

# **The 2024 National Survey of Early Care and Education**

**OMB Information Collection Request  
0970 - 0391**

## **Supporting Statement Part B**

**Originally Approved: June 2023  
Current Revision: September 2024**

**Type of Request: Revision**

Submitted By:  
Office of Planning, Research, and Evaluation  
Administration for Children and Families  
U.S. Department of Health and Human Services

4<sup>th</sup> Floor, Mary E. Switzer Building  
330 C Street, SW  
Washington, D.C. 20201

Project Officers: Ivelisse Martinez-Beck and Ann Rivera (OPRE)

**Alternative Supporting Statement for Information Collections Designed for  
Research, Public Health Surveillance, and Program Evaluation Purposes**

## **Part B**

### **B1. Objectives**

#### *Study Objectives*

The National Survey of Early Care and Education (NSECE) is designed to describe the landscape of early care and education (ECE) services in the United States and to support analyses of the association between the use of ECE services by families and the availability of such services offered by providers. The Administration for Children and Families (ACF) has contracted with NORC at the University of Chicago to complete this work.

Data collection for the 2024 NSECE began in November 2023, following OMB approval. This request is specific to the addition of two 2024 NSECE Longitudinal Follow-ups. **Note for review of this request:** Supporting Statements A and B are written to break out information about the currently approved 2024 NSECE, which we request to continue approval for with no changes, and the 2024 NSECE Longitudinal Follow-ups, which are new to this effort, and we are currently submitting for review and approval.

The initial effort aims to meet the following three main objectives:

- to compare the supply of center-based providers, home-based providers (including unlisted home-based providers providing non-parental care for pay or for free), and the early childhood workforce from 2012 to 2024;
- to understand the characteristics, schedules, preferences, and choices of non-parental care among households with children and how these may have changed in this 12-year period; and
- to document how the field of ECE responded to policy initiatives during the period between 2012 and 2024, including changes in supply and demand during the COVID-19 pandemic starting in 2020.

To support these objectives, the 2024 NSECE is collecting information through a set of four inter-related surveys on (1) ECE services available (supply) to families with children ages birth through 5 years, not yet in kindergarten; (2) characteristics of the workforce providing these ECE services; and (3) households with children under age 13. The local nature of ECE usage necessitates collecting and analyzing data in matched geographic areas. In order to strengthen the tie between the use and provision of ECE services and to support the main objectives of the 2024 NSECE, we use a sampling approach in which sampled units from all four surveys are co-located in small geographic areas.

This request is specific to the addition of two 2024 NSECE Longitudinal Follow-ups. The two main objectives of follow-up efforts include the following:

- to document how households learn about and make use of financial assistance in seeking and selecting ECE, with additional focus on paid individual care arrangements; and

## Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

- to document patterns of retention and attrition among individuals who were employed in center-based ECE programs in 2024.

To support these objectives, the 2024 NSECE Longitudinal Follow-ups will collect information through two longitudinal follow-up surveys on (1) low- and middle-income households and households of any income level who had reported using paid care by an individual for a child under age 13, who responded to the 2024 NSECE; and (2) individuals who were employed in center-based ECE programs in 2024 and who responded to the 2024 NSECE. The 2024 NSECE Longitudinal Follow-ups will build on the 2024 NSECE, which uses a sampling approach in which sampled units from both surveys are co-located in small geographic areas to account for the local nature of ECE usage.

### *Generalizability of Results*

#### 2024 NSECE (currently approved information collection, no revisions)

The NSECE's household survey component is intended to produce nationally representative estimates of ECE usage by all families in the United States with age eligible children (under 13 years). Survey results are therefore generalizable to two populations: the population of all households with eligible children, and the population of all children under 13. The household survey is also intended to produce nationally representative estimates of the characteristics of individuals who do not appear on state or national lists of ECE providers but do care at least 5 hours per week in a home-based setting for children of eligible age who are not their own. These providers are referred to as unlisted home-based providers (UHBs).

The NSECE's ECE provider survey component is intended to produce nationally-representative estimates of the characteristics of the following groups of providers or workforce members:

- individuals who provided paid care for children under the age of 13 in a residential setting as of 2024 (Home-based Providers);
- providers of care to children ages 0 through 5 years of age (not yet in kindergarten) in a non-residential setting as of 2024 (Center-based Providers); and
- individuals employed in center-based child care programs working directly with children age 5 and under, not yet in kindergarten, in classrooms as of 2024 (workforce [classroom staff]).

