

## **Abstract**

 $\mathsf{C}$ hildcare scarcity is a widespread phenomenon and challenge with many implications for childhood development. Researchers conducted a qualitative study to foreground local knowledge and discover policy-relevant implications to drive reform efforts for this critical early period. Stakeholders, including administration leaders, directors, teachers, staff, and parents, were asked to describe the most urgent and vital issues in the childcare shortage. Findings reveal an intertwined set of factors, with financial concerns being a large but not sole part of the picture. All participants mentioned children's behavioral health as a significant challenge. Stakeholders raised concerns about how many adults children may interact with throughout their time in childcare - putting them at risk for social-emotional issues. Expanding access to childcare alone will not solve the problem without other supports addressing these concerns. Implications for future research and partnerships to address challenges are discussed.

# Not just money: Lack of childcare access from stakeholder perspectives

Children's experiences with their primary caregivers during the first few years of life create rich opportunities or lasting deficits because of the potency of interactions within these contexts (Huston & Bentley, 2010). The formative years and experiences shape the cognitive, language, and socio-emotional skills that influence young children's future learning and development, 60 percent of whom encounter non-parental care (Redford et al., 2017). The type of childcare children receive may vary significantly over a child's first five years, especially in rural areas, due to factors such as access, local resources, and cost (Morrissey et al., 2022).

Access to quality childcare is essential for healthy communities. Not only is early childhood care the foundation for later learning and development, but parents are better able to engage in the workforce when they have consistent, trustworthy childcare. Two-thirds of children under five have working parents (Malik et al., 2018). There is also a national trend of underfunded childcare, resulting in a lack of access to quality licensed childcare that could be described as a national crisis (Malik et al., 2018). Parents living in rural communities have even less access to childcare than in urban areas, and the quality of what is accessible is not well-known. The Rapid Survey Project at Stanford University (2022) reported over 75% of parents surveyed were looking for childcare and struggled to find affordable care. A recent Save the Children Action Network report (2022) found 55% of rural families said access to childcare has worsened since the COVID-19 pandemic.

Large-scale national research has helped to illuminate the associations between childcare quantity, type, and quality with child outcomes. Specific local data is needed to clarify how the lack of access to quality, consistent childcare impacts individuals participating in the system. The current study is a qualitative investigation of stakeholders' perceptions of the issues surrounding access to quality early childhood care in non-urban Midwest communities. The research question addressed is: How do stakeholders involved in childcare perceive the crisis, barriers, and solutions to the childcare shortage?

# **Methods**

The current study is an exploratory qualitative investigation designed to identify and understand how the most proximal stakeholders (parents, childcare directors, teachers) see access and quality issues in their own settings. Focus groups, interviews, and open-ended surveys were used to obtain participants' thoughts and opinions. The study was reviewed and approved (#18-342-00) by the Institutional Review Board of the university.

# **Participants**

The study took place in a Midwestern state. Participants were recruited using stratified purposeful sampling. First, administrative-level stakeholders (n=4) of the state's Childcare Resource and Referral (CCR&R) network agreed to participate in the study and identify childcare directors from different communities. Next, childcare center directors (n=4), teachers (n=26), and two parents agreed to participate in the study (total n=32).

# **Data collection procedures**

Focus groups were scheduled at the groups' convenience. The research team and a local university Extension and Outreach staff member facilitated the groups. Participants signed consent, and facilitators gave directions to keep responses confidential. Focus group members had a paper copy of the questions and were invited to write answers and/or verbalize them. Facilitators recorded each one-hour session, and they could ask clarification or follow-up questions. All groups were asked what they perceived as a primary concern regarding the childcare shortage, how these concerns impacted children, and what barriers exist to addressing the problems they reported. Participants received a copy of the transcript of their session to ensure accuracy and quality. Additionally, they were asked if there was anything to add or take away and if the data accurately reflected their previously stated opinions.

