development could be changed to better accommodate their schedules.

Consider Providing Extra Supports to Address the Challenges Children May Face because of Irregular Schedules

Some experts and stakeholders, including people with backgrounds in child development, noted that irregular schedules can affect children's moods and development. They suggested more comprehensive strategies to support the needs of families whose job hours can be challenging for the child. This suggestion was corroborated by a few providers who offered nontraditional-hour care who suggested providing extra services and supports for families and children with irregular schedules because shifting schedules can create stress for parents and children. In fact, one provider recommended additional access to behavioral assessments for children who are using nontraditional-hour care. She noted that she cared for a child with interrupted sleep and an irregular schedule who regularly exhibited behavior challenges. A different provider who offered 24-hour care noted that sometimes parents will keep children awake because they miss them, and because the child has interrupted sleep the child might act out. States could consider offering such supports to both providers caring for children working nontraditional hours and the parents they serve.

5. Provide Parents with Information about Nontraditional-Hour Child Care Arrangements

Many parents who use nontraditional-hour care reported that they felt lucky to find someone to care for their child during nontraditional hours, and they noted that they felt badly for parents who did not have support networks or other ways to find needed care. Some parents reflected on previous experiences they had searching for care when their relatives were not able to care for their child or

children. Moreover, some reported that they had changed jobs because they could not find care and did not know where to look. When asked about searching for child care, many parents were not aware of how to find child care—especially during nontraditional hours.

Ensure State Child Care Websites Include Information about Nontraditional-Hour Child Care

Our findings reveal that states' child care websites could include additional information to help parents understand what to look for and how to find nontraditional-hour child care (see appendix B for information about CCDF requirements regarding state child care websites). In addition to being helpful for all parents with nontraditional-hour child care schedules, taking steps to provide this information has equity implications because families who have the least resources and are more isolated might be less likely to know about nontraditional-hour child care options. Focusing strategies on ensuring that resources and support reach these families could support more equitable access to child care options.

Including hours of operation of licensed child care could also be useful to parents seeking nontraditional-hour child care. The child care websites in Connecticut, the District of Columbia, and Oklahoma allow users to search for care based on hours of operation. In addition, Connecticut includes license-exempt providers who participate in the subsidy system on its child care websites. This approach is one that other states could consider. Ensuring such features are available on all state child care websites could provide parents with information on their options for nontraditional-hour child care, and it could support the important and unique roles that relative, in-home, and small license-exempt providers play in supporting this form of care.

Provide Parents a Registry of People Who Have Been Screened and Can Provide Nontraditional-Hour Child Care in the Child's Home

Parents recommended that the government provide more accessible information to parents about available care options, and stakeholders suggested that federal, state, and local policymakers consider ways to provide parents with information on how they can access care that is trustworthy and vetted, especially for parents who do not have family, friends, or neighbors who can provide child care. For example, states could create a registry of people who have certain qualifications (such as CPR, SIDS prevention, first aid, and a background check) and could offer in-home care and, if possible, identify those who have been approved by the subsidy system for payment.

An interesting example of this strategy in action can be seen in Oklahoma, which, since the onset of the pandemic, has supported care offered through “Kith.care,” an online platform funded by federal COVID-19 stimulus relief funds.³⁹ Caregivers listed on Kith.care are required to complete CPR and first-aid training and complete sleep training before offering care. The state has developed resources to support caregivers with tips, resources, and voluntary training for families and caregivers providing in-home child care. Currently, most families enrolled in Kith.care are essential workers, but the state is planning a marketing campaign to offer Kith.care for income-eligible families receiving subsidies, especially those in child care deserts or who need nontraditional-hour care.

6. Support Access to Nutritional Supports for Nontraditional-Hour Child Care through the Child and Adult Care Food Program

Several child care providers and national key informants who participated in key informant interviews reported specific challenges accessing nutritional supports that are appropriate for nontraditional-hour time frames. The Child and Adult Care Food Program (CACFP) is designed to help pay for meals provided to children in child care (appendix C). Like other programs described earlier, CACFP appears to be designed primarily for traditional-hour child care and may not adequately support the nutritional needs of children in nontraditional-hour child care.

Review Nutrition Supports to Assess Whether the Program Design Reflects the Actual Hours and Irregular Schedules of Children Whose Parents Work Nontraditional Hours

One challenge is that the CACFP nutritional supports are based on assumptions of child care being during daytime hours and a traditional workday. For example, our conversations with a few providers revealed that child care providers who offered care very early in the morning, in the evening, and overnight reported challenges associated with meals and snacks for children with nontraditional-hour schedules. One provider noted that children who arrive quite early in the morning are often hungry and want a second breakfast when other children are eating. However, the design of the CACFP only reimburses for a single breakfast. Other providers noted that children who are cared for longer than 12 hours require more meals than the current program allows.

The providers recommended that policymakers recognize the varied schedule demands of children whose parents work nontraditional hours and tailor nutrition services to ensure that children’s nutritional needs are met during the full time they are in care. This recommendation includes, for example, recognizing that children may be in care for 12 hours (or more) in a given day.

Consider Expanding Access to CACFP for Relative and License-Exempt Caregivers

Another challenge is that although states are allowed to have relative caregivers and license-exempt caregivers participate in the CACFP if they go through a process to be “approved,” most states do not allow these caregivers to benefit from the program (Adams and Hernandez 2021). However, some states allow these caregivers to participate in the program if they have been approved by the CCDF to receive child care subsidies; and one state, Louisiana, allows license-exempt home-based providers to participate if they have been approved by the fire marshal (Lloyd et al. 2021). Other states could learn from these states—allowing these providers to participate could expand nutritional supports to the many children who are cared for in these settings and reduce the costs to providers of providing nutritional meals (Adams and Hernandez 2021).

Conclusions and Next Steps

In conclusion, almost 5 million children in the US live with parents working nontraditional-hour schedules—more than one-third of all children younger than age 6 with working parents. The share is even higher for children in families with low incomes.⁴⁰ Thus, a sizeable percentage of children whose families are a priority for public child care investments have parents who work nontraditional hours. Further, children of color are disproportionately likely to have parents who work these schedules, highlighting the role structural racism has played in limiting access to good education and employment opportunities for these families. As a result, ensuring that families with parents work nontraditional-hour schedules can access public resources is important to meet our societal goals for supporting equitable access to child care that meet the needs of all parents and children.