#### 2024 NSECE Longitudinal Follow-ups

The 2024 NSECE Longitudinal Household Follow-up will sample from the 2024 NSECE Household respondents among households (1) with incomes under 300% of the federal poverty line (FPL), and/or (2) who had used paid care by an individual in 2024 for at least one resident child under the age of 13 years. Survey results from the household follow-up are therefore generalizable to two populations: the population of all households with incomes under 300% FPL and at least one resident child under the age of 13 years in 2024, and the population of all households utilizing paid care by an individual in 2024 with at least one resident child under the age of 13 years. These two populations are not mutually exclusive.

The 2024 NSECE Longitudinal Workforce Follow-up will seek to interview all individuals who completed the 2024 NSECE Workforce (Classroom Staff) survey. The survey results will be representative of all individuals who were employed in a center-based child care program working directly with children age

## Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

5 and under, not yet in kindergarten, in classroom-assigned roles as of 2024. These individuals may or may not be in classrooms in 2025.

### *Appropriateness of Study Design and Methods for Planned Uses*

#### 2024 NSECE (currently approved information collection, no revisions)

The NSECE's design ensures that nationally representative samples are created for households that could utilize ECE services, ECE providers (both listed and unlisted), and workforce who are working in the center-based classrooms. Use of area sampling for both the household and provider samples allows us to document the interaction of supply and demand for ECE in local communities, while simultaneously capturing data that efficiently construct national estimates. Finally, the creation of sampling weights ensures that unbiased survey estimates of household and provider characteristics can be produced.

#### 2024 NSECE Longitudinal Follow-ups

The goal of the 2024 NSECE Longitudinal Follow-ups is to describe the experiences of households and the ECE workforce over time. To do so, the follow-ups will re-interview households and individuals who were employed in center-based ECE programs in 2024 that completed interviews in the 2024 study, regardless of their ECE-related behaviors (such as use of care or employment in care) at the time of the follow-ups. Importantly, the study does not include households who have had their first child born between 2024 and 2025 (as they would not have been eligible for the 2024 NSECE if they did not have a child in the household in 2024), nor does it include members of the center-based ECE workforce who joined the workforce between 2024 and 2025. Therefore, the study is not intended to describe all households or the overall ECE workforce as of 2025. This and other limitations of the follow-ups will be included in written products associated with the study.

As noted in Supporting Statement A, this information is not intended to be used as the principal basis for public policy decisions and is not expected to meet the threshold of influential or highly influential scientific information.

## **B2. Methods and Design**

### *Target Population*

#### 2024 NSECE (currently approved information collection, no revisions)

The target population for the 2024 NSECE's household survey component is households with at least one child below the age of 13. There are an estimated 28.9 million such households in the US (source: ACS PUMS 5-year data, 2020 vintage). Because households with children that have low incomes are of great interest to researchers and policy makers this subpopulation will be oversampled by the NSECE. There are an estimated 7 million households with eligible children and household incomes below \$40,000 (source: source: ACS PUMS 5-year data, 2020 vintage). In line with the target population, the ultimate sampling unit is the household.

The 2024 NSECE's provider survey component targets three distinct populations, as described in Section B1. Based on figures from the 2019 NSECE, estimated population sizes are 5.2 million individuals for

## **Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes**

listed and unlisted Home-based Providers; 121,000 programs for Center-based Providers; and 1.36 million individuals for Center-based Workforce (Classroom Staff). In addition, the NSECE distinguishes between two types of paid Home-based Providers: (i) listed Home-based Providers, who are licensed, license-exempt, registered, regulated, and otherwise listed home-based ECE providers identified from state or national administrative lists, and (ii) unlisted Home-based Providers, who do not appear on any administrative lists and are identified from the household screener in the NSECE survey. Of the estimated 5.2 million Home-based Providers, about 91,000 were listed Home-based Providers, about 1,050,000 were paid unlisted Providers, and about 4,030,000 were unpaid unlisted Home-based Providers.

