



RESEARCH REPORT

Child Care Use for Young Children during Nontraditional Hours

Findings from Analysis of the 2019 National Survey of Early Care and Education

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Executive Summary

Many families now need child care during nontraditional hours (NTH). Understanding the types of child care those families use for their young children has become a growing concern for policymakers interested in supporting the types of child care that meets families' needs. We define nontraditional hours as 6:00 p.m. to 7:00 a.m. on weekdays and any hours on the weekend. To answer policy-relevant questions about nontraditional-hour child care, we analyzed data from the 2019 public use National Survey of Early Care and Education (NSECE).

We found that a large share of young children—about 40 percent of those in nonparental care or 5 million young children in 2019—were in care during at least some NTH periods. Our overall findings are consistent with some older research based on analyses of the 2012 NSECE (NSECE Project Team 2015) and with qualitative research (Liu and Anderson 2012; Scott and Abelson 2016; Sloane et al. 2019; Vesely 2013), and we address gaps in the research.

Findings

- **Children in families that more likely face historic and ongoing barriers to employment, education, and access to care are more likely to use NTH care.** These include children who are Black or Latino/a; living in families with lower incomes; or living with a single parent or grandparent, relative, or guardian instead of a parent. Moreover, children in families living in communities with high levels of poverty and in rural areas are more likely to be in NTH care than those in communities with low poverty and in suburban communities. Our findings add evidence to previous research on the *potential demand* for NTH care, which suggested that families more likely to face barriers had greater potential need for NTH care than their counterparts. Our analyses show that families with these barriers actually use NTH care more than their counterparts.
- **The types of care used for children in care during NTH differs from those used for children in care during traditional hours only.** Parents who use NTH care are more likely to use family, friend, and neighbor (FFN) care during NTH periods as well as during traditional-hour periods and are less likely to use center-based care.
- **The time when children are most often in NTH care is during the weekend; 55 percent of children in any NTH care are in care on the weekend.** During weekdays, higher percentages of

children are in NTH care during the hours immediately before and after the traditional day. Children in overnight nonparental care is much less common.

- **The amount of time children** spend in care is much higher for children in care during any NTH period when compared with children who only spend time in care during traditional-hour periods.
- **Ratings of child care differ** for parents with and without NTH schedules. Parents of children who attend care during any NTH period rate FFN care higher than center-based care in terms of the nurturing environment, affordability, flexibility, and overall. Additionally, parents of children who attend care during any NTH period rate center-based care lower than parents using only traditional-hour care in terms of cost, meeting their needs, and overall. Consistent with parents' ratings of different types of child care, children in NTH care are more likely than those in traditional-hour care only to be in FFN care. Children in any NTH care also spend more time in FFN-type care. Conversely, when compared with children in traditional-hour care only, children who spend any time in NTH care are less likely to be in center-based or organizational care.

Policy Considerations

We recommend that federal and state policymakers consider the high share of children younger than age 6 who live in families with parents working NTH schedules who have low incomes and are therefore eligible for child care subsidies. Specifically, we recommend that federal and state policymakers consider the following:

- **Review existing child care policies, regulations, and the implementation of policies** to identify how policies can support the types of care parents with NTH schedules rank most highly. Specifically, we recommend that policymakers consider how best to support the types of care that parents who work NTH prefer and use. Parents with NTH schedules are more likely to use FFN care and rank this type of care more highly than center-based care in meeting their families' needs. Supporting this type of care is an issue of equity given that a greater share of families with NTH schedules are Black or Latino/a.
- **Consider how best to support children's school readiness for children in care during NTH.** Regardless of care schedule, parents are more likely to rate center-based care as excellent in supporting children's school readiness than care provided by friends or relatives. Providing

parents with access to care that supports children’s school readiness is a key priority of the Child Care and Development Block Grant Act (CCDBG).

- **Support research** on evidence-based solutions for meeting the child care needs of parents and families with NTH schedules. Although our study answered important questions, additional research is needed.

Additional Research Needed

Our analyses of 2019 NSECE data begin to address questions on this topic. However, more research is needed to better address the following questions.

- **How can federal and state policies best support the types of NTH care that meet the needs of families with specific characteristics and in particular communities who are most likely to use NTH care?** Previous research suggested that the families most affected by structural barriers to opportunity—including those with Black or Latino/a parents, lower levels of education, and low incomes, as well as single-parent households—have greater potential demand for NTH care than their counterparts (Schilder et al. 2022). Our analyses of NSECE data found that families with these characteristics actually use NTH at higher rates—adding to the evidence base. Nonetheless, more research is needed to understand how child care policies can support the types of care that best meet the needs of these families who have historically faced barriers to opportunities. Given the high share of children younger than age 6 in NTH care among low-income families, it is especially important for federal and state policymakers to examine existing subsidy policies to consider how to ensure equitable distribution of public dollars to meet the needs and preferences of families eligible for child care subsidies.
- **What policy solutions best meet the needs of families who use NTH care for different periods and in different amounts?** Policies to effectively incentivize providers to expand hours of operation and to offer care on the weekends would likely differ based on the hours of care and amount of care needed. In qualitative research conducted by Sandstrom and colleagues (2018), licensed providers said they needed to operate at or near full capacity during NTH periods to be profitable. The study found that when not enough families needed care at the same time, providers struggled to break even and some reported losing money. Providers told Sandstrom’s study team that they needed to pay for a minimum number of staff and other operating costs such as utilities regardless of how many children were present.

More research is needed on the types of care parents prefer and use on weekends versus the hours immediately before and after the traditional day. Moreover, questions remain about whether families using NTH care are using subsidies for care offered during NTH periods or during traditional hours and whether subsidies support the entire time children are in child care. More research is also needed to determine the best ways of supporting families who need NTH care for intermittent periods of time, on weekends and those with consistent NTH care needs.

- **How can policymakers best support the types of care parents using NTH care rate highly?** We found that parents using NTH care rate care options differently from parents who use traditional care only. It is not clear from our research if parents with NTH care needs want center-based care during the day and more informal care for NTH periods. More research is needed to determine if differences in ratings of different types of care exist for families with NTH after controlling for demographic characteristics, community characteristics, the period parents use NTH care, and the amount of time children spend in NTH care. If subsidy-eligible parents with NTH schedules want and prefer FFN care for all periods, research is needed on how best to encourage unlicensed caregivers who are offering care to become licensed and participate in the subsidy system.
- **What factors predict parents' use and ratings of different types of care during nontraditional hours and use of subsidies during these hours?** Our descriptive analysis suggests parents who have historically and currently faced barriers to opportunity and access are most likely to have NTH schedules. However, questions remain about whether these patterns will hold once we control for associated factors. For example, descriptive analysis suggests higher shares of families of color have low incomes and use FFN care. Additional regression analysis that examines the interactions among these variables will provide answers about which factors are most predictive of care use and preference. Analysis that explores whether subsidy use differs for families with NTH schedules could begin to provide evidence to policymakers about how to equitably distribute public funds.

Other researchers have provided evidence that the lack of child care leads to reductions in labor force participation for many parents, and for parents who are currently in the labor market, child care challenges cause many of them to reduce the hours they work (Golden 2014; Goldin and Katz 2008). Yet even traditional-hour child care is experiencing a “market failure” (US Treasury Department 2021). To address the insufficient supply of NTH care that meets parents’ needs, policymakers should consider how to best support the types of child care that working families with low incomes and NTH schedules need to participate in the workforce and that support children’s development and growth.

Child Care for Young Children with Parents Working Nontraditional-Hour Schedules

Background

Existing studies suggest that, in the United States, most young children in families with low incomes have parents who work at least some hours outside of the traditional Monday–Friday work week (Sandstrom et al. 2018; Schilder et al. 2022). These work schedules are especially common for families that have historically faced structural barriers to employment opportunities—including Black and Latino/a families, single-parent families, and families with parents who have not completed high school (Lou, Schilder and Wagner 2022; Ullrich, Schmit, and Cosse 2019). Moreover, these schedules are associated with increased levels of family stress (Joshi and Bogen 2007; Morrissey 2017; Rachidi et al. 2019).

Existing research provides some insights about the needs of families with nontraditional-hour (NTH) schedules. For example, studies suggest that some parents working nontraditional hours face challenges in finding high-quality, affordable child care (Scott and Abelson 2016; Sloane et al. 2019). Similarly, research conducted by Liu and Anderson (2012) and Vesely (2013) found that the mothers in their studies who worked evening or overnight shifts or weekends relied on relatives and neighbors for child care and were less likely to use center-based care. Scott and Abelson’s 2016 study found that child care subsidy recipients who had unpredictable and nontraditional work hours wanted flexible child care that could accommodate their shifting hours but had difficulty finding such care. In 2021, analyses of data from the American Community Survey and the Survey of Income and Program Participation revealed that NTH schedules are more prevalent among parents with low incomes, those who are Black or Latino/a, and those who have historically faced barriers to educational and workforce opportunities (Schilder et al. 2021).

In light of this research, federal and state policymakers have indicated that addressing NTH child care needs is a priority (Adams et al. 2022; Rachidi et al. 2019). For example, the federal Office of Child Care, which oversees the federal child care subsidy system, has called out the needs of parents with NTH schedules as a particular concern (US Congress 2014).

Federal and state child care policymakers are interested in learning more about families with NTH child care needs. Specifically, policymakers want to know more about the **characteristics** of families using NTH child care and **variation by community characteristics**, the **types of care** families with NTH schedules use, **when** and **how much** NTH care is accessed by families with young children, and their ratings of different types of care. To provide policymakers with information about how best to meet the child care needs of parents who work NTH schedules, we analyzed national survey data to answer key policy-relevant questions.