# **Data analysis strategy**

Analysis began with thematic coding based on themes found in literature about childcare access and quality, followed by rounds of inductive coding. Using an iterative approach (Hsieh & Shannon, 2005) with multiple rounds of decontextualizing, recontextualizing, and categorization of codes, researchers aim to increase the rigor and trustworthiness of the interpretation of the data. Coding was conducted using the qualitative data analysis software NVivo (QSR International, 2012). The researchers began coding in the first round

by assigning predetermined codes to each transcript. In the last round, the compilation of the previous cycles focused on bringing together insights. As a final validity check, the researchers considered how the results corresponded to the available literature (Bengtsson, 2016).

## Results

able 1. lists the major themes and subthemes that emerged to answer the questions "how do stakeholders in early childhood see the quality and access to early childhood care?" and "what are the current barriers to solving this problem?". As expected, the primary concerns from stakeholders regarding the childcare situation in their area revolved around finances and access. The stakeholder identified the following issues as essential factors in the childcare crisis.

### **Finances**

Parents were concerned with the affordability of childcare, but they also were concerned about the childcare having enough resources to care for their children and provide stimulating activities properly. One parent commented, "I think I would say that in rural [Midwest state], we can't afford to have one parent not working. And just, small towns are ... literally, there's a library and a swimming pool. And that's the only options we have for anything ... to take the kids out of daycare for a field trip, it's almost impossible." All groups mentioned the low pay and little-to-no benefits of childcare positions as significant reasons for the high turnover and shortage of childcare staff. Respondents acknowledged state subsidies and programs like state-funded universal preschool as avenues to provide quality, affordable childcare. Still, the regulations childcare centers had to follow to qualify for state subsidies or offer state-funded preschool made the financial balance untenable for some.

# Policies, Regulations, and Training

All stakeholders commented on the challenges associated with policies and regulations that licensed childcare providers must follow and how these impacted training requirements. In fact, policies were often named as a barrier to solving the childcare crisis. At the same time, all acknowledged the need for more professional development and specific training so that childcare providers and early childhood teachers can be more effective, provide a quality learning environment and keep children safe. These points are particularly salient around infant care. One parent shared, "When I was, I think it was only like five months pregnant, and I called like five or six daycares. And I'm still on waiting lists. And my daughter's 19 months old". This parent took her child to an in-home daycare, and "I don't even know if my daycare is licensed. I assume so, but I've never asked. I mean, everyone recommends them."

# **Behavior Management Impacts**

A surprising finding that was very clear in the data analysis was concern about children's behavior. Participants observed children demonstrating anxious, acting out behavior. Even parents noted they had observed children who had difficulty forming relationships and required a lot of attention. Staff agreed with this statement by a lead teacher "I don't know what to do some days when they won't respond or anything. I don't know how to handle that." Directors reported on the difficulties, "Teachers in daycare are working harder to get the kids to learn how to communicate instead of getting so mad and hitting people and throwing things. You lose teachers because these kids are violent towards their teachers, they're violent towards each other, and there's no way for the pay to compensate for that." Parental attitudes were also raised by directors and staff "It really stems back on changing the attitude of parents of seeing us as babysitters versus childcare providers who have gone to school for this, who have wanted to do this, who this is their passion."

# **Discussion**

Initial findings indicate a complex web of interrelated factors. The nuanced way finances played into every challenge – policy, regulations, and training are multi-faceted. Senior staff who stay regardless of low pay may do so because of intrinsic rewards such as an emotional reward for caring for children and making a positive impact (McDonald et al., 2018). Regardless, even dedicated staff can be pushed out because of a lack of support, lack of respect from parents, or management issues in the childcare center leading to stress and low morale. Supports to address these issues are needed. For example, providing parents with education on safety requirements may prompt more parental support to their childcare providers. Another might be helping childcare centers and home-based businesses improve and streamline their management and business practices.