We found that most families with nontraditional-hour schedules recommend care in the child's home and care by relatives and friends for their children during most nontraditional hours, except the time immediately before or after the traditional day. However, when comparing these recommendations with our public child care policy areas, we found that in general these care settings are not supported by our publicly funded child care policies and practices. Further, current child care policies often appear to assume that parents work traditional work hours and regular schedules and are based on concepts of quality care designed around what children need during daytime hours. These assumptions are not accurate for the one-third of all children living with parents who work nontraditional hours and result in our investments in child care being less accessible to these children and their families. Further, they result in inequitable access to child care supports for parents working nontraditional-hour jobs who have disproportionately lower incomes and are people of color.

We have provided several concrete policy recommendations or policy issues that child care agencies and policymakers should consider to better support the nontraditional-hour child care arrangements parents want and use. However, our findings also raise several important issues that need further exploration, which include the following:

- Across sites, the parents we interviewed provided fairly consistent reports about the child care arrangements they believe are best for children during nontraditional hours. Specifically, most recommended in-home care for young children in the evening and overnight and care by relatives and friends. However, we suggest that policymakers interested in supporting these families identify ways to engage with families in their communities to determine the degree to which our findings are generalizable to their communities and ensure that their policies are

being designed in ways that reflect their needs. When our approach to assessing the incidence of nontraditional-hour work using the ACS and SIPP data was broadened to all 50 states,⁴¹ we found that the estimates of potential demand varied depending on the state, but the general patterns across families with different incomes and racial or ethnic characteristics held true across the country. Yet, to date, research on what child care arrangements parents working nontraditional hours want and need has not yet been conducted more broadly.

- Research has demonstrated wide variation in the quality of care across all settings including care provided by relatives and friends, in family child care, and in center-based care. Across all these settings, care can be high quality and supportive of both children and families (Bromer et al. 2021; Henly and Adams 2018). Our research reveals that most parents want their child cared for in their own home during most nontraditional-hour periods as their first option and in others' homes as their second option in the evenings and overnight. Most recommended the best arrangement is for young children to be cared for by relatives or friends. Yet existing child care policies do not support these care arrangements. Therefore, we recommend that federal and state policymakers
 - » explore how to best support care in the child's home, care by relatives, and care by other friends in their homes;
 - » take steps to address the challenges of undervaluing child care, a challenge that appears more pronounced for nontraditional-hour care and the in-home child care arrangements that parents recommend for most nontraditional-hour periods; and
 - » examine how we can support greater involvement of relatives, other legal license-exempt providers in the subsidy system, and other child care systems while ensuring basic accountability for children's health and safety.

- Researchers, policymakers, early education practitioners, and parents should address the following questions:
 - » What is "quality care" for child care offered during nontraditional-hour schedules?
 - » How can we incorporate parents' perspectives and priorities and child development research on children's needs during these times to create inclusive definitions of quality nontraditional-hour child care for licensing, the QRIS, and the CCDF?
 - » How do we build the unique aspects of nontraditional-hour care into our subsidy system payment approaches, including identifying the appropriate payment levels for "quality" nontraditional-hour care and meeting the needs of providers caring for only one or two children?

In sum, our findings suggest that if policymakers want to address the child care needs of families with parents who work nontraditional hours, it is important to revisit the core assumptions of stable weekday work schedules and children’s developmental needs during daytime hours that appear to underlie current child care policy. The findings also suggest that a need exists to anchor policies and child care practices in the realities and preferences of families working nontraditional hours as well as the providers who care for children during nontraditional hours. Addressing these issues is timely as our country works to build more equitable access to child care, especially because high shares of young children of color have parents with nontraditional-hour work schedules and low incomes. Supporting the child care arrangements these families want and use will be an important step in meeting *all* working families’ needs as they try to ensure their children’s well-being and healthy development.

Appendix A. Objectives, Scope, and Methodology

We conducted this study from early 2020 through 2021 to understand the potential demand for nontraditional-hour child care and parents' perspectives on the care arrangements they want and use during specific nontraditional-hour periods. We employed a mixed-methods approach that began with analysis of existing survey data. We then conducted interviews with parents and key stakeholders. We briefly describe the focal sites, sample, and methods.

Data Sources

To address our research questions, we collected and analyzed the following data from different sources:

- **Survey data.** To address our question about the potential demand for nontraditional-hour child care and the characteristics of parents working those hours, we analyzed data from the 2014–18 ACS and the 2016 SIPP.
- **Parent interviews.** We conducted interviews with 41 parents across our three sites, all of whom worked nontraditional hours, to hear parents' recommendations for the child care arrangements they recommend as best for young children and their families during specific nontraditional-hour schedules.
- **Stakeholder interviews.** We interviewed stakeholders, including national experts, state leaders, and community stakeholders to obtain their perspectives on the state and local or community child care contexts; we also interviewed national key informants.
- **Document review.** We analyzed documents including policies and regulations and child care plans from Connecticut, Oklahoma, and Washington, DC, and their communities.

Focal Sites

We focused our study on Connecticut, the District of Columbia, and Oklahoma and communities that represent locations with diverse demographic characteristics and child care policies. We began by reaching out to potential partners in the state and DC offices that oversee child care in three sites. After

establishing partnerships with leaders in each site, we analyzed data from the ACS and SIPP to understand the potential demand for child care in each site and within different regions and communities across each location. Together with state partners, we reviewed data to identify communities within each location that demonstrated a high potential demand for nontraditional-hour child care that included parents who identified with a range of races and ethnicities and to ensure that across all three focal sites we had a mix of urban, rural, and suburban communities.

