

## ***Statement for the National Survey of Early Care and Education***

### ***A. Justification***

#### **1. Necessity for the Data Collection**

This statement covers the main data collection effort for the National Survey of Early Care and Education (NSECE), sponsored by the Office of Planning, Research and Evaluation, Administration for Children & Families (ACF), U. S. Department of Health and Human Services (DHHS). Through an integrated set of surveys with households with young children, institutions providing care for young children, and individuals providing care for young children, the NSECE will assemble the first national portrait of the demand for and supply of early child care and education in twenty years.<sup>1</sup> NSECE will produce a comprehensive description of the range of institutional and individual providers who offer early care and education/school-age care (ECE/SA) services, and will fill a gap in our understanding of the availability of these services for families at all income levels in the United States, and the factors influencing parents' choice of early care and education for their children.

The need for the NSECE is particularly dire regarding the supply of ECE/SA services nationally, as no such data are available since 1990. Because of significant interactions between segments of this supply (e.g., Head Start programs, Pre-K programs, for-profit and not-for-profit community center-based care, and home-based care both regulated and provided by relatives, etc.), segment-specific data sources are weak substitutes for informing federal and state decisions on allocation of public dollars through direct programming, subsidies to families, and subsidies to families through tax credits. The importance of the quality of services provided to families and children, especially those with multiple risk factors and in low-income households, underscores the need to better understand the characteristics of programs providing these services in order to inform federal and state initiatives to improve them.

#### **2. Purpose of Survey and Data Collection Procedures**

##### ***Purpose of the NSECE***

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<sup>1</sup> A few main reports were issued from the 1989-90 studies. The main report from the provider survey component, the Profile of Child Care Settings, is available on-line at: [http://www.eric.ed.gov/ERICWebPortal/custom/portlets/recordDetails/detailmini.jsp?\\_nfpb=true&\\_ERICExtSearch\\_SearchValue\\_0=ED343702&\\_ERICExtSearch\\_SearchType\\_0=no&accno=ED343702](http://www.eric.ed.gov/ERICWebPortal/custom/portlets/recordDetails/detailmini.jsp?_nfpb=true&_ERICExtSearch_SearchValue_0=ED343702&_ERICExtSearch_SearchType_0=no&accno=ED343702). The ERIC item number is ED343702.

The main report for the demand survey component, the National Child Care Survey, was published in a book that is now out of print. The citation is: Hofferth, Sandra L., April Brayfield, Sharon Deich and Pamela Holcomb. 1991. *National Child Care Survey, 1990*. WashingtonDC: Urban Institute Press.

The objective of the NSECE is to document the nation's current utilization and availability of early care and education (including school-age care), and to deepen our understanding of the extent to which families' needs and preferences coordinate well with providers' offerings and constraints. The experiences of low-income families are of special interest as they are the focus of a significant component of ECE/SA public policy. A significant advantage of the NSECE over recent studies is the dual emphasis on both the usage and availability of early care and education services. The two have not been studied together in a nationally-representative study in two decades. In fact, a comprehensive nationally-representative supply-side profile has not been constructed since that time. In addition to replicating the breadth on the supply-side from the 1989-1990 studies, the NSECE design includes the family, friend, and neighbor sector of providers, which would be a significant expansion over the previous design. Also on the provider side, the previous studies included only providers that served pre-school (and possibly other) children. NSECE includes school-age only programs and other providers that serve the under-13 age group, whether or not they offer pre-school services. Another enhancement is the ability to generate national estimates describing the caregiving/instructional ECE/SA workforce through collection of personal characteristics and instructional/caregiving practices from workforce members in both home-based and center-based programs.

The state of non-parental care (including early education) for children from both the point of view of families and providers in the United States has not been assessed for over 20 years. Since the last national study, the world of work has changed, our understanding of child development has increased, and new federal and state policies and funding to support both work and early care and education and school-age care (ECE/SA) have been put into place. These policies and funding mechanisms are implemented in very different ways across states and localities. Parents have a range of options available to them, although barriers that range from cost to schedule often limit the choices that they can make. Providers of non-parental care, ranging from relatives and nannies through school-based programs deal with challenges as they attempt to meet the needs of both parents and children. As the country comes out of the recession, it is critical to develop a rich understanding of how parents devise arrangements for their children and how providers organize themselves to provide care and early education for them. Information about households with children without the paired information about who is providing non-parental care in communities will not address the needs of policymakers and administrators. Without data on both the supply and demand for early care and education and school-age care, they will be unable to make the decisions that are necessary to both support parental work and address the developmental needs of the nation's children.