Although salaries were a major part of the financial discussions, the expense of training employees was a much-discussed topic. There are no educational requirements for teachers and providers of licensed childcare in this state, but there is required training. Centers typically (but not always) pay employees for this training. The essential training needed for this state is twelve hours, covering health and safety. While all stakeholders want well-trained and educated people working with young children, training costs are particularly challenging given the amount of turnover the profession experiences. Basic training is supported by state and federal funding. At the same time, the workforce turnover is so significant that funding to support new staff takes precedence over funding to support staff with more experience and provide more advanced training. Clearly, each stakeholder group in the current study felt that more training was necessary. Given the importance of the early childhood developmental window, having a well-trained staff is critical. Further, when staff did not have access to quality training, they were more likely to leave due to frustrations around working with children's behavior. This becomes part of an unproductive cycle. In fact, children's problematic behavior was a surprising finding that emerged from all stakeholders, given that they were not directly asked about child behavior. Many participants felt that if childcare staff were better able to manage children, they would be happier and less likely to quit. Likewise,

parents expressed concern about their children's exposure to negative behavior. The behavior management issue is likely exacerbated by moving children and staff from room to room to comply with state ratio minimums. Participants reported children might be assigned to a particular room and staff member but the children or staff may be moved to balance the numbers. The implications are that within the childcare center, children encounter multiple adults – many of whom may not have vital training in supporting social-emotional development. In the Bratsch-Hines study (2017), researchers found negative associations between the number of childcare arrangements and children's social-emotional outcomes.

When considered alongside concerns about children's mental health (McMillian et al., 2018) and the current global health crisis - the most vulnerable of our society are at risk for long-term adverse impacts with unforeseen consequences. Expanding access to childcare will not solve the problem without other supports. Expanding university-community involvement and partnerships may be a way to help under-resourced communities find workable solutions. More specifically, addressing the current findings, delivering effective and affordable universal behavioral health intervention training could benefit all stakeholders. This study was a small qualitative investigation, so the findings may not apply to other stakeholders. More work on data collection with more parents and different types of childcare staff could add more perspectives. Importantly, evaluation of strategies and approaches beyond increased pay are needed to provide new and evidence-based solutions for communities desperately in need of quality childcare.

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### **References**

Bengtsson, M. (2016). How to plan and perform a qualitative study using content analysis. Nursing Plus Open, 2, 8-14.

Bratsch-Hines, M. E., Mokrova, I., Vernon-Feagans, L., & Family Life Project Key Investigators. (2017). Rural families' use of multiple childcare arrangements from 6 to 58 months and children's kindergarten behavioral and academic outcomes. Early childhood research quarterly, 41, 161-173. Hsieh, H. F., & Shannon, S. E. (2005). Three approaches to qualitative content analysis. Qualitative health research, 15(9), 1277-1288.

Huston, A. C., & Bentley, A. C. (2010). Human development in societal context. Annual review of psychology, 61, 411-437.

Malik, R., Hamm, K., Schochet, L., Novoa, C., Workman, S., & Jessen-Howard, S. (2018). America's childcare desserts in 2018. Center for American Progress. https://www.americanprogress.org/issues/early-childhood/reports/2018/12/06/461643/americas-child-care-deserts-2018/McDonald, P., Thorpe, K., & Irvine, S. (2018). Low pay but still we stay: Retention in early childhood education and care. Journal of Industrial Relations, 60(5), 647-668.

McMillan, J. A., Land, M. L., Rodday, A. M., Wills, K., Green, C. M., & Leslie, L. K. (2018). Report of a joint association of pediatric program directors—American board of pediatrics workshop: Preparing future pediatricians for the mental health crisis. The Journal of Pediatrics, 201, 285-291.

Morrissey, T. W., Allard, S. W., & Pelletier, E. (2022). Access to early care and education in rural communities: Implications for children's school readiness. RSF: The Russell Sage Foundation Journal of the Social Sciences, 8(3), 100-123.

QSR International (2012). NVivo Qualitative Data Analysis Software [Software]. Available from https://qsrinternational.com/nvivo/nvivo-products/Redford, J., Desrochers, D., & Hoyer, K. M. (2017). The years before school: Children's non-parental care arrangements from 2001 to 2012. Stats in brief. NCES 2017-096. National Center for Education Statistics.