After consulting state agency leaders and reviewing the data, we selected the following communities from which to recruit parents to participate in the study:

- **Connecticut communities near New Haven, West Haven, Hamden, Fair Haven, and Hartford.** These communities represent a mix of urban and suburban neighborhoods that include families across income groups. For example, our analysis of ACS and SIPP data revealed that approximately 33,090 children younger than age 6 lived in families with working parents in the New Haven region. Approximately 10,670 (about 32 percent) of these children (children younger than age 6 with working parents) in these communities lived in families with parents who worked nontraditional hours. This percentage was similar to other regions in the state. About 18 percent of these children lived in families with incomes below the federal poverty level, and an additional 24 percent lived in families with low incomes. In these communities, of the children younger than age 6 who lived with working parents and had all parents in their household working nontraditional hours, about 37 percent were Latinx, 37 percent were white, 21 percent were Black, and 6 percent identified as multiracial or other.⁴²
- **Oklahoma communities included the following rural counties in the southeastern region of the state: Atoka, Bryan, Choctaw, Coal, Haskell, Hughes, Latimer, LeFlore, McCurtain, Pittsburg, and Pushmataha.** Our analysis of ACS and SIPP data revealed that approximately 6,940 children younger than age 6 lived in families with working parents in these communities. Approximately 2,690 (about 39 percent) of these children lived in families with parents who worked nontraditional hours, compared with the statewide average of 36 percent. About 23 percent of these children lived in families with incomes below the federal poverty level, and an additional 30 percent lived in families with low incomes. In these communities, of the children younger than age 6 who lived with working parents and had all parents in their household working nontraditional hours, about 44 percent were white, 26 percent were Native American, 26 percent were multiracial, and 13 percent were Latinx.⁴³
- **Washington, DC, urban neighborhoods.** For example, in the neighborhoods south of the Anacostia River, our analysis of ACS and SIPP data revealed that approximately 9,290 children

younger than age 6 lived in this area in families with working parents. Approximately 4,850 (about 52 percent) of these children lived in families with parents who worked nontraditional hours, compared with the District of Columbia total of 35 percent. About 29 percent of these children lived in families with incomes below the federal poverty level, and an additional 40 percent lived in families with low incomes. Of the children younger than age 6 who lived in this area with working parents whose parents worked nontraditional hours, about 91 percent were Black and 6 percent were Latinx. The total is less than 100 percent because the sample sizes for white and multiracial are too small to report.⁴⁴

ACS/SIPP Analysis

The data are from the Census Bureau’s 2014–18 ACS and 2016 SIPP. The results provide information on the children of parents working nontraditional-hour schedules. We define nontraditional hours as those hours in which parents are working or commuting at any point between 6:00 p.m. and 6:59 a.m. during the week or anytime on weekends. Because our goal is to identify the potential need for child care for children living with two parents, we only count the children in two-parent families if both parents were working or commuting either during the same weekday hour or anytime during the weekend. For more information on how children with parents working nontraditional hours are identified and the methodology used in this analysis, please see Sandstrom and colleagues (2019).

Defining the Population Potentially Needing Nontraditional-Hour Care

ACS data were available at the individual level for 2018 and for even more observations in the five-year sample covering 2014–18. The ACS public use microdata sample from the University of Minnesota’s Integrated Public Use Microdata Series USA project includes information on parent-child relationships, industry of employment, typical times of departure for and arrival at work, typical travel time to work, and usual number of hours worked each week. Building on the methodology developed in prior analyses of potential demand for nontraditional-hour child care by the authors and their colleagues (Henly and Adams 2018; Sandstrom et al. 2018, 2019), information in these fields was used to infer whether the child reflected in each record was a child in the age range of interest, had parent(s) who worked, and if his or her parent(s) likely worked during nontraditional hours.

We focused on children younger than age 6 in the three focal sites, with all parents living in the household working at least part time at survey time. We substituted the household head when no parents were present and excluded children living in group quarters without a household head. We then

estimated whether these children's parent(s) worked or commuted during nontraditional hours by setting the start time for when the child potentially required care to the value of the "time of departure for work" variable. The end time for when care was potentially needed was calculated by taking the value of the "time of arrival at work" variable and adding the values of the "usual hours worked each week" variable divided by five, assuming work hours were spread over a five-day workweek, and "travel time to work," assuming commute time to home was the same as to work, to determine the typical time the parent(s) arrived at home after work each day. For example, if a parent typically arrives at work at 9:00 a.m. and works 40 hours a week, we assume the parent works 8 hours a day and departs work at 5:00 p.m.

Estimating Potential Need for Weekend Care

To estimate potential need for weekend care, we performed an analysis like the one conducted for previous similar projects. Specifically, we estimated the number of children whose parents work on weekends by incorporating additional analysis of the 2016 SIPP because the ACS does not contain information on day of work. The SIPP data provided an independent estimate of the share of employed parents (with children younger than age 18 living in the home) who worked outside the home on the weekend at any job during 2016. Whether children had parents working during the weekend or nontraditional hours during weekdays drawn from these two different sources were independent and not mutually exclusive. Children could have parents working nontraditional hours during weekdays, weekends, both weekdays and weekends, or neither.

Using the SIPP, we estimated the share of parents in the US who listed themselves as working on either Saturday or Sunday (and were not working from home those days) for any job they held during the year using 2016 SIPP data. The overall share of adult workers who worked on the weekend was roughly in line with aggregate 2016 information from the 2016 American Time Use Survey, which served as a benchmark for our calculations. We limited the sample for our SIPP calculations to adults ages 16 and older to match the population that has employment data in the ACS. These adults also had to be employed and in the survey for all 12 months of the year to be included in our calculations.

We predicted the probability that working parents of young children with various characteristics in the ACS data were working during the weekend at any of their jobs based on estimates of how likely it was for employed adults to be working during the weekend in the SIPP data based on their characteristics. Specifically, using a multivariate, linear regression model, we estimated the likelihood of working during the weekend for employed adults in the SIPP on the basis of their state of residence, age

group, race/ethnicity, sex, education level, ratio of family income to poverty threshold, marital status, number of children, number of children younger than age 6, age of their youngest child in the household, age of their oldest child in the household, worker class (self-employed, public, private, or nonprofit), hours typically worked in a week, industry of employment, occupation of employment, job start time, and commute time. We then used those estimates and the regression model to predict the likelihood that working parents of young children worked during the weekend using these same characteristics, which were all available in the ACS.