### 2024 NSECE Longitudinal Follow-ups

The 2024 NSECE Longitudinal Follow-ups study aims to collect data from households and individuals that completed interviews in the 2024 study, regardless of whether or not they are using ECE services or participating in the ECE workforce at the time of the follow-up surveys. The follow-up calls for one interview each with sampled households or individuals, to be fielded in January 2025 through December of 2025.

The target population for the 2024 NSECE Household Longitudinal Follow-up survey component is households with household income under 300% FPL, and/or households that were using paid care by an individual in 2024 and had a child under the age of 13 in the household at that time. The target population for the 2024 NSECE Workforce Longitudinal Follow-up survey component is individuals who were working in a center-based classroom-assigned role with at least one child age 5 years or under, not yet in kindergarten, in 2024.

### *Sampling and Site Selection*

#### 2024 NSECE (currently approved information collection, no revisions)

The household survey sample was selected in three stages. In the first stage, 217 primary sampling units (PSUs) which are either individual counties or groups of smaller counties in each of the 50 states and the District of Columbia were selected; the sampling frame for this stage is a list of all counties in the US with relevant county level Census data. In the second stage, 741 secondary sampling units (SSUs) which are either individual census tracts or groups of small census tracts selected within selected PSUs; the frame for this stage was created from the most up-to-date list of Census tracts within all selected PSUs along with relevant tract level Census data. In the third and final stage, household addresses were selected and then screened for the presence of eligible children and/or individuals who provide care to children who are not their own at least 5 hours per week. The sampling frame for the third stage sample is an instance of the United States Postal Service (USPS) computerized delivery sequence file (CDSF) provided by NORC's vendor. The target final sample size is 10,000 survey completes from eligible households, of which at least 4,000 are households with incomes below \$40,000. The household survey is also projected to provide approximately 1,200 additional survey completes from unlisted home-based providers.

The sampling frame for the listed provider surveys (center-based provider survey and home-based provider survey for listed providers) was constructed by gathering state-level lists of center-based and

## **Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes**

home-based providers from the relevant state agencies. This effort included obtaining publicly available online administrative lists and having individualized follow-up conversations with state administrators based on the publicly available information. We supplemented these with national lists of ECE providers, for example, lists from the Office of Head Start, the accreditation list from the National Association for the Education of Young Children, and ECE provider lists maintained by federal agencies such as the Department of Defense and the General Services Administration. An important supplemental source was a commercially available list of all K-8<sup>th</sup> grade elementary schools in the country; many of these locations potentially have early childhood programs that do not appear on state lists.

The listed provider sample was also selected in three stages. The PSUs are the same as those selected for the household survey. The SSUs are larger in area but geographically connected to household SSUs. In the third stage, a sample of physical locations where at least one eligible provider is located was selected from each selected SSU. The target final sample size is 12,760 survey completes, of which about 8,400 are center-based providers, and 4,360 are listed home-based providers.

The center-based provider screener and questionnaire includes questions about a randomly selected classroom or group within the program. The respondent is then asked to enumerate all personnel who are primarily assigned to that classroom. For the workforce (classroom staff) survey, we randomly select at least one staff member from among those enumerated as belonging to the randomly selected classroom. The target final sample size is about 7,420 survey completes.

Data collection is in progress on all sample types as expected and as of July 2024; we do not have evidence to revise any of the projected numbers at this time.

### 2024 NSECE Longitudinal Follow-ups

The follow-up household survey sample will be selected from households completing the 2024 NSECE household interview. Households that completed the 2024 NSECE survey will be eligible for selection in the 2024 NSECE Longitudinal Follow-up if (1) the household is under 300% FPL; and/or (2) the household used paid care by an individual for a resident child under the age of 13 in 2024. Final counts of households in the 2024 NSECE meeting these criteria will not be known until data collection is complete in fall 2024. The Follow-up sample will be up to 5,000 households including all households reporting use of paid care by an individual and households with incomes under 300% FPL. We will use contact information from the 2024 NSECE to conduct outreach to sampled households.

All individuals completing the 2024 NSECE Center-based Workforce survey interview will be recruited for the 2024 NSECE Workforce Longitudinal Follow-up survey. We will use contact information from the 2024 NSECE to conduct outreach to sampled individuals. The target final count of completed interviews for the 2024 NSECE Workforce (Center-based) survey is 7,420. The target selected sample for the 2024 NSECE Workforce Longitudinal Follow-up is 7,420.