Research Questions and Approach

We designed our project to address the following policy-relevant questions:

1. Who uses NTH child care, and how does NTH care vary by community characteristics?
2. What types of child care are most often used by parents who work NTH and have young children?
3. When are children in NTH care?
4. How much time is spent in different types of child care?
5. How do parents with and without NTH schedules rate different types of child care?

To address these questions, we analyzed data from the 2019 National Survey of Early Care and Education (NSECE) public use household data. This nationally representative survey provides information that allows us to address each of these research questions. Although these data were collected before the COVID-19 pandemic, trends found in this analysis can inform current policies designed to equitably distribute public child care funds and support policies for equitable access to child care. See appendix A for additional details on the data and methods used in this study.

BOX 1

Glossary and Definitions

Access: Access to early care and education means that parents, with reasonable effort and affordability, can enroll their child in an arrangement that supports the child's development and meets the parents' needs (Banghart and Bedrick 2020).

Center-based care: Early care and education services provided in a nonresidential facility. Depending on state requirements, a child care center must legally be licensed if caring for a certain number of children for a certain number of hours in a day.

Child Care and Development Fund (CCDF): Federal program authorized by the Child Care and Development Block Grant Act (CCDBG) that provides funding to states, territories, and tribal governments to support their efforts to meet the child care needs of families, for children from birth to age 12. Some CCDF funds are used to help all families regardless of income, including licensing child care, building the supply of child care, supporting the child care workforce, improving child care access and consumer education, and other efforts to improve the quality of child care. Some funds are used to support child care subsidies that help families with low incomes afford child care to support parental work, training, and education outcomes and children’s developmental outcomes.

Child care licensing: Procedures established by states, territories, and tribal governments to protect the health and safety of children in child care. Some of the procedures are required and supported by the CCDBG. The child care license is issued by the state or local government to certify that the child care program meets the required standards.

Child care subsidy: Financial assistance that reduces out-of-pocket child care costs to parents and guardians with low incomes. Most child care subsidies are supported with state and federal dollars from the Child Care and Development Fund. Some states use the terms “voucher” and “certificate” instead of the term “subsidy.” The aid is designed help low-income families pay for child care so the parents can work or attend school. Eligibility requirements are different in each state.

Consumer education: Information provided to the public—and specifically aimed at families, in the case of early care and education—to educate and support decisionmaking. The CCDBG requires states, territories, and some tribal governments to provide consumer education materials to families to support child care search and selection. Information may include child care monitoring and inspection reports and information on program features and quality, though the details vary from state to state.

Family child care: Child care provided in a group setting in the provider’s home; also known as “family day care” or a “home-based child care program.” The provider typically cares for more than one unrelated child for pay. Depending on state requirements, the provider must legally be licensed or registered if caring for a certain number of unrelated children for a certain number of hours in a day.

Family, friend, and neighbor (FFN) care: Care typically provided in the child’s or caregiver’s home by a person who is a relative, friend, neighbor, babysitter, or nanny. In most states, these providers are typically exempt from licensing and regulations.

Home-based provider: A child care provider that cares for one or more children in a home setting, typically either the providers’ home or the child’s home. Home-based providers include providers licensed or registered with their state to provide child care services as well as unlicensed caregivers who are relatives, family friends, or neighbors.

Legally or license-exempt provider: A child care provider who can legally provide care in a home or center without a license. States, territories, and tribal governments define the characteristics of child

care programs that have to fully comply with health and safety standards, which are set and monitored by the government (e.g., licensing requirements).

National Survey of Early Care and Education (NSECE): A coordinated set of four surveys collecting data from a nationally representative sample of households with children younger than age 13, child care centers, home-based providers, and the center-based workforce.

Nontraditional-hour (NTH) child care: Nonparental care provided before 7:00 a.m. or after 6:00 p.m. on weekdays or anytime on weekends. We based this definition on the definition employed in existing research (Sandstrom et al. 2018).

Parents: Used to refer to both parents and guardians.

Quality rating and improvement system (QRIS): A system designed by states or local governments to assess, improve, and communicate the level of quality of child care and early education programs. A major component of QRIS is consumer education. QRIS provides a framework for educating parents about what “quality care” looks like and how to find a high-quality provider.

Regulated care: See *child care licensing*. Care provided by home-based and center-based providers that are required to meet the health and safety standards established by the state, territory, or tribal governments where they provide care.

Unregulated care: See also *legally or license-exempt provider*. A child care setting or provider that is not regulated by any government entity, such as care from a relative, nanny, or babysitter. These providers are legally operating but are not required to meet licensing standards set and monitored by the state, territory, or Tribe where they provide care.

Young children: Children younger than age 6 not yet in kindergarten.

Findings

Based on our analysis of 2019 NSECE data, findings about the characteristics of families using NTH care are consistent with existing research. We found variation in use of NTH care by community characteristics and based on different types of care. Our analysis reveals that children are mostly in NTH care in the hours immediately before and after traditional hours, but variation exists in when children are in care. Finally, parents with and without NTH schedules rate types of care differently. We present details based on our analysis below and organize the findings based on each of our key research questions.

1. Who Uses NTH Child Care, and How Does NTH Care Vary by Community Characteristics?

A large share of all children younger than age 6 in nonparental care spend some time in nontraditional-hour child care. Around 40 percent of young children (or 5 million children) who are in nonparental child care are in care during NTH at some point during the week. NTH care is most prevalent among children in families that have faced barriers to educational and workforce opportunities (figure 1.)

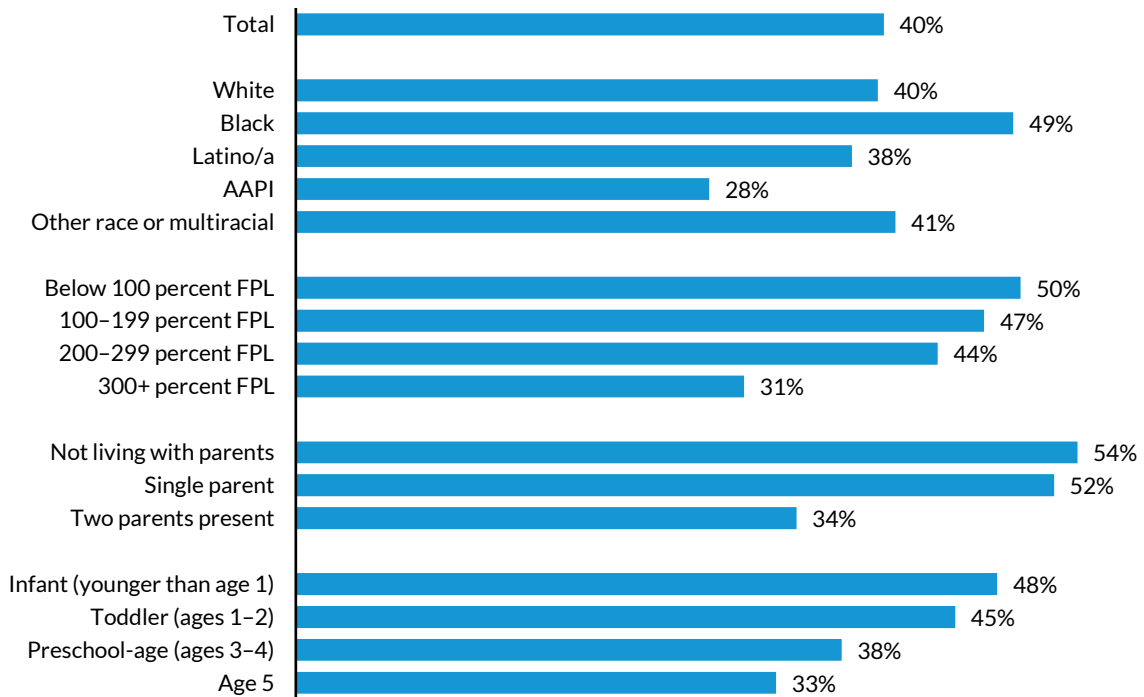
About one-half of young children in any nonparental care are in NTH care, and they more often come from families that historically have faced structural barriers to opportunities. Forty-nine percent of young Black children (820,000) in nonparental care are in NTH care, compared with 39 percent of white children (2.6 million) and 37 percent of Latino/a children (1.0 million). Fifty percent of all young children in families with incomes below the federal poverty level¹ (about 1.2 million) are in NTH care. Children living with a single parent and those living with a grandparent, or a guardian are more likely to be in NTH care (52 percent and 54 percent, respectively) than those living with two parents (34 percent).

Infants and toddlers are more likely to be in NTH care (48 percent and 45 percent of those in nonparental care, respectively) than **preschool-age children and children age 5** (38 percent and 33 percent, respectively) (figure 1)—even though infants and toddlers are less likely to be in any nonparental care overall.