The study will profile all families with age-eligible children (under age 13) and document all ECE/SA care in the United States, including center-based (including Head Start and pre-K) and licensed home-based providers, as well as other home-based providers—exempt and family, friend, and neighbor. It will also provide statistics about the ECE/SA instructional/caregiving workforce and provide important information to define child care markets and understand rate-setting.

The requirement to understand the relationship between the needs of families and the early care and education and school-age resources available to them in all 50 states and the DC area is necessary to be able to understand how non-parental care operates in different policy and socio-

demographic and geographic environments. Particularly for low-income individuals, whom this study will oversample, federal and state policies affect who has access to particular programs and whether they must pay for care. While there will not be a sufficient sample to describe the universe in each state, the study has been designed to be able to report on the key issues that are important to every state's interests.

The following questions will be able to be addressed by the data collected:

What is the relationship between what parents identify as their need and what is available to them and what they actually use? How does the supply of non-parental care meet families' demand for it?

How are government subsidies of early care and education, including Head Start, state Pre-K, and CCDF subsidies, utilized by parents? What decisions do parents make as they seek care and how are these decisions affected by federal and state policies? How much of the cost burden do parents carry?

Are subsidies distributed among eligible families equitably? At what income levels do families seem to have the most difficulty in getting the care they need for their children? What are the income cutpoints at which utilization of different types of care changes?

How do low-income families with parents who are employed or in training or education utilize the array of formal or informal early care and education and school-age care? What are the characteristics of working parents and their jobs that are associated with different utilization patterns of non-parental care? What characteristics of communities and the available care in those places support work better?

How does the distribution of different types of providers and capacity of those providers vary by geography and socio-demographic characteristics of communities? For example, what is the relative balance of informal care to formal care in different types of communities? Is formal care less available to some groups? How does licensing practice affect the availability of care?

What are the structural characteristics of early care and education and school-age care relative to quality and the potential of providers to support child development and school readiness? What is the level of participation of ECE/SA programs in quality-improvement initiatives paid for with federal and state dollars?

What is the mix of funding that providers obtain and implement in their programs? How often are multiple sources of funding blended to provide more or better care to children?

What are the characteristics of the instructional and caregiving workforce in ECE/SA? How do these characteristics vary across the country? How do qualifications of this workforce vary?

While other national surveys may be addressing some of the data needs relative to households with children, there are no data collection efforts aimed at understanding the institutions, professionals, and informal care providers. In particular, the NSECE will allow for

understanding how child care markets function and how those resources that do not fit into the market are organized. The array of firms and individuals providing early care and education is large and diverse.

The project’s investigators will prepare comprehensive reports on utilization and availability of ECE/SA and a number of special topic reports. In addition, publically-available datasets (with appropriate confidentiality protections) will be made available to other researchers to fully explore the range of issues of policy and programmatic importance. These data will have geographic and other identifiers, so that other information from Census Bureau data to policy variables can be linked.

**Overview of Data Collection Plan**

Questionnaire	Sample Source
Household Screener	Address-based Sample
Household Questionnaire	Eligible households identified through Household Screener
Home-based Provider Questionnaire	Eligible households identified through Household Screener OR Administrative Lists
Center-based Provider Screener	Administrative lists
Center-based Provider Questionnaire	Eligible programs identified through Center-based Provider Screener
Classroom/Group Staff (Workforce) Questionnaire	Completed Center-based Provider interviews

The NSECE will include six inter-related questionnaires.

- The **Household Screener** is used with all sampled households to determine household eligibility to complete the Household Questionnaire or the Home-Based Provider Questionnaire.
- The **Household Questionnaire** is to be conducted with a parent or guardian of a child or children under age 13. Eligible respondents will be identified through the Household Screener.
- The **Home-Based Provider Questionnaire** will be completed with two types of respondents. The first type is individuals who are identified on administrative lists as providing regulated or registered home-based care. The second type is individuals identified through the Household Screener as caring for children under age 13 who are not their own in a home-based setting (and who do not appear in the lists of the first type).
- The **Center-Based Provider Screener** is used with all sampled center-based providers who can be identified from administrative lists such as state licensing lists, Head Start program records, or pre-K rolls to verify the selected provider’s information and to collect any new/additional information about providers operating at that site that were not included in the sample frame.