Finally, we created two copies of each child and reweighted one copy by the percent chance that their parents were working on the weekend, and we multiplied the other copy by the percent chance that their parents were not working on the weekend. For example, if the original child observation had a weight of 100 (meaning the one observation in the sample represents 100 actual children in the population) and had parent(s) with a 30 percent chance of working on the weekend, the child was counted twice—once as a child with parents working on the weekend and a new weight of 30 and a second time as a child with parents who were not working on the weekend with a new weight of 70. Therefore, our final estimate, if based only on this one observation, would be that out of the total 100 children in our population, an estimated 30 children had parents working on weekends and 70 did not.

Interviews

We conducted interviews with parents from the focal communities. We shared information about our study with parents in each focal community through partnerships with local organizations, social media, and by distributing flyers. We translated materials into Spanish and offered parents a gift card for participating in the study. We recruited 41 parents across our three sites. We screened parents to ensure study participants had children younger than school-age, worked nontraditional hours, and used some form of nonparental child care.

With input from our advisers, we asked parents about the child care arrangements they would advise for a friend who had young children to determine what they believe would be best. Our advisers noted parents' child care options are often constrained, and simply asking them about their "preferences" would likely yield information that would not be as accurate as presenting parents with scenarios and asking them for their recommendations. Therefore, we presented scenarios and asked parents to recommend to a friend the child care option they believe would be best. We asked them to imagine that any child care option would be available and affordable. We asked them to answer questions based on the following specific periods: (1) early morning (before 7:00 a.m.), (2) evening (after

6:00 p.m.), (3) overnight, (4) weekends, (5) irregular, and (6) during the day. We presented the following options to choose from when we asked parents which child care option they would recommend to their friend to use:

- a person caring for the child in the family’s home—noting that this person could be family or a friend or a hired nanny or babysitter
- a person caring for the child in their home—noting that this person could be a licensed family child care home or a friend or relative’s home
- a licensed provider caring for children in a child care center that is licensed by the state

We also asked respondents if their answers would have been different before the COVID-19 pandemic. In addition, we asked if their answers would be different if they had a school-age child. We included additional questions about the families’ demographic characteristics, parents’ work schedules, child care arrangements the parents were currently using, and parents’ thoughts about different aspects of child care. To learn about parents’ perspectives on different attributes of child care, we asked them about a range of attributes including reliability of care, cost, location, warmth of the caregiver, the focus on curriculum, similarity of culture, and similarity of language. A research assistant took verbatim notes that were coded and analyzed.

About the Sample of Parents

The parents we interviewed were similar in ages but differed in demographic characteristic. All but one of the parents identified as female. The median age was 30. However, the parents we interviewed ranged in age from 19 to 47. Most parents worked in the mornings and evenings, with fewer parents working weekend shifts. Only a couple of parents worked overnight. However, several reported working until midnight or 2:00 a.m. and coming home from work in the middle of the night.

Table A.1 presents details about the final sample of parents and stakeholders we interviewed in the three locations, and box A.1 presents additional details about the parents’ schedules and occupations.

TABLE A.1

Characteristics of Parents by Focal Site

Parents	Connecticut	Oklahoma	Washington, DC
Total	12	14	15
Black/African American	8	1	14
Latina ^a	2 ^b	0	1
Native American	0	6	0
White	2	7	1 ^c
Asian/Middle Eastern	1	0	0
Average Age	32	31	30
Age Range	19–45	21–40	22–47
Average number of children	1–2	2	2

Source: Data retrieved by Urban research team and author during interviews.

^a Throughout the report, we use “Latina” to describe interviewed parents of Latin American descent because they self-identified as such. We use “Latinx” to describe people of Latin American descent when discussing American Community Survey data. The authors acknowledge this may not be the preferred identifier, and we remain committed to employing inclusive language whenever possible. ^b One participant identified as Black and Latina. ^c One participant identified as white and Latina.

BOX A.1

Characteristics of Parents Who Were Interviewed

Parents reported working a range of jobs

- Many work early in the morning before 7:00 a.m. in occupations such as teaching assistants or teachers and as nursing assistants or nurses. Others were staff members at coffee shops and data security centers. One parent was a transportation dispatcher, and another was an electrical apprentice.
- Several parents work weekends, such as a caseworker, lab worker, grocery store stocker, customer service associate, and staff member in a dentists’ office.
- A few work overnight, such as caseworkers providing services in a homeless shelter, health care workers, and a mother who works in telecommunications who is on call and needs to work occasional overnights.
- Many work late evening including parents working in the medical field, a lab assistant, a behavioral health staff member, a veterinarian’s technician, a staff member at a fast-food restaurant, and a COVID-19 testing staff member.

Parents reported a range of work schedules

- **Set schedules reported by a share of parents.** About 40 percent of the parents we interviewed reported working set nontraditional-hour schedules. For example, one mother in Oklahoma

works a regular evening schedule that ends at about 1:00 a.m. at a fast-food restaurant; one mother in Washington, DC, works for a telecommunications company early in the morning, and one parent works as a pharmacy shift manager from 4:30 a.m. until 1:00 p.m. daily.

- **Shifting schedules reported by many parents.** About 60 percent of parents we interviewed reported that their schedules change on a regular basis. For example, a mom from Connecticut reported working 12-hour shifts three days a week and alternating weekends and that her husband is a construction worker who leaves early in the morning.
- **Mix of set and shifting schedules reported by some.** Across all three locations, a few parents reported that their schedules are mostly set but do shift occasionally. For example, a mother from Oklahoma who is a veterinary technician works a set schedule during the week but works one weekend a month; a parent from Connecticut works as a lab technician, and his schedule shifts based on the needs of the lab; and a parent who works in the District of Columbia as a hair and makeup stylist works weekends and nights if weddings or special events are scheduled during those times.

Stakeholder Interviews

We interviewed leaders in the state agencies responsible for child care policy decisions and the implementation of child care regulations, community leaders including those responsible for implementing child care policies and stakeholders affected by these policies, child care providers, and national experts. We used semistructured interview protocols to learn about the state and community contexts, existing policies affecting child care providers, and the implications of the study findings for policy and practice. For the stakeholder data collection, we interviewed eight child care providers and conducted a group interview of providers in Connecticut. We also interviewed more than a dozen state and community stakeholders in each location as well as six national experts to reflect on findings and policy implications.