FIGURE 1

Share of Young Children in Nonparental Care in NTH Care, by Child and Family Characteristics

Share of children younger than age 6 in nonparental care but not yet in kindergarten who were in NTH care



Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

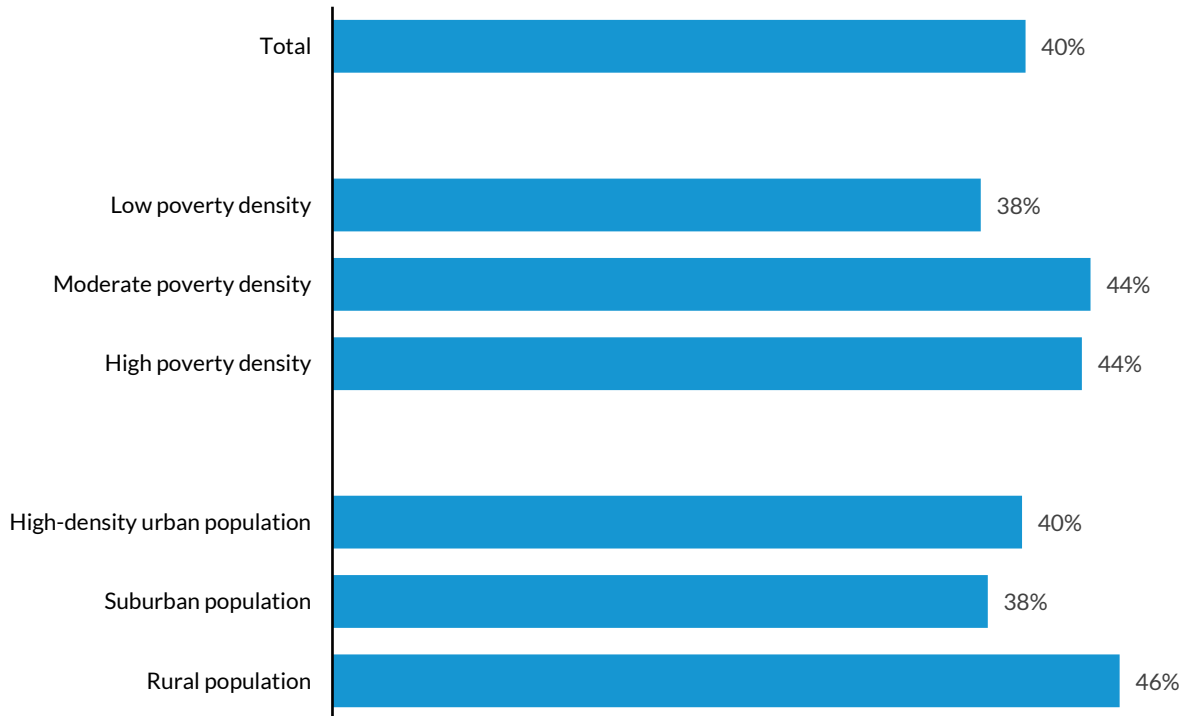
Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent. FPL = federal poverty level, AAPI = Asian American and Pacific Islander.

NTH care use also varies by community characteristics. Young children are more likely to be in NTH care in communities with higher poverty rates and those that are more rural (figure 2). Among children younger than 6 in nonparental care, a higher share of those in rural communities are in NTH care than those in urban communities. In 2019, 46 percent of young children in nonparental care in rural areas were in care during at least some NTH compared with 40 percent in high-density urban communities and 38 percent in moderate-density urban communities.

Young children in communities with low poverty density were less likely to be in NTH care (38 percent of those in any care) compared with children in communities with high or moderate poverty density (both 44 percent).

FIGURE 2

Share of Young Children in Nonparental Care in NTH Care, by Community Characteristics



Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

Note: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent.

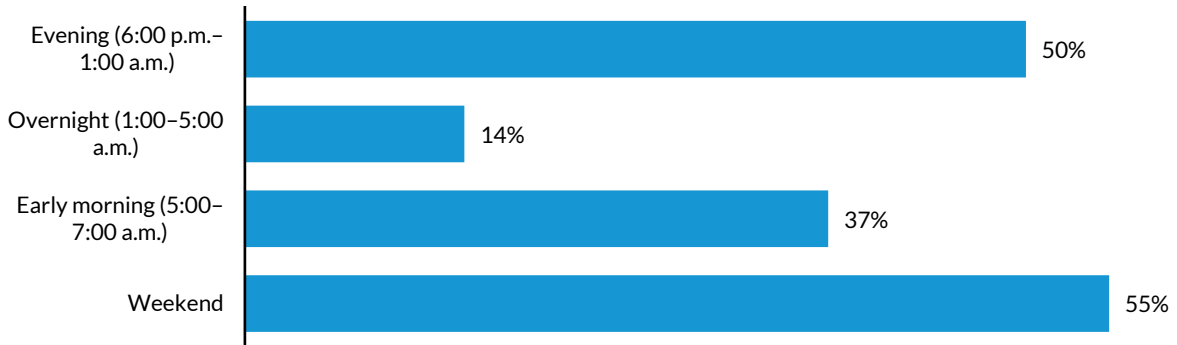
2. When Are Children in NTH Child Care?

Children are most likely to be in NTH care **during the hours just before and hours just after traditional hours on weekdays and on weekends**. Children are least likely to be in care during weekday overnight hours (figure 3).

Across different NTH periods, children are most commonly in NTH care during the weekend and weekday evenings (6:00 p.m. to 1:00 a.m.). Half or more of young children in NTH care are in care during the weekend (55 percent, or 2.7 million children) or weekday evenings (50 percent, or 2.0 million). Nearly two-fifths (38 percent, or 1.8 million) of children in NTH care are in care on weekdays in the early morning (5:00–7:00 a.m.). Children are less often in NTH care overnight (1:00–5:00 a.m.) on weekdays. **Only 14 percent of young children in NTH care, or around seven hundred thousand, are in care overnight on weekdays.**

FIGURE 3

Young Children in NTH Care Are Most Often in Care during the Weekend and on Weekday Evenings



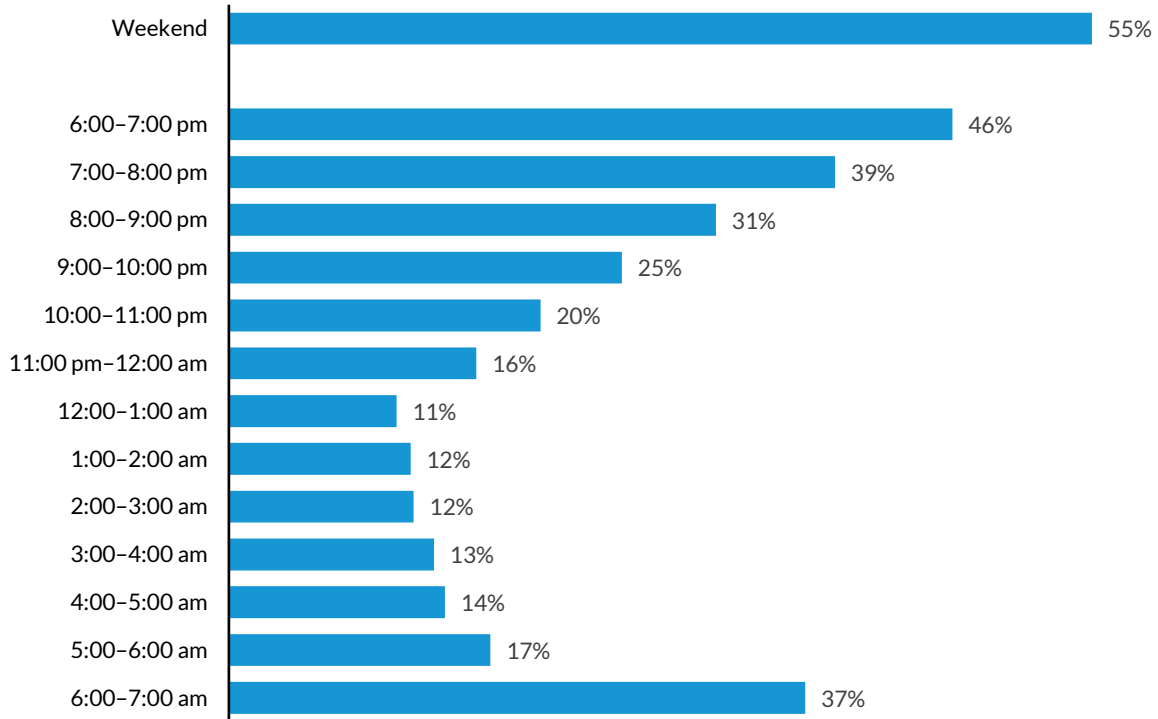
Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

Notes: Figures are estimates, and percentages are rounded to the closest 1 percent. Children can be in NTH care during multiple periods, so the categories sum up to more than 100 percent.

More specifically, on weekdays, children in NTH care are most commonly in care in the first two NTH hours of the evening (6:00–7:00 p.m. and 7:00–8:00 p.m.) or the hour immediately before the traditional start of the day in the early morning (6:00–7:00 a.m.) (figure 4). Forty-six percent of children in NTH care are in care from 6:00 p.m. to 7:00 p.m. and 39 percent from 7:00 p.m. to 8:00 p.m. Thirty-seven percent of children are in NTH care from 6:00 a.m. to 7:00 a.m. Only 11 to 14 percent of children in NTH care are in care each hour between 12:00 a.m. and 5:00 a.m.