- The **Center-Based Provider Questionnaire** is to be completed with directors of ECE/SA providers and who are determined eligible and sampled for inclusion through the Center-Based Provider Screener.
- The **Classroom/Group Staff (Workforce) Questionnaire** will be completed with classroom-assigned staff at sampled formal providers. After each Center-Based Provider Questionnaire is completed, one classroom-assigned instructional staff person from that organization will be sampled and approached for the Classroom Staff (Workforce) Questionnaire.

For the Household Interview and Home-Based Provider Interview for individuals identified through the Household Screener, we have developed a multi-mode address-based sampling (ABS) approach for the identification and interviewing of 1) households with children under the age of 13, and 2) individuals who provide home-based care for children under age 13 other than their own (and who would not appear on a state-level administrative list of ECE/SA providers). Such a design is not compromised by low land-line usage rates among the population. The ABS sample will include an oversample of low-income families.

For the Home-Based Provider Interview with individuals providing regulated or registered home-based care and for the Center-Based Provider Screener, we build a national sampling frame of all “listable” providers of ECE/SA services and sample programs from that frame. Programs determined eligible through the Center-Based Provider Screener are sampled for the Center-Based Provider Questionnaire. Respondents for the related Classroom/Group Staff (Workforce) Interview will be staff assigned to classrooms/groups in providers who completed the Center-Based Provider Questionnaire. Home-based teachers/caregivers sampled for the Home-Based Provider Interview will respond to questions parallel to those in the Classroom Staff (Workforce) Interview regarding their teaching/caregiving activities and experiences as members of the ECE/SA workforce.

### **3. Improved Information Technology to Reduce Burden**

NORC plans to use a multi-mode data collection approach that achieves significant cost efficiencies for the government while giving respondents the freedom to select the most convenient mode through which to complete their questionnaires. The Household Screener will be offered by mail, computer-assisted telephone interviewing (CATI), and computer-assisted personal interviewing (CAPI), while Household Questionnaire respondents will be offered CATI and CAPI options. Respondents to the Center-Based Provider Screener and Questionnaire, Home-Based Provider Questionnaire, and Classroom Staff (Workforce) Questionnaire may be offered CAPI, CATI and Web options. The Classroom Staff (Workforce) Questionnaire respondents will also be offered a self-administered questionnaire, if necessary. CATI, CAPI, and Websurveys all reduce respondent burden and produce data that can be prepared for release and analysis faster and more accurately than is the case with pencil-and-paper interviews. In addition, NORC will use computer-assisted recorded interview (CARI) technology as a principal means of assuring data quality. This technology helps avoid the common “validation” interview in which respondents are re-contacted to confirm key details of the original interview. Use of the technology also reduces costs to the government in conducting case validation of this type.

#### 4. Efforts to Identify Duplication

Two extant national surveys collect data on the characteristics and utilization patterns of early care and education. These surveys are the National Household Education Survey, Early Childhood Program Participation (NHES: ECPP) and the Survey of Income Program Participation (SIPP). The SIPP, conducted by the U.S. Bureau of the Census, is a multi-panel longitudinal survey of adults, and includes a Child Care Topical Module, which was designed to establish an ongoing database of child care statistics at the national level. Data from the SIPP was last collected in 2008. The SIPP is currently being re-engineered, with ongoing field tests during 2011 and 2012, and the next data collection slated for 2013.

The NHES: ECPP is a repeated cross-sectional telephone survey of households with children ages 0-6 (not yet in Kindergarten) that focuses on children's participation in formal and informal non-parental care and education programs, as well as characteristics of care and early education arrangements. It is conducted by the National Center for Education Statistics (NCES), and has been administered in 1991, 1995, 1999, 2001, and 2005. The NHES: ECPP was recently re-designed, is being field tested in 2011, and is planned for fielding in January through May of 2012. ACF has had regular communications with NCES regarding opportunities for reducing duplication between the NHES and the household survey component of the NSECE. Recent interactions between NCES and ACF regarding the NSECE and NHES include a Technical Expert Panel meeting, a discussion between the NHES and NSECE project officers, and another discussion planned for the project officers in early July, 2011, after both surveys complete analyses of their 2011 field tests. As requested by the Office of Management and Budget (OMB), ACF has reviewed documentation regarding items identified by NCES as being removed from the NHES during its redesign effort, but expected for inclusion in the NSECE Household and Provider Questionnaires. We anticipate updating that document after our next meeting with the NHES team to share our respective field test details.