**Alternative Supporting Statement for Information Collections Designed for  
Research, Public Health Surveillance, and Program Evaluation Purposes**

**B3. Design of Data Collection Instruments**

*Development of Data Collection Instruments*

2024 NSECE (currently approved information collection, no revisions)

The majority of items in the four questionnaires come from other studies that have successfully fielded the items to understand ECE supply or with comparable populations, especially including the 2019 and 2012 NSECE instruments themselves. In addition, we received feedback on the submitted questionnaires from several individuals who have conducted surveys with ECE provider populations (regarding the appropriateness of questionnaire design for collecting high quality data), as well as from ACF program staff (regarding the relevance of questionnaire design to achieve the agency’s objectives and meet the data analyses goals). We also conducted cognitive interviews with members of the target populations to understand issues such as ability to recall requested information or to populate code frames within the questionnaire. Through these consultation efforts, the study team did not request the same information from more than 9 individuals and therefore the Paperwork Reduction Act was not implicated by these activities.

The design takes a multi-layered approach to identifying and minimizing measurement error, beginning with using well-tested questions with high-quality benchmarking data wherever possible. This ensures that questions are functioning as anticipated and that collected data can be compared with other sources, including the 2012 and 2019 NSECE data, as well as other large scale economic, education and social surveys (e.g., Federal Reserve Board’s Survey of Household Economics and Decision-making, National Household Education Survey, 2019), and other ECE provider and workforce (classroom staff) surveys fielded at national and state levels (e.g., The Massachusetts Early Education and Care Workforce Survey and The State of Minnesota’s Formerly Licensed Child Care Provider Survey). Questionnaire functioning is being monitored during data collection for evidence of respondent miscomprehension, such as misplaced decimals, high incidence of break-offs at individual items, or unusual distributions on key variables. We are also monitoring data collection for evidence of systematic patterns of non-response, and for internal consistency of responses.

<b>Study Objective</b>	<b>Instrument</b>
to compare the supply of center-based providers, home-based providers (including unlisted home-based providers providing non-parental care for pay or for free), and the early childhood workforce from 2012 to 2024;	2024 NSECE Center-based Provider Screener and Questionnaire (Instruments 3 and 3S), 2024 NSECE Home-based Provider Screener and Questionnaire (Instruments 2 and 2S), and 2024 NSECE Workforce (Classroom Staff) Questionnaire (Instruments 4 and 4S)
to understand the characteristics, schedules, preferences, and choices of non-parental care among households with children under age 13-years and how these may have changed in this 12-year period; and	2024 NSECE Household Screener and Questionnaire (Instruments 1 and 1S)
to document how the field of ECE responded to policy initiatives during the period between 2012 and 2024, including changes in supply and demand during the COVID-19 pandemic starting in 2020	2024 NSECE Household Screener and Questionnaire (Instruments 1 and 1S), 2024 NSECE Center-based Provider Screener and Questionnaire (Instruments 3 and 3S), 2024 NSECE Home-based Provider Screener and Questionnaire (Instruments 2 and 2S), and 2024 NSECE Workforce (Classroom Staff) Questionnaire (Instruments 4 and 4S)

**Alternative Supporting Statement for Information Collections Designed for  
Research, Public Health Surveillance, and Program Evaluation Purposes**

2024 NSECE Longitudinal Follow-ups

The development of the 2024 NSECE Longitudinal Follow-up questionnaires followed the same procedure as for the 2024 NSECE questionnaires, with respect to the solicitation of feedback, conducting cognitive interviews, and the overall approach to design. The 2024 NSECE Longitudinal Follow-ups have several additional objectives and two new instruments.