FIGURE 4

Young Children in NTH Care Are Most Often in Care Immediately before and after Traditional Weekday Hours and on Weekends



Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

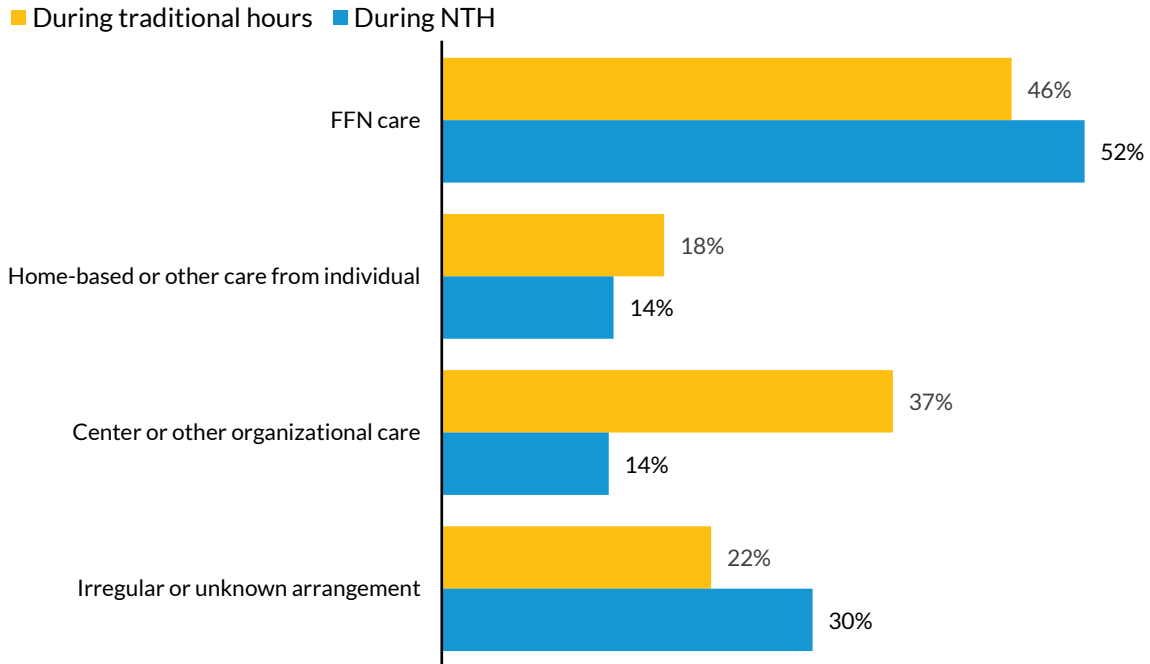
Notes: Figures are estimates, and percentages are rounded to the closest 1 percent. Children can be in NTH care during multiple periods, so the categories sum up to more than 100 percent.

3. What Types of Child Care Do Families with NTH Schedules Use during Different Periods?

Among young children in any NTH care, more are in centers or other organizational care during traditional hours than during nontraditional hours (figure 5). For children in any NTH care, only 14 percent are in center-based care during NTH, compared with 37 percent during traditional hours. FFN care is the most common type of care for children in any NTH care. Children who spent any time in NTH care mostly used NTH care in both traditional and nontraditional hours. A large share of children in any NTH care are in FFN care during traditional hours (46 percent) and during NTH (52 percent). A relatively smaller share of children in traditional-hour care only (not shown in the figures) are in any FFN care (27 percent).

FIGURE 5

Young Children in NTH Care Are More Likely in Center Care during Traditional Hours Than NTH, but FFN Is Most Common Care in Both Periods



Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

Notes: Less than 1 percent of children in each group were also reported as unsupervised during the week (not shown). Irregular care is defined by the NSECE as a care arrangement in which a child spends fewer than five hours a week.

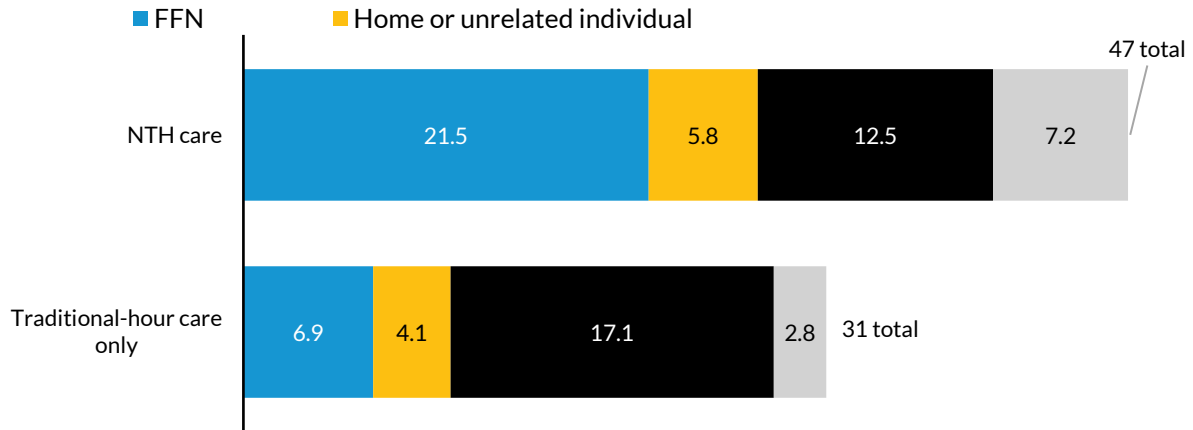
4. How Does the Amount of Time in Different Care Settings Vary by Schedule, Type of Care, and Family Characteristics?

Young children in any NTH care spend substantially more time in child care overall compared with children in traditional-hour care only (47 hours and 31 hours a week, respectively (figure 6)). Children in NTH care spend more than double the number of hours in FFN care overall and a higher share of care hours in FFN than children in traditional-hour care only. Children in traditional-hour care only spend more time in center or organizational care than those in NTH care.

FIGURE 6

Young Children in Any NTH Care Spend More Time in Care Overall Than Other Children in Care

Average hours in care per week, by type of care



Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent. Children in each group were also reported as being unsupervised for an average of less than 0.1 hours per week (not shown). Irregular care is defined by the NSECE as a care arrangement in which a child spends fewer than five hours a week.

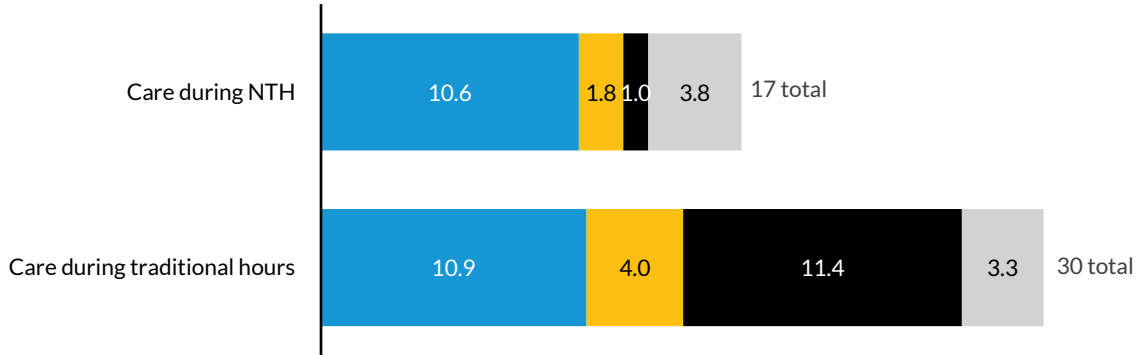
CHILDREN IN ANY NTH CARE ALSO SPEND ABOUT 30 HOURS IN TRADITIONAL-HOUR CARE

Children who are in any NTH care spend about 17 hours in care during NTH and 30 additional hours in care during traditional hours (figure 7). Figure 7 below shows that children who spend any times in NTH care, spend 11.9 hours in FFN care during traditional hours and 11.4 hours in center-based care during traditional hours. Children in any NTH care spend about the same amount of time in care during traditional hours (30 hours shown in figure 7 below) as those in traditional-hour care only (31 hours shown in figure 6 above).

FIGURE 7

Children Attending Any NTH Care Still Spend More Time in Care during Traditional Hours Than NTH
Average hours per week in care during period, by type of care, for children in any NTH care

■ FFN ■ Home or unrelated individual ■ Center or organizational ■ Irregular or unknown



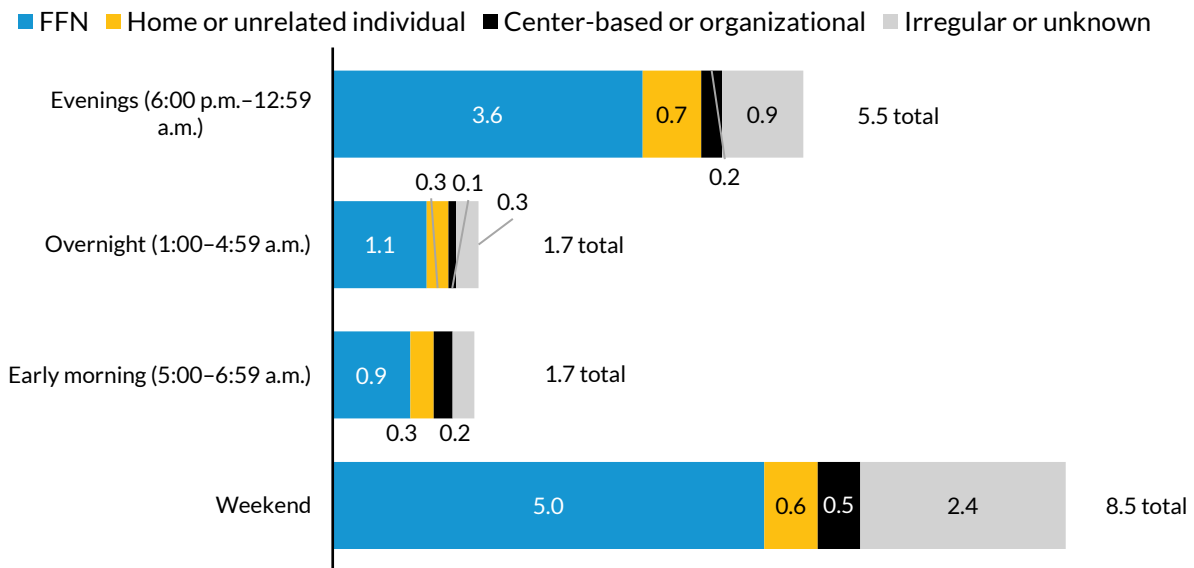
Source: Urban Institute analysis of National Survey of Early Care and Education 2019 datafiles.

Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent.

Young children in NTH care spend more time in care during the weekend, followed by evenings and other NTH periods (figure 8). Children in NTH care spend an average of 8.5 hours in care during the weekend, 5.5 hours in care during weekday evenings, and 1.7 hours in overnight and early morning care on weekdays. Children in NTH care spend most of the time in FFN care and the least time in center-based or organizational care.

FIGURE 8

Young Children in NTH Care Spend More Time in Care during Weekends Than Other NTH Periods
Average hours per week in care during period, by type of care, for children in any NTH care



Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent. Children were also reported as being unsupervised for an average of less than 0.1 hours per week in each NTH period (not shown).

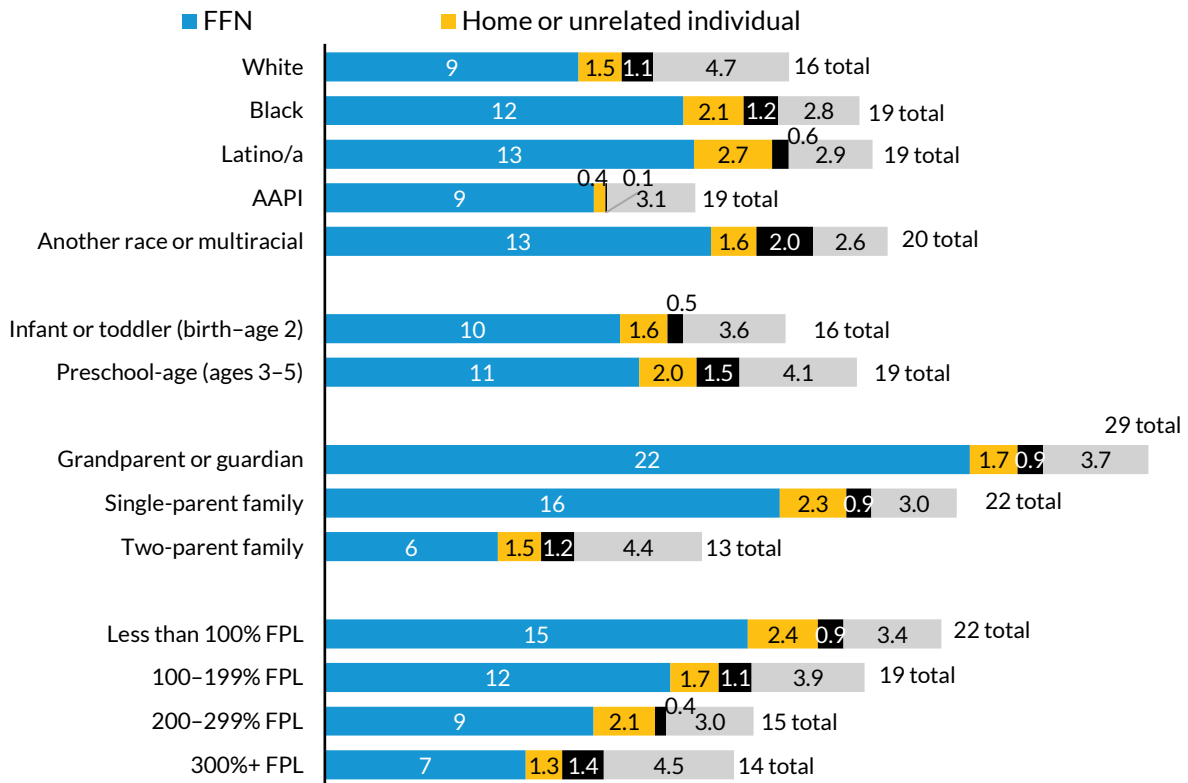
THE AMOUNT OF NTH TIME AND TYPES OF CARE VARY BY CHILD AND FAMILY CHARACTERISTICS

Among young children in any NTH care, those in families facing structural barriers to employment and education opportunities spent more time in NTH care overall (figure 9). All children in NTH care spend more time in FFN care during NTH than in other types of care. Further, children in groups more likely to face structural barriers tend to spend more time in FFN care during NTH than children in other groups.

Among young children in any NTH care, Black and Latino/a children averaged 19 hours each week in NTH care compared with 16 hours and 13 hours, respectively, for white and for Asian American and Pacific Islander (AAPI) children. Children who live with their grandparents, a guardian, or another caretaker rather than parents and those with a single parent spend more time in NTH care than those in two-parent families. Children in families with incomes below the federal poverty level (FPL) average 22 hours in NTH care. Those in families with low incomes but who are not poor (100–199 percent of FPL) average 19 hours in NTH care. Those with higher incomes average about 14 to 15 hours in child care each week.

FIGURE 9

Young Children in Groups More Likely to Face Structural Challenges Spend More Time in NTH Care
 Average hours per week in NTH care, by type of care and subgroup, for children in any NTH care



Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.
Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent. Children in each group were also reported as being unsupervised for an average of less than 0.2 hours per week (not shown). Irregular care is defined by the NSECE as a care arrangement in which a child spends fewer than five hours a week.

5. How Do Parents with and without NTH Schedules Rate Different Types of Care?

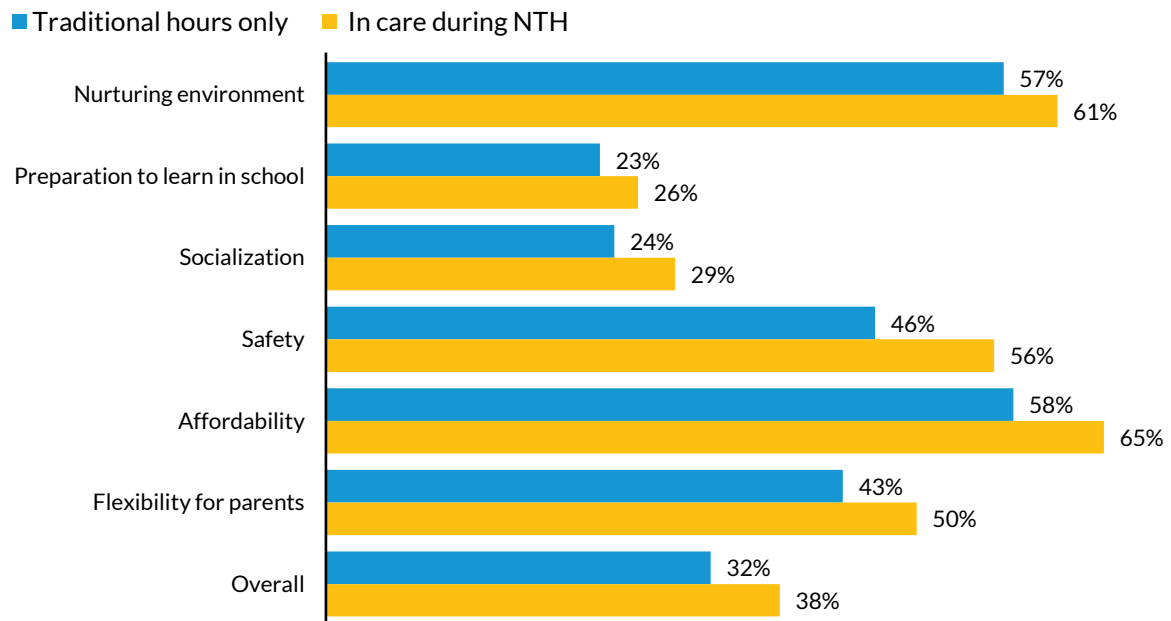
Families’ use of different types of care corresponds with ratings of different types of care. Parents of children in any NTH care tend to provide higher ratings of FFN care and lower ratings of center-based care than parents of children only in traditional-hour care. Nonetheless, both groups tend to rate FFN care as better than center-based care across all dimensions except preparing children for school.

Higher shares of young children in any type of NTH care have parents who rate family, friend, and neighbor care as excellent in terms of safety and affordability than children in any type of care during traditional hours only (figure 10). Fifty-six percent of young children in NTH care have parents who rate friend or neighbor care as excellent for safety, compared with 46 percent of those in traditional-hour care only. Nearly two-thirds (65 percent) of young children in NTH care have parents

who rate friend or neighbor care as excellent for affordability, compared with 58 percent of those in traditional-hour care only.

Children in any type of NTH care are also slightly more likely to have parents who rate other aspects of family, friend, and neighbor care as excellent compared with children in traditional-hour care only, but these differences are not statistically significant. Ratings of types of care are reflected in families' care use: children in care during NTH are more likely to be in FFN care anytime during the week (57 percent) than those in traditional-hour care only (27 percent).