The NSECE differs from these studies in several important ways:

1. **NSECE measures both supply and demand of early care and education and school-age care.** Because policymakers and administrators seek to maximize parental choice for early care and education and school-age care, it is important to understand how choices are made as well as the early care and education/school-age care (ECE/SA) options that are available in a local market. Both the SIPP and NHES: ECPP collect data solely from households. Although parental preferences and early care and education utilization are measured by the SIPP and NHES: ECPP, this information lacks the context of what was available to families. Because the NSECE will allow for a comparison of data collected from both households and ECE/SA providers, analyses of parents' ECE/SA choices as well as their decision-making process will be contextualized with detailed information about a sample of available providers in their area. We will, for example, be able to contrast a parent's assessment of available ECE/SA providers with the actual availability of ECE/SA providers. This improved data will allow for policymakers at the federal and state levels to make more informed decisions about how to improve the fit between what is needed and wanted and what is actually available.

2. **Low-income oversample.** While the NHES: ECPP and SIPP provide national estimates of child care utilization patterns, they do not oversample low-income households, with the exception of the 1990 and 1996 SIPP panels which oversampled households from areas with high poverty concentrations. As such, NHES and SIPP are limited in their ability to address key policy questions, such as differential child care utilization patterns among families by income or among low-income families who do and do not receive assistance paying for their ECE/SA arrangements. The NHES: ECPP and SIPP data are particularly limited in analyses examining patterns among subgroups that consider combinations of characteristics, such as employment *and* income or race/ethnicity *and* income. The proposed design of the NSECE will oversample low-income households to allow for these important subgroup analyses.
3. **Inclusion of family, friend, neighbor, and nanny care (FFNN).** One of the unique contributions of this study will be its ability to develop a comprehensive understanding of FFNN care. The SIPP collects data on whether care was provided by a friend, neighbor, nanny, or au pair, but does not distinguish which among these is providing care. Additionally, the SIPP does not collect data on pre-existing or personal relationships with providers or whether the provider cares for other non-related children. NHES: ECPP collects data on whether a non-relative is providing care, whether the care is provided at the child's home or elsewhere, and whether the provider was someone the child's parents already knew. However, data from this study are not collected on whether other unrelated children are cared for by the provider. Therefore, friend and neighbor and family care providers cannot be distinguished with accuracy from other non-relative providers. The NSECE will provide data to describe and analyze which American families use FFNN, and how its availability varies by community, socioeconomic status of families, and formal child care market characteristics. We will also be able to understand the demographic characteristics of the FFNN and how FFNN providers see their role in caring for children and helping the parents of children. Research on these topics is important for policymakers as they may inform decisions regarding subsidies paid and professional development available to FFNN providers.
4. **Includes school- age and multiple children in household.** The NSECE will provide detailed information about the ECE/SA arrangements of all children in a household age 13 or younger. These data will include the type (or combinations) of arrangements, descriptions of providers, number of hours of care in ECE/SA arrangements, where ECE/SA services are provided, and the cost of the ECE/SA. In contrast, NHES: ECPP only provides data on the children in the household between the ages of 0 to 6, not yet in kindergarten. Additionally, though the SIPP Child Care Module collects information about all child care arrangements for all children under 15 in the household, it does not collect key pieces of information that the NSECE will measure, including parents' strategies for gathering information about the provider, activities offered in the ECE/SA setting, and language spoken at the ECE/SA setting. Furthermore, the questions used in the NSECE to define type of ECE/SA are more detailed than those asked in the SIPP.
5. **Includes detailed parental work schedule.** One key feature of the NSECE household questionnaire is a full week's schedule of all non-parental ECE/SA (including elementary

school attendance) for all age-eligible children in the household, in addition to all employment, schooling, and training activities of each parent or regular caregiver within the household. The comprehensive schedules included in the NSECE survey, along with rich data from the household and provider surveys, will provide a highly specific aggregate description of the match between parental search requirements for ECE/SA and the actual utilization of ECE/SA. These data are more comprehensive than those collected through the SIPP Child Care Module, which addresses child care utilization and employment schedules, but not the search process or parental preferences. Additionally, though the NHES: ECPP includes items about parental employment, it does not ask parents or regular caregivers to describe a full week's work schedule. Taking into account issues of irregular hours, non-traditional hours, and commute times, the NSECE will provide valuable information about the role of ECE/SA in enabling Americans to participate in the workforce.