Document Reviews

We reviewed documents from each state and community related to child care licensing regulations, the QRIS, the supply of licensed child care, and available and existing analyses on the supply and demand for nontraditional-hour child care. We also reviewed federal documents to identify key child care laws and regulations and reviewed existing reports. We reference those documents throughout the report.

Analytic Approaches

For our qualitative analysis of parent interview data, we created codes to identify key themes and organized findings by theme within each focal site, across demographic groups, and for the entire sample. The interview notes were coded in NVivo. Two researchers reviewed the coding for consistency. For each nontraditional-hour period, we counted the number of times parents reported that the option was their top priority and noted when the option was their second priority. We also coded when parents said they would advise against the option. Interview data revealed that in response to some questions parents did not always distinguish between care during nontraditional hours and care during the day. In these instances, we triangulated findings from their responses to questions about different time frames. We also noted when parents provided inconsistent or contradictory answers. For example, in responding to the questions about the care arrangements they would recommend to a hypothetical friend, in some cases, parents noted that their priority for early morning care was a child care center but then said they preferred in-home care. In such instances, researchers reviewed additional text to explore reasons for the contradiction. So, for example, in the cases of early morning care, we found that many parents distinguished between 5:30 a.m. and 6:45 a.m., noting that they had to account for whether the child was sleeping. Although we counted responses to interview questions, because of the qualitative nature of the interviews we report themes on the basis of the following categories: nearly all, most, many, a majority, some, several, a couple, and a few. We reviewed the data to ensure consistency in coding data on the basis of these categories.

For qualitative analysis of stakeholder interview data, we coded key themes and identified convergent and divergent perspectives across groups.

For the survey analysis, we performed descriptive statistical analyses to show the potential demand for nontraditional-hour child care in the three focal sites and communities.

Appendix B. Background on Key Child Care Policy Systems

In the report, we discuss several policy systems that have the potential to better support the nontraditional-hour child care options recommended by the parents we interviewed. In this appendix, we provide a few more details on several of the systems.

Child Care and Development Fund

Publicly funded child care, including child care subsidies, is funded through the Child Care and Development Fund (CCDF), which is the national federal-state child care assistance program. The program is designed to support parents' work and children's development, and in recent years it has made meeting the needs of families working nontraditional hours a priority.⁴⁵ The CCDF primarily serves families with low incomes, and in 2019, it helped defray the costs of child care for 1.4 million children.⁴⁶ However, the program's funding level only allows it to serve about one in seven children eligible under federal rules, which means that states face trade-offs in where to allocate the resources.⁴⁷ The CCDF authorizing legislation provides a federal policy framework but allows states discretion on several key policy decisions.

Child Care Systems That Protect Children's Health and Safety and Rate Quality

The policy context that shapes issues of health, safety, and quality in child care that are relevant to nontraditional-hour care includes CCDF health and safety requirements, state child care licensing requirements, and systems designed to support quality such as quality rating and improvement systems (QRIS). We were not able to review policies relevant to nontraditional-hour child care across these three systems, but we hypothesize that these systems face challenges in at least two ways. First, the unique developmental needs of children during nontraditional hours, such as those articulated by the parents we spoke with, are not a focus of any of these systems. And second, across these systems, relatives and smaller home-based providers are either not included or are treated differently than how family child care homes or centers are treated.

Further, these systems have been under growing criticism for establishing standards and requirements that do not reflect the needs, realities, and preferences of communities of color and those with different socioeconomic backgrounds. Ensuring that the quality standards in each of these systems reflect inclusive definitions of quality is needed to ensure more equitable investments and child care supports that serve all children well (Adams and Pratt 2021).

Requirements Linked to Accessing CCDF Funds

The Child Care and Development Block Grant Act of 2014 reauthorized the law governing the CCDF program. The reauthorization requires states to establish health and safety requirements in 10 different topic areas ranging from prevention of sudden infant death syndrome to first aid and CPR. The CCDF also requires states to ensure that any caregivers receiving CCDF funds are licensed, and if they are not licensed, they must meet a set of health and safety standards including a comprehensive criminal background check, home inspection, and training. In addition, providers must receive preservice and ongoing training. The law also requires states to conduct criminal background checks for all people who care for or have unsupervised interactions with children in care.⁴⁸

States have the option of exempting relatives from some or all CCDF health and safety requirements,⁴⁹ and they have discretion in how they design and implement those requirements if they put them in place. Some experts have expressed concern that the requirements have been challenging and costly for states to design and implement, disincentivized relatives and friends (often referred to as family, friends, and neighbors), to participate in the subsidy system, and contributed to the decline in these providers being part of the subsidy system (Adams and Dwyer 2021; Henly and Adams 2018).

The reauthorization of the CCDF and associated regulations also includes several provisions designed to ensure child care providers have access to trainings and supports to improve quality and meet the child development needs of children in their care.⁵⁰ States are now required to devote 9 percent of CCDF funds to quality-improvement activities. These supports can vary widely in content, from supports for providers to become licensed or to meet QRIS standards to basic CPR and first-aid training, as well as professional development that supports providers' understanding of child growth and development and developmentally appropriate practices.⁵¹

State and Local Licensing Systems

Although they vary widely, states have licensing requirements that establish basic health and safety requirements that child care programs must meet to operate legally in the state. State or local licensing agencies monitor child care providers to ensure compliance with the licensing standards. States also establish rules about which providers must meet these standards, with some states requiring all people who care for even one unrelated child to be licensed and other states setting higher thresholds for the number of children a provider can serve before having to be licensed or exempting some providers (such as faith-based providers and drop-in programs) from licensing requirements.⁵² Regarding the nontraditional-hour child care options that parents recommended, states generally do not require relatives to be licensed, and states vary widely in whether they require friends and neighbors to be licensed. Although we were not able to review state licensing rules, a skim of rules in some states suggests wide variation in whether they have specific rules for nontraditional-hour child care and in what they require.