FIGURE 10
Ratings Given by Parents of Young Children in NTH Care and Parents of Children in Traditional-Hour Care by Aspect of Care (FFN CARE)



Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

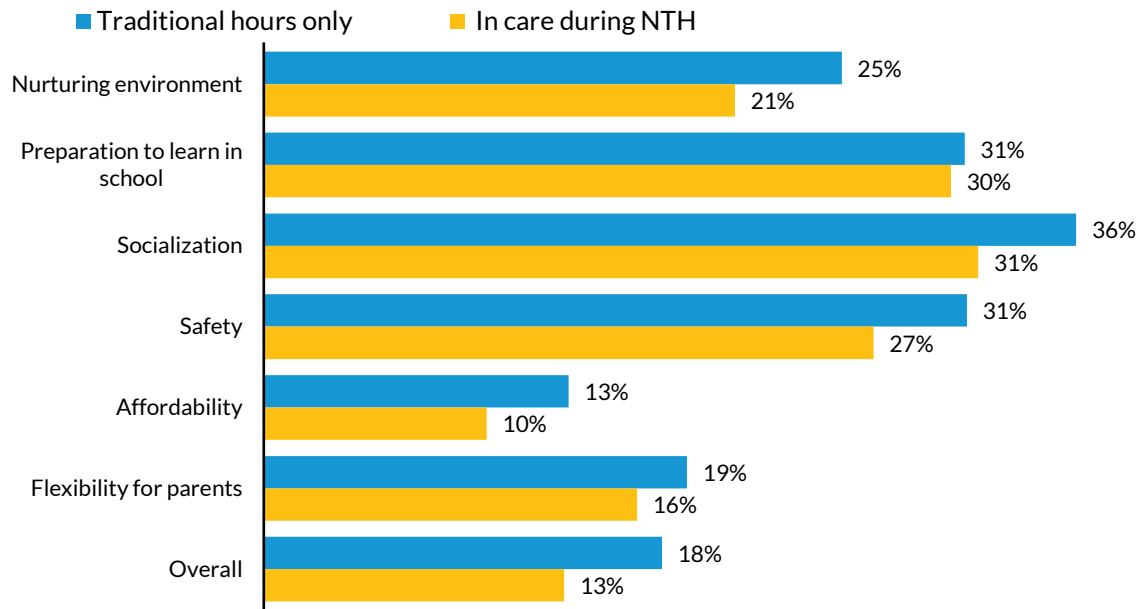
Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent. The share of parents rating each aspect of this care type as excellent is out of all survey respondents, including those indicating a rating of excellent, good, fair, and poor as well as those who reported they had no opinion or a response of “I don’t know” or refused to respond.

Young children in any type of NTH care are less likely to have parents who rate center-based care as excellent in terms of affordability and overall than children in nonparental care during traditional hours only (figure 11). Ten percent of young children in NTH care have parents who rate center-based care as excellent for affordability, compared with 13 percent of children in traditional-hour care only. Thirteen percent of young children in NTH care have parents who rate center-based care as excellent overall, compared with 18 percent of children in traditional-hour care only.

Children in NTH care are also slightly less likely to have parents who rate other aspects of center care as excellent than children in traditional-hour care only, but these differences were not statistically significant. Again, these preferences are reflected in care use. Overall, children in care during NTH are less likely to be in center-based care anytime during the week (37 percent) than those in traditional-hour care only (56 percent).

Parents of children in NTH care and also those with children in traditional-hour care only rate various aspects of center-based care lower than FFN care. The exception is their rating of how well center-based care prepares children for school. About 30 percent of young children in both NTH care and traditional-hour care only have parents who rate center-based care as excellent for preparing for school; about a quarter rate this aspect of FFN care as excellent.

FIGURE 11
Ratings by Parents of Young Children in Any NTH Care Rate Center-Based Care by Hours in Care and Aspect of Care



Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.
Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent. The share of parents rating each aspect of this care type as excellent is out of all survey respondents, including those indicating a rating of excellent, good, fair, and poor as well as those who reported they had no opinion or a response of “I don’t know” or refused to respond.

Conclusion and Considerations for Policy and Research

We found that a large share of young children—about 40 percent of those in nonparental care or 5 million young children—were in care during at least some nontraditional-hour periods in 2019. Our findings also suggest that a very large share of subsidy-eligible families use NTH care. However, questions remain about whether these families use subsidies for that care. Our overall findings are consistent with some older research based on analyses of the 2012 NSECE (NSECE Project Team 2019) and with qualitative research (Liu and Anderson 2012; Scott and Abelson 2016; Sloane et al. 2019; Vesely 2013) and address gaps in the research. Specifically, we found the following:

- Children in families facing historic and ongoing barriers to employment, education, and access to care use NTH care. These include children who are Black or Latino/a; living in families with lower incomes; or living with a single parent or grandparent, relative, or guardian instead of a parent. Moreover, children in families living in communities with high levels of poverty and in rural areas are more likely to be in NTH care than those in communities with low poverty and in suburban communities. Our findings add evidence to previous research on the potential demand for NTH care which suggested that families facing barriers had greater potential need for NTH care than their counterparts. Our analyses shows that families with these barriers actually use NTH care more than their counterparts.
- The types of care used by parents with NTH schedules differs from those with traditional-hour only schedules. Parents who work NTH are more likely to use family, friend, and neighbor care during NTH periods as well as during traditional-hour periods and are less likely to use center-based care.
- The time when children are in NTH care is mostly on the weekends: 55 percent of children in any NTH care are in care on the weekend. During the traditional work week, higher percentages of children are in NTH care the hours immediately before and after the traditional day. Children are in overnight nonparental care much less often.
- The amount of time children spend in care overall is much higher for children in any NTH care when compared with children who only spend time in care during traditional-hour periods.
- Ratings of child care differ depending on whether parents have children in care during NTH or traditional hours only. Parents of children who attend care during any NTH period rate FFN care higher than center-based care in terms of a nurturing environment, affordability, flexibility, and overall. Moreover, parents of children who attend care during any NTH period

rate center-based care lower than parents with children in care during traditional hours only in terms of cost, meeting their needs, and overall.

- Consistent with parents' ratings of different types of child care, children in NTH care are more likely than those in traditional-hour care only to be in FFN care. Children in any NTH care also spend more time in FFN care. Conversely, when compared with children in traditional-hour care only, children who spend any time in NTH care are less likely to be in center-based or organizational care. Nonetheless, children in any NTH care are more likely to be in center-based or organizational care during traditional hours than during nontraditional hours. Our findings raise questions for research and a number of policy considerations.

Policy Considerations

The CCDBG requires federal and state child care policymakers to account for families' preferences to provide care based on reasonable effort.² To do so, policymakers need to account for when, where, and what type of care families use for all periods including nontraditional hours. Based on our analyses of NSECE and existing qualitative research on NTH care, we recommend that federal and state policymakers **review existing child care policies, regulations, and the implementation of policies to identify barriers to NTH care and to systematically address those barriers.** A range of federal and state child care policies guide consumer education (such as information and resources) about child care, licensing, and subsidies for families with low incomes. To support families seeking NTH care, policymakers could consider improving the information provided, licensing policies, and subsidy design and administration.

- **States seeking to improve access to information about NTH care could update websites and provide parents with information about licensed care that operates during nontraditional hours.** CCDBG requires states to support "consumer education" so parents, with a reasonable effort, can access information about child care. Providing information about the hours and days of operation as well as availability of care could help parents seeking NTH care. Child care policies guide the development of child care websites that have information about available licensed child care. But in a 2018 study in Pennsylvania, parents who were interviewed reported the only way they could find NTH care was to call each facility (Sloane et al. 2019). We also recommend that states provide guidance to parents about what types of NTH care is best for children to minimize transitions and support child development.
- **States seeking to increase the supply of NTH care could consider providing opportunities for FFN and informal care providers to become licensed.** Providing opportunities for unregulated

child care providers to become licensed could increase quality and the overall supply of care (Gibbs 2022). National organizations recommend that states work with community-based organizations to give information to child care providers about licensing and subsidies to make it easier for these providers to become licensed, participate in the subsidy system, and increase the overall supply of child care (Gibbs 2022).

- **We also recommend that federal and states policymakers explore how best to increase the supply of specific types of care to best meet the needs of families with NTH schedules or families that use NTH care.** For example, rural states can use the US Department of Agriculture Rural Development’s Community Facilities Programs, and rural child care facilities can access the Rural Business Development Grants. Both are sources of capital to make capital improvements to meet child care licensing requirements (Hamm and Maxson 2022). States can use federal funds to increase the supply of home-based care by covering the coordination costs of family child care networks or informal home-based provider networks (Schilder et al. 2021). These networks to improve providers’ access to resources, provide peer connections, coordinate with state child care agencies, and help providers access additional funding.³
- **We also recommend that federal and state policymakers craft policies to support the types of care that parents who work NTH use and rate most highly.** For example, policymakers could explore ways to support and ensure that FFN care is safe and encourages child well-being and development since our findings reveal many parents with children in NTH care rate this type of care more highly than center-based care. Addressing this issue is important to ensure the distribution of and access to public dollars is equitable and meets the needs of families eligible for child care subsidies, particularly given that high percentages of children in NTH care are Black or Latino/a, in families with low incomes, and live in high-poverty communities. Our findings that parents rate FFN care highly in terms of flexibility and warmth are consistent with other research findings. Specifically, qualitative research suggests parents, especially from marginalized communities, prefer FFN care for NTH care because it minimizes disruptions with meals and sleep routines, which families prioritize over learning activities during NTH periods (Garcia et al. 2019; Schilder et al. 2022).
- **States seeking to ensure subsidies are available for families with NTH schedules or that use NTH care could take a number of actions to ensure subsidy policy and policy implementation provide equitable access to the types of care parents with NTH schedules or that use NTH care prefer.** Policymakers could review subsidy reimbursement rates for NTH care and use a cost modeling tool to ensure rates account for the cost of providing care during NTH periods. Some

states are contracting for child care slots for NTH periods and base reimbursements on enrollment rather than attendance as one way to use subsidies to support NTH care (Schilder et al. 2021). We recommend that policymakers and program administrators review existing subsidy policies to identify barriers to accessing child care subsidies for families working more than a 40-hour week and for parents with multiple child care arrangements. Garcia and colleagues found in a qualitative study of care in Massachusetts that “individuals from marginalized communities are also more likely to utilize FFN care as a result of structural and systemic challenges that limit their choices within the broader care sector. For these families, FFN may not be their ideal situation, but merely what they have access to” (Garcia et al. 2019, 8). Garcia’s definition of marginalized communities includes individuals who are Black or Latina/o, are immigrants, or have low incomes. Although greater access to subsidies might increase the availability of this type of care to families and support caretakers, efforts to engage FFN care should balance regulations and requirements such as background checks to ensure children’s health and safety.