Save the Children Action Network (2022). Rural voters support investments to address hunger & provide quality, affordable child care. Washington, D.C.

Stanford Center on Early Childhood, Stanford University. (2022). Overdue: A new childcare system that supports children, families, & providers. Rapid Survey Project. Retrieved from https://rapidsurveyproject.com/

Walsh, M. E., Adams, S. M., Ferguson, S., Hearst, M. O., Jones, J. V., Wall, S., ... & Theodorakakis, M. (2021). Inquiry in action: Reflections on the implementation of best practices in child-and family-focused university-community partnerships. Journal of Education, 201(1), 42-53.

# **Table 1**

### Themes and Subthemes

Theme	Subtheme	Example quote
Finances	a) Pay	"it is a high demand job and [] with that comes a rate
	Salary too low.	of pay that should match that, and I don't feel that this
	High demand job.	is met by any means."
	Pay schedule.	
		"The salary for the ladies that work there is not high
	Too little benefits.	enough, or good enough benefits. So they have a high
	High staff turnover.	turnover."
	Low quality staff.	
	b) Cost	
	Parents want high quality, low cost.	"The parents want that quality, they want teachers that
	Parents don't qualify for assistance, pay out of	understand special needs kids, and take all those
	pocket.	trainings to learn how to work with these kids, but they
	Training is expensive.	don't want to pay more to get that better quality of
		daycare."
	In-home daycare is cheaper.	
	Too high staff-kids ratio/short staffed in	"In rural [midwest] we can't afford to have one parent
	summer.	not working. [] Best about the in-home daycare is
		that it's cheap and flexible."
	al Accord	"I have appointed for kids. I don't have any staff to come
	c) Access Lack of staff.	"I have openings for kids, I don't have any staff to come in."
	High staff turnover.	116.
	riigii staii turiiover.	"When I was, I think it was only like five months
	Kids-staff ratio too high.	pregnant, and I called like five or six daycares. And I'm
	Frequent staff changes.	still on waiting lists. And my daughter's 19 months old."
	Long waitlists for centers.	still off waiting lists. And my daughter 3 13 months old.
	Long waitings for centers.	
Policies and	a) Policies & Regulations	"They [babies] have blankets at home. We can't cover
Regulation,	Different standards across daycares.	them up with blankets, we have them in an
Professional	Policies difficult to implement/explain.	environment sleeping that they don't sleep at home so
Development		therefore the babies do not sleep at daycare centers."
	b) Regulations	"I'm not sure that is legally licensing okay [for the in-
	Ratio requirements.	home daycare]. But that's what we have in very rural
	Quality rating issues.	areas."

### c) PD/Training

Lack of qualified staff/not enough training for challenging child population.

Degree requirements.

Differences in education level (rural vs urban). More age specific training needed. "Oh, I'm sorry but you'll probably have to move to an assistant because you're not qualified as a teacher because you don't have your certificate."

### Challenging Behavior

#### a) Children Behavior

Negative children's behavior (high anxiety, depression, temper tantrums, acting up, lack of emotional/social development/life skills). Difficulties with patience/relating to this new generation.

"We got a challenging population, but that also relates to staff turnover because when dealing with challenging students it can be an extreme burden just on the soul of whoever's working there."

Lack of teachers for special needs kids. High turnover due to children's behaviors (temper tantrums, acting up).

"The problem is these kids are having so many behavioral problems that they don't know how to act around other kids."

Children lack attention in daycare but lack education in home daycares.

"She [daughter] is 19 months and she knows every kids name there, she can tell you it. [...]It's a smaller scale than a center. But she gets less... so it's a less education but more attention."

### b) Parents Behavior

Parents prefer cheaper care (babysitter over daycare).

Difficulties with parents (attitude, doing things differently than at home).

Parents do not see children's problematic behavior

"I think that if we changed the attitude of parents it'll change the whole scope of things. It really stems back on changing the attitude of parents of seeing us as babysitters versus childcare providers who have gone to school for this, who have wanted to do this, who this is their passion."