QRIS Standards

Most states have set higher quality standards in the form of QRIS. In most states, QRIS are designed to assess and report the quality of child care available, and these systems offer supports for child care providers to engage in quality-improvement activities. They also include provisions that require training of child care providers to improve their knowledge and skills. Much like child care licensing, QRIS vary substantially by state and are tailored to each state, territory, and community's context. Most QRIS do not include license-exempt home-based providers such as the caregivers that parents recommended for nontraditional-hour care. In 2019, only two states included license-exempt home providers in their QRIS.⁵³

Policies That Provide Parents with Information about Child Care Options

The 2014 reauthorization of the CCDF includes several provisions requiring states to provide parents with information about child care options. Specifically, states must provide information on the results of monitoring and inspecting reports and a website describing their approach to licensing and monitoring providers.⁵⁴ An accompanying regulation (called the Final Rule), presents additional consumer education requirements that states must meet. The Final Rule includes the following language:

Requires states to collect and disseminate to parents of eligible children, the general public, and, where applicable, child care providers, consumer education information that will promote informed child care choices and information on developmental screenings...Encourages states to provide consumer education information to help parents make informed choices about child care services and to promote involvement by parents and family members in the development of their children in child care settings.⁵⁵

The rule also includes language about ensuring that states work with parents, the public, and child care providers, and that they ensure all materials are consumer friendly, accessible, and available in different languages.

Moreover, the Final Rule notes that “Low-income working families may face additional barriers when trying to find information about child care providers, such as limited access to the internet, limited literacy skills, limited English proficiency, or disabilities. Lead Agencies can play an important role in bridging the gap created by these barriers by providing information directly to families receiving CCDF subsidies to ensure they fully understand their child care options and are able to assess the quality of providers.”⁵⁶

Policies That Support Access to Nutritional Supports

Child care programs can get reimbursed for the costs of meals for children through the Child and Adult Care Food Program (CACFP). The program works in licensed child care centers, licensed family child care homes, and—in a few states—for home-based child care providers and relatives who are not licensed. The latter group of providers—relatives and license-exempt providers—can only participate if they go through an approval process. In most of the relatively small number of states that do this, it appears that they rely on the CCDF subsidy approval process to function as the approval mechanism, though one state—Louisiana—relies on fire marshal inspection (Lloyd et al. 2021). For more information, see Adams and Hernandez (2021).

Appendix C. Relative and License-Exempt Home-Based Care in the Focal Sites and Subsidies

Our focal sites—Connecticut, the District of Columbia, and Oklahoma—varied in their approaches to license-exempt providers and relatives overall and in the subsidy system. As context, it is useful to know that all three of our sites are among the 10 states that require people to be licensed as soon as they care for even one unrelated child.⁵⁷ As a result, all “license-exempt” home-based providers are relatives in those states. This is not, however, the reality for most states, who set their home-based licensing thresholds at higher levels, with more than half of states having thresholds between three and five children.⁵⁸

Specifically, in Connecticut, data from 2019 show that 20 percent of the children in families accessing child care subsidies were cared for in the child’s home by a relative, and an additional 2 percent were cared for by a relative in a family home. In contrast, in Oklahoma and the District of Columbia, although relative care was allowed, the number of children being cared for in the child’s home by relatives or nonrelatives, or by other license-exempt home-based providers in their homes, was so low it did not register in federal reports.⁵⁹ Or, as one respondent noted, although it was allowed in their state, “only a handful of vouchers are used for this type of care.”

However, since the 2019 data were reported, Oklahoma has taken steps to expand access to this care arrangement. Specifically, during the onset of the pandemic when businesses were closed, Oklahoma received a temporary federal waiver that allowed people who did not meet the federal definition of “relative” to serve as in-home caregivers without the need for the comprehensive background checks and monitoring required under CCDF regulations for nonrelative caregivers. This waiver expired in September 2021. The state is considering expanding in-home care to include nonrelatives, but such a change would require the development of a monitoring plan and legislative action to waive the background checks.

Separately, since the onset of the pandemic, Oklahoma has supported care offered through Kith.care with the aim of increasing in-home care.⁶⁰ This online platform is currently funded with federal COVID-19 stimulus funds. All caregivers listed in Kith.care are required to complete CPR and first-aid training as well as sleep training before offering care. The state has developed resources to

support caregivers with tips, resources, and voluntary trainings for families and caregivers providing in-home child care. Currently, most families enrolled in Kith.care are essential workers, but the state is planning a marketing campaign to offer Kith.care for income-eligible families receiving subsidies, especially those in child care deserts or who need nontraditional-hour care.

Notes

- ¹ See, for example, the recent priority given to the child care needs of parents working nontraditional hours in the recent Build Back Better child care legislation: Alyssa Fortner, “7 Things to Know about Child Care and Universal Pre-K in the Build Back Better Act,” Center for Law and Social Policy (blog), November 12, 2021, <https://www.clasp.org/blog/7-things-know-about-child-care-and-universal-pre-k-build-back-better-act>. The Office of Planning, Research, and Evaluation (OPRE) has funded studies to better understand how to improve access to child care for these families (see “Child Care,” OPRE, accessed March 16, 2022, <https://www.acf.hhs.gov/opre/topic/child-care>); and the priority given to expanding the supply of care for this population in the 2014 Reauthorization of the Child Care and Development Fund: Child Care Development Fund (CCDF) Program, 45 CFR 98, 81 Fed. Reg. 190 (Sept. 30, 2016), <https://www.govinfo.gov/content/pkg/FR-2016-09-30/pdf/2016-22986.pdf>).
- ² Diane Schilder, Peter Willenborg, Cary Lou, Sarah Knowles, and Kate Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care,” Urban Institute, July 2021, <https://www.urban.org/state-snapshots-potential-demand-and-policies-support-nontraditional-hour-child-care>; Gina Adams, Peter Willenborg, Cary Lou, and Diane Schilder, “To Make the Child Care System More Equitable, Expand Options For Parents Working Nontraditional Hours,” *Urban Wire* (blog), Urban Institute, January 14, 2021, <https://www.urban.org/urban-wire/make-child-care-system-more-equitable-expand-options-parents-working-nontraditional-hours>
- ³ Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care.”
- ⁴ Diane Schilder and Stephanie Curenton, “Policymakers Can Redesign the Early Childhood and Education System to Root Out Structural Racism,” *Urban Wire* (blog), January 29, 2021, <https://www.urban.org/urban-wire/policymakers-can-redesign-early-childhood-and-education-system-root-out-structural-racism>.
- ⁵ Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care.”
- ⁶ QRIS participation rules by program type created from “Create a Report, Quality Compendium, BUILD Initiative, accessed March 16, 2022, <https://qualitycompendium.org/create-a-report>.
- ⁷ See Gina Adams and Sarah Minton, “Three Steps State Child Care Agencies Can Take to Support an Equitable Economic Recovery,” *Urban Wire* (blog), March 4, 2021, <https://www.urban.org/urban-wire/three-steps-state-child-care-agencies-can-take-support-equitable-economic-recovery>. No single commonly used definition of nontraditional-hour child care exists. We used this definition, as it builds on work that colleagues first conducted for the District of Columbia (Sandstrom et al. 2019) and is the definition we have used for all of our work in this area.
- ⁸ Definitions of nontraditional-hour child care vary, but recent studies by Sandstrom and colleagues (2019), Adams and colleagues (2021c), Schilder and colleagues (2021), and an ongoing study by Child Care Aware of America use the definition we employ in this report: “Secondary Analyses of Data on Early Care and Education Grants,” OPRE, accessed March 16, 2022, <https://www.acf.hhs.gov/opre/project/secondary-analyses-data-early-care-and-education-grants-2020-2022>. The definition builds on work that colleagues first conducted for the District of Columbia (Sandstrom et al. 2019).
- ⁹ Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care.”
- ¹⁰ Adams, Willenborg, Lou, and Schilder, “To Make the Child Care System More Equitable, Expand Options for Parents Working Nontraditional Hours.”