- **For states interested in increasing access to child care subsidies for families working NTH schedules or using NTH care, we recommend state administrators review the implementation of child care policies to identify participation barriers for families with NTH schedules or using NTH care and for providers offering NTH care.** Research by Shlay and colleagues shows that barriers to subsidy participation exist for families with traditional schedules, including hassles with the process and confusion about subsidy regulations (Shlay et al. 2004). Moreover, some research suggests subsidy policies create particular barriers for parents in low-paying jobs with irregular or nonstandard hours and whose care needs fluctuate or take place outside standard operating hours (Ullrich, Schmit, and Cosse 2019).
- **We recommend that states consider increasing subsidy reimbursement rates for care provided during NTH periods to help parents afford care during these periods.** Lower demand, fewer staff, and heightened requirements around sleeping arrangements for NTH care make providing this type of care more costly for providers. The high shares of children in care during NTH from groups that have faced barriers to opportunity point to the need to support these families’ access to care. Policymakers can also consider contracting for slots or care availability during these times in areas with higher demand or demonstrated unmet need (Workman 2020). In states with laws and regulations that allow subsidies to be used for multiple arrangements and extended hours, we recommend states systematically examine whether subsidy administration and authorization of hours supports use of subsidies for all NTH arrangements.

- **Finally, in states that link subsidy participation to quality ratings, we recommend that policymakers consider refining quality regulations to address how quality care is defined for care during NTH.** We found that families rate learning activities, preparing for school, and socialization with other children as areas of high importance during traditional hours. In contrast, families using NTH care rate the ability to provide a safe, nurturing environment with less disruption to sleep, meals, and the families' overall schedule more highly. Parents using NTH care also rate FFN and home-based care more highly than center-based care in terms of flexibility and affordability. We recommend that policymakers and child care administrators review regulations and policies that affect the availability and accessibility of FFN and home-based care. These options are preferred by some families in providing care in the child's home, a nearby home, or another setting that minimizes disruptions to commute and schedules during NTH.

Additional Research Needed

Policymakers and other actors need more research on how NTH care use varies by demographic and geographic characteristics to develop policies, programs, and supports that meet families' and providers' needs. Our analyses of 2019 NSECE data begin to address these questions. More research is needed to better understand the following.

- **How can federal and state policies best support the types of NTH care that meet the needs of families with specific characteristics and in particular communities who are most likely to use NTH care?** Previous research suggested families most affected by structural barriers to opportunity—including parents who are Black or Latino/a, have lower levels of education, are single parents, and have low incomes—have potentially higher demand for NTH care than their counterparts (Schilder et al. 2022). Our analyses of NSECE found that families with these characteristics actually use NTH care at higher rates—adding to the evidence base. Nonetheless, more research is needed to understand how child care policies can best meet the needs of these families who have historically faced barriers to opportunities. Given the high share of children younger than age 6 in any care who live in families with low incomes using NTH care, it is especially important for federal and state policymakers to examine existing subsidy policies to consider how to ensure equitable distribution of public dollars to meet the needs and preferences of families eligible for child care subsidies.

We also found that for families living in communities with high poverty density, rural communities, and high-density urban communities, the policy solutions for supporting NTH

care likely differ. For example, research conducted by Lloyd and colleagues revealed that families in communities with higher poverty rates appear to have fewer high-quality care options or affordable care options if they are not eligible for subsidies or public care options (Lloyd et al. 2021). Challenges facing these families include crime, lack of transportation options, and limited access to food and other services and businesses. No research has yet examined the best way to provide NTH care to these families in urban and high-poverty communities. In contrast, the distribution and distance between households and businesses in more rural areas may pose specific challenges for families using NTH care, making it more difficult to get to center-based providers even if centers have hours during NTH periods. A smaller and less concentrated consumer base may also limit these providers ability to offer care and services to different groups and during NTH periods (Henly and Adams 2018). Systematic and rigorous research is needed to tailor policy solutions to meet the needs of families in communities with different characteristics. The specific policy solutions and implementation of policies will likely differ for families living in communities with distinct characteristics and for families with different characteristics. However, more research is needed to determine if subsidy-eligible families using NTH child care are accessing child care subsidies at the same rates as those using traditional-hour care only.

- **What policy solutions best meet the needs of families who use NTH care for different periods and in different amounts?** Policies to effectively incentivize providers to expand hours of operation and to offer care on the weekends would likely differ based on the hours of care and amount of care needed. Qualitative research conducted by Sandstrom and colleagues (2018) found that licensed providers said they needed to operate at or near full capacity during NTH periods to be profitable. This study found that when not enough families needed care at the same time, providers struggled to break even, and some reported losing money. Providers told Sandstrom’s study team that they needed to pay for a minimum number of staff and other operating costs, such as utilities, regardless of how many children were present.

Our findings that NTH care is most frequently needed on weekends and in the hours immediately before and after the traditional day suggests a need for determining the costs of expanding hours and then publicly funding the expanded hours. The CCDBG calls for equitable access to child care for all families. That means ensuring all families, especially families who have faced inequities in accessing care, can easily find care that is affordable, supports their child’s development and unique needs, and represents their preferred type of care (Banghart and Bedrick 2020). However, questions remain about whether families using NTH care are using subsidies for care offered during NTH periods and whether subsidies support the entire

time children are in child care. More research is also needed to determine the best ways of supporting families who need NTH care for intermittent periods of time or on weekends and families with consistent NTH care needs. Moreover, more research is needed to determine the most effective approaches to providing subsidies for all periods that families need child care.

- **How to best support the types of care parents using NTH care rate highly.** The CCDBG and associated access framework note the importance of supporting the types of child care arrangements that parents prefer. Our research found that parents using NTH care rate care options differently from parents who use traditional-hour care only. Our research does not make clear whether parents with NTH care needs want center-based care during the day and more informal care for NTH periods. Our descriptive analysis suggests that all parents rate center-based care more highly in terms of supporting children’s school readiness. The divergence between ratings of center-based care in preparing children for learning in school and use of informal care raises questions. Specifically, research is needed to determine if these differences in ratings exist for families with NTH after controlling for demographic characteristics, community characteristics, and the time period parents use NTH care, and the amount of time children are in NTH care. The Bipartisan Policy Center and Morning Consult suggest that parents who use formal child care are more focused on learning, social skills, and preparation for school whereas parents with their children in FFN care cite trust, familiarity, and time with family as reasons for using this type of care.⁴ If parents using NTH care want and prefer FFN care for all periods, research is needed on how to best encourage unlicensed caregivers to become licensed and participate in the subsidy system.

In conclusion, evidence suggests that the lack of child care leads to reductions in labor force participation for many parents, and for parents who are in the labor market, child care challenges result in many reducing the hours they work (Goldin and Katz 2008). Currently, even traditional-hour child care is experiencing a “market failure” for several reasons (US Treasury Department 2021). The US Treasury reports that our current child care market requires parents to pay for care when they can least afford it, as younger employees make lower wages and have other major expenses, such as housing and student loans (US Treasury Department 2021). For families with low incomes working NTH, providing subsidies for NTH care is important to address structural inequities, support parents’ workforce participation, and ensure care supports children’s development and growth.

Appendix. Data and Methods

This report is based on analysis of 2019 National Survey of Early Care and Education (NSECE) household survey data. We linked responses on the characteristics, perspectives, activities, and care use for children, their families, and their households from the household survey to household calendar data, capturing the work and school activities of every adult for each 15-minute block during the prior week and the care every child was in during those blocks. In this analysis, we focused on children younger than age 6 who are not yet in kindergarten as the analytic sample. For most analyses, we explored the type of care for children in any nonparental care.

Nontraditional hours (NTH) in this report are defined as anytime from 6:00 p.m. to 7:00 a.m. on weekdays (Monday through Friday) or anytime during the weekend (Saturday and Sunday). We consider children who are in care for at least one 15-minute block anytime during NTH, during any of the NTH periods as using care during that NTH period.

We further collapsed the care types coded by the NSECE team into our center-based or other organizational care, home-based care, and FFN categories. The FFN category comprises the NSECE’s categories of care from a related (previously known) individual, including those that were paid as well as unpaid, regardless of setting. The home-based or unrelated individual category includes the NSECE’s categories of care from an unrelated (not previously known) individual regardless of whether they were paid or the care took place in the child’s home or another home. The center-based or other organizational care category comprises the NSECE’s categories of center-based care, including Head Start, public prekindergarten, and other organizational care or early education care (e.g., after-school, drop-in, single-activity recreational). The irregular or unknown care setting includes all care arrangements that the child was in less than five hours a week or where the provider type could not be identified.