- 6. Allows for 51-state sample.** The NSECE will employ a 51-“state” design (50 states and the District of Columbia), which will permit analysis of policy variation across states. Many of the specific decisions states face depend on market dynamics— how to strengthen regulatory and quality rating standards, what reimbursement rates and co-pay schedules to set, and what incentives to provider organizations and individual staff can produce higher quality in a cost-effective manner. The answers depend on the interaction of supply and demand within a local market, and thus, market data must be gathered at the state and local, not just the national level. The SIPP sample only allows for state-level analyses in a sub-set of states,<sup>2</sup> while the NHES provides national cross-sectional estimates of child care demand for each of the 50 states and the District of Columbia.<sup>3</sup>

### *Advantages of Extant Surveys*

Although the unique strengths of the NSECE are of primary focus above, both the NHES: ECPP and SIPP have the advantage of collecting data over time. For example, the NHES: ECPP collects repeated cross-sectional data, allowing for an analysis of ECE utilization over time. Likewise, the SIPP collects longitudinal data from cohorts of participants, allowing for tracking of parents' ECE/SA usage and receipt of financial support for child care over time.

### **5. Involvement of Small Organizations**

Data collection for the NSECE may impact small organizations involved in the administration of center- and home-based provider surveys. All efforts will be made to minimize the burden of survey participation on these providers. Use of multiple possible modes of data collection and opportunities to designate delegates for some portions of the center-based provider interview are among the ways in which burden will be lessened.

### **6. Consequences of Less Frequent Data Collection**

The NSECE is proposed for one-time collection of data; no reduction in frequency is possible.

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<sup>2</sup> See <http://www.researchforum.org/media/forum63.pdf> for further information.

<sup>3</sup> See <http://nces.ed.gov/pubs2007/2007016.pdf> for further information.



## 7. Special Circumstances

None of the listed special circumstances apply.

## 8. Federal Register Notice and Consultations

Three requests were received for copies of the data collection instruments, but no comments were received from the public in response to the Federal Register Notice.

The NSECE has convened two meetings of its expert panel. The first meeting was held in December 2010 prior to the start of the field test. A second meeting of the expert panel was held in May 2011 to review the results of the field test in preparation for the NSECE main study data collection. Expert panel members come from research organizations and universities and include the following individuals:

### **Peg Burchinal**

[EPG](#) Child Development Institute

### **Michael Larsen**

George Washington University

### **Dwayne Crompton**

Council for Professional Recognition

### **Susanna Loeb**

Institute for Research on Education Policy & Practice, Stanford University

### **Rachel Gordon**

University of Illinois at Chicago

### **Robert Moffitt**

Johns Hopkins University

### **Joseph Hotz**

Duke University

### **Marcy Whitebook**

Center for the Study of Child Care Employment, Institute for Research on Labor and Employment  
University of California, Berkeley

### **Toni Porter**

Bank Street College of Education

### **Helen H. Raikes**

Nebraska Children and Families Foundation

### **Pam Winton**

University of North Carolina

The overall NSECE design, including sampling, questionnaires and data collection plans, was informed by discussions with an expert panel for the Design Phase of the National Survey of Child Care Supply and Demand (Design Phase). These individuals included:

### **Gina Adams**

Urban Institute

### **Douglas Besharov**

University of Maryland

### **Steve Barnett**

Rutgers University

### **Ann Collins**

Abt Associates

**Michael Lopez**  
National Center for Hispanic and Latino  
Family Issues

University of Washington

**Christine Ross**  
Mathematica Policy Research

**Marcia Meyers**

In addition to the expert panelists listed above, a number of federal representatives from ACF and ASPE/HHS, Department of Education, Office of Child Care, Office of Head Start, Bureau of the Census, USDA, and Bureau of Labor Statistics have also attended meetings and/or provided related content expertise.

Federal employees providing consultation from outside of the Department of Health and Human Services include:

**Alison Aughinbaugh**  
Bureau of Labor Statistics

Bureau of Labor Statistics

**Lynda Laughlin**  
Bureau of the Census

**Andrew Zuckerberg**

National Center for Educational Statistics

**Chris Chapman**  
National Center for Education Statistics

**Nancy Bates**  
Bureau of the Census

**Dixie Sommers**

## **9. Payment to Respondents**

ACF has proposed incentive schemes for the NSECE main study based on the outcomes of seven incentive experiments that were implemented during the field test that was conducted between February and May 2011. NORC is still in the process of analyzing the results of the field test and will provide a summary report to OMB later this summer.