- 11 Stephanie Aaronson, Mitchell Barnes, and Wendy Edelberg, “A Hot Labor Market Won’t Eliminate Racial and Ethnic Unemployment Gaps,” *Up Front* (blog), September 2, 2021, <https://www.brookings.edu/blog/up-front/2021/09/02/a-hot-labor-market-wont-eliminate-racial-and-ethnic-unemployment-gaps/>; Schilder and Curenton, “Policymakers Can Redesign the Early Childhood and Education System to Root Out Structural Racism.”
- 12 Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care”; Adams, Willenborg, Lou, and Schilder, “To Make the Child Care System More Equitable, Expand Options for Parents Working Nontraditional Hours.”
- 13 Adams and Minton, “Three Steps State Child Care Agencies Can Take to Support an Equitable Economic Recovery.”
- 14 For more information on how children with parents working nontraditional hours are identified and the methodology used in the ACS and SIPP analysis, please see Sandstrom and colleagues (2019).
- 15 These data are from an unpublished analysis of US Census Bureau’s 2014–18 American Community Survey (ACS) and the 2016 Survey of Income and Program Participation (SIPP) for the state of Connecticut by Cary Lou and Peter Willenborg.
- 16 These data are from an unpublished analysis of US Census Bureau’s 2014–18 American Community Survey (ACS) and the 2016 Survey of Income and Program Participation (SIPP) for the state of Oklahoma by Cary Lou and Peter Willenborg. The total is less than 100 percent because the sample sizes for the white, other, and multiracial categories were too small to report.
- 17 These data are from an unpublished analysis of US Census Bureau’s 2014–18 American Community Survey (ACS) and the 2016 Survey of Income and Program Participation (SIPP) for District of Columbia by Cary Lou and Peter Willenborg. The total is less than 100 percent because the sample sizes for the white, other, and multiracial categories were too small to report.
- 18 For more information on how children with parents working nontraditional hours are identified and the methodology used in the ACS and SIPP analysis, please see Sandstrom and colleagues (2019).
- 19 For more information on how children with parents working nontraditional hours are identified and the methodology used in the ACS and SIPP analysis, please see Sandstrom and colleagues (2019).
- 20 For national estimates, see Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care.”
- 21 Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care.”
- 22 Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care.”
- 23 Gina Adams, “Finding Solutions to Support Child Care during COVID-19,” *Urban Wire* (blog), September 22, 2020, <https://www.urban.org/urban-wire/finding-solutions-support-child-care-during-covid-19>.
- 24 “NSECE (National Survey of Early Care and Education) Fact Sheet: Provision of Early Care and Education during Non-Standard Hours,” HHS, ACF, OPRE, April 2015, https://www.acf.hhs.gov/sites/default/files/documents/opre/factsheet_nonstandard_hours_provision_of_ece_to_opre_041715_508.pdf.
- 25 “Head Start/Early Head Start Community Needs Assessment for New Haven, West Haven, Hamden, and East Haven,” prepared in 2018 by Farnum Associates, LLC, for LULAC Head Start, Inc., and United Way of Greater New Haven.