TABLE A.1
Number of Young Children in Nonparental Care in NTH Care, by Child and Family Characteristics

Characteristic	No NTH Care	In NTH Care
Child’s race or ethnicity		
White	3,889,995	2,593,595
Black	844,413	822,614
Latino/a	1,679,886	1,039,739
AAPI	399,536	158,330
Other race or multiracial	509,600	357,613

Characteristic	No NTH Care	In NTH Care
Total	7,323,431	4,971,891
Ratio of annual income for calendar year 2018 to poverty level		
Below 100 percent federal poverty level (FPL)	1,251,159	1,243,064
100–199 percent FPL	1,398,174	1,256,803
200–299 percent FPL	1,139,647	897,851
300+ percent FPL	3,534,451	1,574,172
Total	7,323,431	4,971,891
Number of parents present in household		
Not living with parents	201,104	232,853
Single parent	1,784,723	1,940,867
Two parents present	5,337,604	2,798,171
Total	7,323,431	4,971,891
Child age group		
Infant (younger than age 1)	624,901	581,839
Toddler (ages 1–2)	2,204,580	1,824,892
Preschool-age (ages 3–4)	3,273,236	1,964,638
Age 5	1,220,714	600,521
Total	7,323,431	4,971,891

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

TABLE A.2

Number of Young Children in Nonparental Care in NTH Care, by Community Characteristics

Characteristic	No NTH Care	In NTH Care	Total
Community poverty density			
Low poverty density	4,377,114	2,661,076	7,038,190
Moderate poverty density	1,467,682	1,163,286	2,630,967
High poverty density	1,478,636	1,147,529	2,626,165
Total	7,323,431	4,971,891	12,295,322
Community classification in the urban/rural spectrum			
High-density urban population	5,118,651	3,434,822	8,553,474
Moderate-density urban population	1,442,383	890,242	2,332,625
Rural population	762,396	646,826	1,409,223
Total	7,323,431	4,971,891	12,295,322

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

TABLE A.3

Number of Young Children in Nonparental Care in NTH Care by Time Period

Period	No NTH Care	In NTH Care	Total
Evening (6:00 p.m.–1:00 a.m.)	2,495,776	2,476,115	4,971,891
Overnight (1:00–5:00 a.m.)	4,273,537	698,353	4,971,891
Early morning (5:00–7:00 a.m.)	3,124,635	1,847,255	4,971,891
Weekend	2,230,888	2,741,002	4,971,891

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

TABLE A.4

Number of Young Children in Nonparental Care in Weekends by Hour and on Weekends

Period	No NTH Care	In NTH Care	Total
Weekday hour			
6:00–7:00 p.m.	2,676,888	2,295,002	4,971,891
7:00–8:00 p.m.	3,047,280	1,924,611	4,971,891
8:00–9:00 p.m.	3,427,575	1,544,316	4,971,891
9:00–10:00 p.m.	3,724,999	1,246,892	4,971,891
10:00–11:00 p.m.	3,981,038	990,852	4,971,891
11:00 p.m.–12:00 a.m.	4,187,647	784,244	4,971,891
12:00–1:00 a.m.	4,439,898	531,993	4,971,891
1:00–2:00 a.m.	4,396,986	574,904	4,971,891
2:00–3:00 a.m.	4,385,424	586,466	4,971,891
3:00–4:00 a.m.	4,319,665	652,226	4,971,891
4:00–5:00 a.m.	4,285,719	686,171	4,971,891
5:00–6:00 a.m.	4,142,435	829,455	4,971,891
6:00–7:00 a.m.	3,142,015	1,829,875	4,971,891
Weekends	2,230,888	2,741,002	4,971,891

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

TABLE A.5

Number of Young Children in Nonparental Care during Traditional Hours and NTH by Types of Care

Type of Care	Traditional Hours	NTH
FFN care	2,290,638	2,584,587
Home-based care or other care from individual	894,043	693,410
Center-based or other organizational care	1,812,905	669,853
Irregular or unknown arrangement	1,081,559	1,493,612

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

TABLE A.6

Average Hours per Week Young Children Spend in Care Overall, for Children in NTH Care versus Traditional-Hour Care Only, by Type of Care

Average hours per week in care overall by type of care for children in NTH versus traditional-hour care only

Type of Care	Care during NTH	Care during Traditional Hours Only
FFN care	21.5	6.9
Home-based care or other care from individual	5.8	4.1
Center-based or other organizational care	12.5	17.1
Irregular or unknown arrangement	7.2	2.8
Total	47.0	31.0

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

TABLE A.7

Average Hours per Week Young Children who Spend Any Time in NTH Care Spend in Care During NTH and Traditional Hours, by Type of Care

Average hours per week in care during time period by type of care arrangement for children in any NTH care

Type of Care	Care during NTH	Care during Traditional Hours
FFN care	10.6	10.9
Home-based care or other care from individual	1.8	4.0
Center-based or other organizational care	1.0	11.4
Irregular or unknown arrangement	3.8	3.3
Total	17.0	30.0

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

TABLE A.8

Average Hours per Week Young Children Spend in NTH Care, by Type of Care and Period

Average hours per week in care during period by type of care for children in any NTH care

Type of Care	Evening (6:00 p.m.- 1:00 a.m.)	Overnight (1:00-5:00 a.m.)	Early morning (5:00-7:00 a.m.)	Weekend
FFN care	3.6	1.1	0.9	5.0
Home-based care or other care from individual	0.7	0.3	0.3	0.6
Center-based or other organizational care	0.2	0.1	0.2	0.5
Irregular or unknown arrangement	0.9	0.3	0.4	0.5
Total	5.5	1.7	1.7	8.5

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

TABLE A.9

Average Hours per Week Young Children Spend in NTH Care, by Type of Care and Demographic Characteristics

Average hours per week in NTH care by type of care and subgroup for children in any NTH care

Demographic Characteristic	FFN	Home-Based or Unrelated Individual	Center-Based or Other Organizational	Irregular or Unknown	Total
White	9	1.5	1.1	4.7	16
Black	12	2.1	1.2	2.8	19
Latino/a	13	2.7	0.6	2.9	19
AAPI	9	0.4	0.1	3.1	13
Other race or multiracial	13	1.6	2.0	2.6	20
Infant or toddler (birth–age 2)	10	1.6	0.5	3.6	16
Preschool-age (ages 3–4)	11	2.0	1.5	4.1	19
Grandparent or guardian	22	1.7	0.9	3.7	29
Single-parent family	16	2.3	0.9	3.0	22
Two-parent family	6	1.5	1.2	4.4	13
Less than 100 percent FPL	15	2.4	0.9	3.4	22
100–199 percent FPL	12	1.7	1.1	3.9	19
200–299 percent FPL	9	2.1	0.4	3.0	15
300+ percent FPL	7	1.3	1.4	4.5	14

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

TABLE A.10

Parents of Young Children in Care by Ratings of Aspects of Care and Hours of Care

Excellent ratings of family, friend, and neighbor care by families of children younger than age 6 in nonparental care but not yet in kindergarten, by child NTH care participation

Characteristic of Care	Care during Traditional Hours Only	Care during NTH
Nurturing environment	4,164,636	3,050,436
Preparation to learn in school	1,683,312	1,301,795
Socialization	1,769,040	1,455,181
Safety	3,376,227	2,786,975
Affordability	4,223,282	3,245,861
Flexibility for parents	3,177,490	2,467,688
Overall	2,364,064	1,896,366

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent.

The share rating each aspect of this care type as excellent is out of all survey respondents, including those indicating a rating of excellent, good, fair, and poor as well as those who reported they had no opinion or a response of “I don’t know” or refused to respond.

TABLE A.11

Parents of Children in NTH Care Rated Center-Based Care Slightly Lower Overall Than Parents of Children in Traditional-Hour Care Only

Excellent ratings of center-based care by families of children younger than age 6 in nonparental care but not yet in kindergarten, by child NTH care participation

Characteristic	Care during Traditional Hours Only	Care during NTH
Nurturing environment	1,860,838	1,031,055
Preparation to learn in school	2,253,197	1,501,831
Socialization	2,613,158	1,559,564
Safety	2,265,291	1,330,847
Affordability	981,390	485,801
Flexibility for parents	1,359,042	813,964
Overall	1,282,343	656,412

Source: Urban Institute analysis of National Survey of Early Care and Education 2019 household survey data.

Notes: Figures are estimates, frequencies are rounded to the nearest 10, and percentages are rounded to the closest 1 percent.

The share rating each aspect of this care type as excellent is out of all survey respondents, including those indicating a rating of excellent, good, fair, and poor as well as those who reported they had no opinion or a response of “I don’t know” or refused to respond.

Notes

- ¹ The 2019 federal poverty level was a household income of less than \$21,330 for a family of three. See “2019 Poverty Guidelines,” Office of the Assistant Secretary for Planning and Evaluation, US Department of Health and Human Services, accessed April 24, 2023, <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines/prior-hhs-poverty-guidelines-federal-register-references/2019-poverty-guidelines>.
- ² “Child Care and Development Fund Reauthorization,” Office of Child Care, Administration for Children and Families, US Department of Health and Human Services, accessed April 24, 2023, <https://www.acf.hhs.gov/occ/ccdf-reauthorization>.
- ³ 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), Urban Institute, November 9, 2021, <https://www.urban.org/urban-wire/six-ways-states-can-leverage-funding-increase-supply-and-quality-home-based-child-care>.
- ⁴ Linda Smith and Victoria Owens, 2022. “Survey Results: What Keeps Employed Parents Out of the Child Care System?,” Bipartisan Policy Center, August 8, 2022, <https://bipartisanpolicy.org/blog/survey-results-what-keeps-employed-parents-out-the-child-care-system/>.

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