### **Pre-Paid Mail Household Screener Incentive for Households**

For the Household Screener which will be mailed, we propose to include a \$2 bill in the first mailing. Results from the field test indicated that the \$1 advance outperformed the \$5 incentive in a follow-up mailing. NHES has found even greater success with a \$2 bill, the incentive proposed for the NSECE main study mail effort.

### **Pre-paid Incentive for Households Eligible through the Mail Screener**

We propose that an additional pre-paid incentive of \$5 be mailed to households that return the mail Household Screener and are eligible for the Household Survey only or for both the Household and Home-based Provider Survey. We see this incentive as a mechanism to build

cooperation with eligible households and engage respondents with the study prior to the start of in-person data collection. NORC anticipates 9,844 returned mail screeners will be eligible for the Household Survey. Prior to the start of Household Survey data collection, these households will receive an advance letter along with an enclosed \$5 bill thanking them for the return of the screener and letting them know that we would like to ask them some follow-up questions. The letter will also provide the project toll-free number so that eligible household members can call to make arrangements for participation in the interview. The use of pre-pay incentives has been repeatedly endorsed in the literature (Singer, 2002).<sup>4</sup> Some significant fraction of these cases will be attempted by Computer-assisted Telephone Interview first, going to the field only if needed. Cases where no phone number is available will be visited in-person as a follow-up to the incentive mailing.

### **Household and Home-based Provider Surveys Incentive**

In the in-person phase, we propose that an additional \$20 cash incentive *conditional upon participation* be offered to eligible households who participate in the Household or Home-Based Provider interviews. The use of conditional incentives in field studies is more generally accepted relative to such offers in other modes of data collection. “For example, promised incentives may play a more useful role in face-to-face surveys, where the presence of the interviewer may engender trust and the delay in payments is relatively brief” (Singer, 2002). This incentive will help to increase response rates and, more importantly, will decrease the amount of time that needs to be spent contacting and gaining cooperation with households. This is especially important given the limited field period for collecting data from the households. Because the Household Survey asks respondents to recount their child care schedule for the prior week, data collection must occur during a time when there are relatively few interruptions in the regular school schedule, mainly from January through May. The NSECE field test demonstrated that this restricted field period presented a greater challenge than we had initially expected. The ten-week field test presented challenges in reaching the respondents, building rapport, and completing interviews in a timely manner. After eight weeks of data collection, we had a 53 percent completion rate. If partial surveys are included, the completion rate increases to 60 percent.

During the field test, we conducted a field refusal conversion incentive experiment aimed at driving up household completion rates. This incentive was applied to households that completed the screener where eligible respondents were identified for the Household and/or Home-Based Provider questionnaires. If those eligible respondents refused the survey request and required additional conversion efforts, they were included in the *Household and Home-Based Provider Surveys Refusal Conversion Incentive Experiment*. These efforts occurred only in the field and involved two experimental conditions: households randomly assigned to experimental group 1 received a \$5 prepaid incentive, and households randomly assigned to experimental group 2 received a \$5 prepaid incentive and a \$10 promised incentive conditional upon participation and paid after completion of the interview. Paradata from the field test suggests limited difference between the experimental conditions of the Household and Home-Based Provider Refusal Conversion Incentive. Household Survey completion rates were equivalent for the two groups,

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<sup>4</sup> Singer, Eleanor. 2002. “The Use of Incentives to Reduce Nonresponse in Household Surveys.” In *Survey Nonresponse*, ed. Robert M. Groves, et al, pp. 163-178. New York: Wiley.

while Home-Based Survey completion rates were slightly higher for experimental group 1 (a result that should be tempered by the small sample size).

Our experiences during the field test illustrate the need for a more aggressive strategy to achieve higher response rates within the limited data collection main study time frame. We believe that a \$20 cash incentive offered to eligible households during an in-person visit and conditional upon participation will improve respondent cooperation with interviewers. When recommending a \$20 cash incentive conditional upon participation in the in-person mode, we take into consideration two distinctive features of the NSECE: 1) the tightly constrained data collection period, which extends from the second week in January to the middle of May, and 2) its dominance in the sample by low-income families with young children, a group that is particularly limited in its time availability.