- ²⁶ The critical role of these providers can be seen in national data. For example, in 2019, relatives and license-exempt home-based providers were estimated to care for more than 5 million children nationwide (Datta, Milesi, and Zapata-Gieti 2021) and were the predominant form of care used by parents needing care during nontraditional hours nationwide (see “NSECE Fact Sheet: Provision of Early Care and Education during Non-Standard Hours,” HHS, ACF, OPRE).
- ²⁷ “FY 2019 Preliminary Data Table 6—Average Monthly Percentages of Children Served in All Types of Care,” Administration for Children and Families (ACF), Office of Child Care (OCC), May 21, 2021, <https://www.acf.hhs.gov/occ/data/fy-2019-preliminary-data-table-6>.
- ²⁸ “Licensing and Exemptions,” ACF, OCC, May 16, 2020, <https://childcareta.acf.hhs.gov/ccdf-fundamentals/licensing-and-exemptions>.
- ²⁹ Quoted from the final rule authorizing CCDF: “Monitoring in-home care. At § 98.42(b)(2)(v)(B), this final rule requires that that Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child’s home that are appropriate to the setting. A child’s home may not meet the same standards as other child care facilities and this provision gives Lead Agencies flexibility in conducting more streamlined and targeted inspections. For example, Lead Agencies may choose to monitor in-home providers on basic health and safety requirements such as training and background checks. Lead Agencies could choose to focus on health and safety risks that pose imminent danger to children in care. This flexibility cannot be used to bypass the monitoring requirement altogether. States should develop procedures for notifying parents of monitoring protocols and consider whether it would be appropriate to obtain parental permission prior to entering the home for inspection purposes.” 81 Fed. Reg. 67438 (September 30, 2016), <https://www.govinfo.gov/content/pkg/FR-2016-09-30/pdf/2016-22986.pdf>.
- ³⁰ For example, the District of Columbia currently uses a “cost of quality” tool to calculate the cost of different child care arrangements and calculates a higher reimbursement rate for care offered during nontraditional hours; it is currently in the process of refining the formula. See Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care.”
- ³¹ “Child Care and Development Fund: Subpart C – Eligibility for Services,” 45 CFR 98 (Sept. 30, 2016), <https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-A/part-98/subpart-C>.
- ³² States seeking efficient ways to abide by current guidance regarding error rate requirements could be incentivized to simplify subsidy eligibility policies that would preclude care for families using multiple arrangements. See 72 Fed. Reg. 50889 (September 5, 2007), https://www.acf.hhs.gov/sites/default/files/documents/occ/07_4308.pdf.
- ³³ Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care.”
- ³⁴ “Threshold of Licensed Family Child Care in 2014,” AFC, OCC, 2015, https://childcareta.acf.hhs.gov/sites/default/files/public/threshold_fcch_2014.pdf.
- ³⁵ “Program Participation in QRIS 2019 Fact Sheet,” HHS, ACF, Child Care Technical Assistance Network, 2020, <https://childcareta.acf.hhs.gov/resource/program-participation-qr-2019-fact-sheet>.
- ³⁶ “Determining QRIS Ratings Using Cut Points on Observational Tools,” Quality Compendium: 2017 QRIS Fact Sheet, Early Childhood National Centers, National Center on Early Childhood Quality Assurance, June 2018, <https://childcareta.acf.hhs.gov/sites/default/files/public/qr-2017-0.pdf>; “Data Systems,” Fact Sheet, Early Childhood National Centers, National Center on Early Childhood Quality Assurance, August 2020, https://childcareta.acf.hhs.gov/sites/default/files/public/345_2010_qris_fact_sheet_data_systems_final_508compliant.pdf; “Rating Structures and Processes,” QRIS Compendium: 2016 Fact Sheets, Early Childhood National

Centers, National Center on Early Childhood Quality Assurance, December 2017, https://childcareta.acf.hhs.gov/sites/default/files/public/qris_rating_structures_processes_2016.pdf.

- 37 “QIS Compendium Top Trends Questions,” Quality Compendium, retrieved February 23, 2022, <https://qualitycompendium.org/top-ten/observational-tools>. The CLASS® and ERS® are observation tools that are the most common tools in state QRIS. These tools capture interactions between the caregiver and child that include play and learning that is appropriate during the day and do not focus on downtime and sleeping.
- 38 “Chartbook: Home-based Early Care and Education Providers in 2012 and 2019: Counts and Characteristics,” OPRE report 2021-85, HHS, ACF, OPRE, May 2021, <https://www.acf.hhs.gov/sites/default/files/documents/opre/NSECE-chartbook-homebased-may-2021.pdf>.
- 39 2020 Child Care Tracker, Hunt Institute, accessed February 10, 2022, <https://hunt-institute.org/archived-2020-child-care-tracker/>.
- 40 Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care.”
- 41 Schilder, Willenborg, Lou, Knowles, and Thomas, “State Snapshots of Potential Demand for and Policies to Support Nontraditional-Hour Child Care.”
- 42 These data are from an unpublished analysis of US Census Bureau’s 2014–18 American Community Survey (ACS) and the 2016 Survey of Income and Program Participation (SIPP) for Connecticut by Cary Lou and Peter Willenborg.
- 43 These data are from an unpublished analysis of US Census Bureau’s 2014–18 American Community Survey (ACS) and the 2016 Survey of Income and Program Participation (SIPP) for Oklahoma by Cary Lou and Peter Willenborg.
- 44 These data are from an unpublished analysis of US Census Bureau’s 2014–18 American Community Survey (ACS) and the 2016 Survey of Income and Program Participation (SIPP) for District of Columbia by Cary Lou and Peter Willenborg.
- 45 Child Care and Development Fund (CCDF) Program Final Rule, 81 Fed. Reg. 67438 (September 30, 2016).
- 46 “FY 2019 Preliminary Data Table 1—Average Monthly Adjusted Number of Families and Children Served,” ACF, OCC, May 21, 2021, <https://www.acf.hhs.gov/occ/data/fy-2019-preliminary-data-table-1>.
- 47 Nina Chien, “Factsheet: Estimates of Child Care Eligibility and Receipt for Fiscal Year 2018.” HHS, Office of the Assistant Secretary for Planning and Evaluation, August 2021, <https://aspe.hhs.gov/sites/default/files/2021-08/cy-2018-child-care-subsidy-eligibility.pdf>.
- 48 “Overview of 2016 Child Care and Development Fund Final Rule,” ACF, OCC, January 13, 2022, https://www.acf.hhs.gov/sites/default/files/documents/occ/ccdf_final_rule_fact_sheet.pdf; “Child Care and Development Block Grant (CCDBG) Act of 2014 Plain Language Summary of Statutory Changes, HHS, ACF, OCC, December 15, 2020, <https://www.acf.hhs.gov/media/13596>.
- 49 “Licensing and Exemptions,” ACF, OCC, Child Care Technical Assistance Network, May 16, 2020, <https://childcareta.acf.hhs.gov/ccdf-fundamentals/licensing-and-exemptions>.
- 50 Child Care and Development Block Grant Track Changes, ACF, OCC, November 4, 2014, https://www.acf.hhs.gov/sites/default/files/documents/occ/child_care_and_development_block_grant_markup.pdf.
- 51 Heather Sandstrom and Fernando Hernandez-Lepe, “Six Ways States Can Leverage Funding to Increase the Supply and Quality of Home-Based Child Care,” *Urban Wire* (blog), November 5, 2021,

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- ⁵² “Threshold of Licensed Family Child Care in 2014,” AFC, OCC.
- ⁵³ QRIS participation rules by program type created from “Create a Report, Quality Compendium, BUILD Initiative, accessed March 16, 2022, <https://qualitycompendium.org/create-a-report>.
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- ⁵⁸ “Threshold of Licensed Family Child Care in 2014,” AFC, OCC.
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