Because of the constrained field period, we are concerned that data quality may be compromised because the data collection will be abruptly discontinued as summer vacations begin. Typically on a field mode data collection survey, we would see a tapering off of production with the final, difficult cases, often requiring two or more months of elapsed effort before cooperation can be gained. On this study, we will not be able to accommodate that extended cooperation period, so it will be crucial for response rates that we succeed in quickly gaining cooperation from individuals who might otherwise require extended elapsed time to be persuaded.

Approximately 75 percent of the NSECE household interview sample will be households who are at or below 250 percent of the Federal Poverty Level, and who, by definition, have young children who require looking after. A central question of this study is the extent to which juggling child care with employment and schooling may be a constraining factor for these families; thus it is crucial that the collected data not be differentially selected among families with fewer time constraints, such as those with reliable child care providers, “regular office” employment hours, or those who are working fewer hours or have fewer children. We note that monetary incentives have been found to be especially effective in recruiting and retaining minority respondents in interviewer-mediated studies (Singer, 2002).

## **Center-based and Home-based Provider Web Survey Incentive**

For the Center-Based Provider and Home-Based Provider (from administrative lists) Interviews, we recommend offering a \$35 gift card upon completion of the Web version of the survey in order to reduce field labor costs for formal provider data collection. Prior to the start of field data collection outreach, formal providers will be sent three mailings asking them to complete the Web survey. The first mailing will be an advance letter that explains the purpose of the study, the reason for their selection, and the survey URL. One week later a reminder postcard will be sent, again requesting their participation. The third and final mailing will follow two weeks later, informing respondents that a field interviewer will be contacting them in the near future to complete an interview in a different mode. Each of these mailings will include the offer of the \$35 incentive for Web completion.

We implemented a version of this incentive as an experiment in the NSECE Field Test. For that experiment, we randomly divided the provider respondents into a control (no incentive) and treatment (\$35 incentive offered in third mailing only) groups. We found notably higher Web completion rates in the treatment group for both center-based and home-based provider respondents. Among the home-based providers, treatment cases had a higher overall response rate. For center-based providers, the overall response rates of the treatment and control groups was nearly identical, but treatment Web complete respondents required fewer contacts from field interviewers and did not necessitate administration of the CAPI interview (both leading to cost-savings) and were completed earlier in the field period. Given the limited duration of the NSECE main study field period, the follow-up time required without the incentive will not be available for all cases. Thus, the earlier completion of Web questionnaires in response to the incentive is important for maximizing response rates.

### **10. Confidentiality of Data**

Respondents will receive information about privacy protections when they consent to participate in the study. Information about privacy will be repeated in the introductory comments of interviewers. All interviewers will be knowledgeable about privacy procedures and will be prepared to describe them in detail or to answer any related questions raised by respondents.

We have crafted carefully worded consent language that explains in simple, direct language the steps we will take to protect the privacy of the information each sample member provides. Assurances of privacy related to the household and provider interviews will be given to each respondent as he or she is recruited for the study. Parents will be assured that their responses will not be shared with their childcare providers; providers will be assured that their responses will not be shared with other providers participating in the study. All respondents will be notified that their responses will be compiled only as part of aggregate statistics across all participating sample members.

NORC's safeguards for the security of data include: storage of printed survey documents in locked space at NORC, and protection of computer files at NORC and its subcontractors against access by unauthorized individuals and groups. Protection of the privacy of individuals is accomplished through the following steps: oral permission for the interview is obtained from all respondents, after the interviewer ensures that the respondent has been made aware of the

appropriate NORC privacy information and understands that participation is voluntary, and information identifying respondents is separated from the questionnaire and placed into a separate database.

NORC has obtained a DHHS Certificate of Confidentiality to further protect the identities and information of respondents from disclosure. We have submitted consent forms and other materials with language appropriate for a project with a Certificate.

ACF intends to make available the NSECE data to policy-makers and researchers during (and well beyond) the period of the NSECE contract with NORC. Because of the integration of supply and demand data, the richness of geographic data, and the availability of publically available data sources that make providers more easily re-identified than households, we anticipate that the most analytically useful data will be released under restricted use or other protected data provisions. These have not yet been identified or arranged.

## **11. Sensitive Questions**

The Household Questionnaire, by enumerating all non-parental care and all parental work, school, and training (and commutes), potentially reveals instances of “self-care”— that is, children caring for themselves. Depending on the age of the child, this revelation could be socially undesirable. Because of the potential sensitivity of self-care for young children, the questionnaire collects self-care as a secondary activity and with the opportunity to record respondent verbatim explanations of the reason and arrangement for such care. Understanding the extent to which families must resort to self-care is of course a critical component of estimating unmet demand for ECE/SA services.

At the close of the Household Questionnaire, respondents are requested to provide consent for the project to access administrative records from government subsidy programs. Parents who grant such consent are then requested to provide the full names, dates of birth, and the street address of their children under age 13. (Please see Section H of the Household Questionnaire for these items.) Such sensitive information is required in order to match administrative records to survey data. The availability and use of child-care subsidies is a key research topic of this study. These data require extensive questionnaire batteries for collection and are even then very difficult for parents to report accurately. Collection of administrative records would improve the quality of subsidy-related analyses that could be completed using the NSECE data. Respondents are free to refuse consent for records access, and in this case will not be asked for personal identifying information.

The Home-Based Provider and Center-Based Provider Questionnaires ask for street address (or nearest street intersection) for the purposes of geographic mapping. Because households typically use early care and education providers who are located in close proximity to their home address, understanding the locations of households and their providers is essential to depicting the supply and demand for early care and education across the nation.

The Home-Based Provider Questionnaire, especially for individuals providing informal care, may raise additional concerns about disclosure, such as: income that is not fully reported for tax purposes, individuals without full work permission in the U.S., or providing ECE/SA services without full compliance with licensing or other requirements. The questionnaire therefore very

intentionally avoids any reference to such issues as income taxes, visa status, or licensing status. We view it as essential in gaining cooperation and respondents' trust to be able to assure them that no questions will be asked on these potentially sensitive topics.

The Classroom Staff (Workforce) Questionnaire has few items of great sensitivity. A mini-depression scale is included, but the items are not identified as such. Some opportunities exist for a respondent to speak ill of his or her center or center managers, but these are relatively non-specific and non-threatening.

## 12. Estimation of Information Collection Burden

Estimated number of burden hours to complete the data collection:

Instrument	Annual Number of Respondents	Number of Responses per Respondent	Average Burden Hours per Response	Estimated Annual Burden Hours	Average Hourly Wage Rate	Total Cost Burden
Household Screener	79,818	1	.1	7,982	\$16.27	\$129,867
Household Interview	15,586	1	.75	11,690	\$12.20	\$142,618
Home-Based Provider Interview	10,710	1	.5	5,355	\$9.28	\$49,694
Center-Based Provider Screener	19,211	1	.1	1,921	\$14.82	\$28,469
Center-Based Provider Interview	12,520	1	.6	7,512	\$20.65	\$155,123
Classroom/Group Staff Interview	9,390	1	.33	3,099	\$12.35	\$38,273
Total				37,559		\$544,044

## 13. Cost Burden to Respondents or Record Keepers

Respondents for this survey will not incur any capital, start-up, operation and maintenance, or purchase of service costs.

#### **14. Estimate of Cost to the Federal Government**

The total estimated cost of the NSECE data collection is \$16.5 million. This cost includes survey management, data collection, and other tasks involved in implementing the main data collection effort. Because this is a one-time data collection with a duration of approximately nine months, the annual estimated cost is equal to the total estimated cost of \$16.5 million.

#### **15. Change in Burden**

No previous estimate has been made for respondent burden on the NSECE main study.

#### **16. Plans and Time Schedule for Information Collection, Tabulation, and Publication**

Data collection for the main study is slated to begin in October 2011. The time schedule for testing, data collection, tabulation and report delivery to ACF is listed below:

<b>Task</b>	<b>Date</b>
Design Phase	October 2007 – January 2010
Cognitive testing of Design Phase instruments	April 2008 – January 2009
Design Phase Feasibility Test	April 2009 – July 2009
NSECE Field Test	February 2011 – May 2011
Construct provider frame	April 2011 – July 2011
Modify programmed instruments with field test revisions	June 2011 – August 2011
Receive OMB clearance	September 2011
Make revisions in response to OMB requests	September – October 2011
Conduct data collection	October 2011 – June 2012
Data processing	January 2012 – September 2012
Data analysis and report writing	October 2012 – September 2014
Release of publicly available data	June 2014

#### **17. Reasons to Not Display OMB Expiration Date**

Does not apply.

#### **18. Exceptions to “Certification for Paperwork Reduction Act Submissions,” OMB Form 83-I**

We do not have any exceptions in Item 19, “Certification for Paperwork Reduction Act Submissions,” of OMB form 83-I.