Study Objective	Instrument
to document how low-income households learn about and make use of financial assistance in seeking and selecting ECE, with additional focus on paid individual care arrangements	2024 NSECE Household Longitudinal Follow-up Questionnaire
to document patterns of retention and attrition among individuals who were employed in center-based ECE programs in 2024	2024 NSECE Workforce Longitudinal Follow-up Questionnaire

**B4. Collection of Data and Quality Control**

2024 NSECE (currently approved information collection, no revisions)

NORC at the University of Chicago, a contractor, is collecting data from households, center-based providers, home-based providers (listed and unlisted), and workforce (classroom staff). Below we describe the contacting approach, which is informed by and similar to the one we employed successfully in the 2012 and 2019 NSECE data collection efforts. We are using a multi-mode contacting approach that attempts to complete as many questionnaires in the most cost-efficient mode possible resorting to higher-cost modes, such as field interviewer phone and in-person completion, to address nonresponse in later stages. The multi-mode approach has two primary benefits: 1) it saves costs by exploiting lower-cost modes, and 2) it improves response rates by offering respondents a range of participation options that better accommodate their preferences including timing, mode, contact with interviewers, and other data collection factors.

For the household survey, the screener questionnaire is available for completion online or through a paper-and-pencil self-administered questionnaire in both English and Spanish. Households received an initial series of three mailings to encourage completion of the screener before field interviewers began outreach in January 2024. These included a survey invitation letter, a thank you/reminder postcard sent a week later, and a follow-up letter, mailed two weeks after the postcard. In January, all cases that had not screened as ineligible were assigned to field interviewers. A new set of mailings was sent in January 2024 to households that screened in as eligible and those households that did not respond to our earlier requests. These letters informed households that a field interviewer would be contacting them soon to assist them in completing the screener (if needed) and the survey. If a household is also eligible for the unlisted home-based provider survey, the interviewer prompts for completion for that as well. Additional mailings and emails may be sent during data collection to address common reasons for



## **Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes**

refusal or other barriers to participation. (See Appendix A and A-S for Household Respondent Contact Materials).

The home-based provider, center-based provider, and workforce (classroom staff) questionnaires are programmed for completion online by the respondent or by phone or in person with an interviewer. The home-based and workforce (classroom staff) questionnaires are available in English or Spanish. Providers and classroom staff are generally contacted first by mail and email (when available).

The initial outreach series consists of three contacts: a survey invitation letter or email, a thank you/reminder postcard sent a week later, and a follow-up letter, mailed two weeks after the postcard. These contacts explain the purpose of the study and invite providers and classroom staff to complete the questionnaire online. If a survey is completed during these initial weeks, that case is pulled out of future mailings. After the initial contacts, field interviewers follow up with providers and classroom staff by phone and in person as necessary. (See Appendix C and C-S for Unlisted Home-based Provider Survey Contact Materials, Appendix D and D-S for Listed Home-based Provider Survey Contact Materials, Appendix F and F-S for Center-based Provider Contact Materials and Appendix H and H-S for Workforce (Classroom Staff) Respondent Contact Materials).

Interviewers answer questions about the study, encourage people to complete the survey, and provide any technical assistance that respondents may need to access and complete the online questionnaire. Interviewers are also able to complete the interview by phone or in person if needed. If a field interviewer is already at a center and completes the survey, they attempt to also complete the workforce (classroom staff) survey in person if possible. If this occurs, no mailings are sent to the sampled workforce member. Additional mailings and emails may be sent during data collection to address common reasons for refusal or other barriers to participation.

### 2024 NSECE Longitudinal Follow-ups

For the 2024 NSECE Longitudinal Follow-ups, NORC at the University of Chicago, a contractor, will be collecting data from households and classroom staff who participated in the 2024 NSECE. Below we describe the proposed contacting approach which is similar to the one we employed successfully in the 2012 and 2019 NSECE data collection efforts and are currently implementing in the 2024 NSECE.

The two follow-up questionnaires will be programmed for completion online by the respondent or by phone or in-person with an interviewer. The household and workforce questionnaires will be available in English or Spanish. Sampled households and individuals will be contacted first by mail and email (when available). Because eligibility for the follow-ups is determined by participation in the 2024 NSECE, our contact materials and approaches can focus on motivating the sample to participate from the outset.

The initial outreach series will consist of three contacts: a survey invitation letter or email, a thank you/reminder postcard sent a week later, and a follow-up letter, mailed two weeks after the postcard (see Appendix N and N-S for Household Follow-up Respondent Contact Materials and Appendix P and P-S for Workforce Follow-up Respondent Contact Materials). These contacts will invite sampled

## **Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes**

households and individuals to complete the questionnaire online. After the initial contact, field interviewers will follow up with households and classroom staff by phone. The interviewers will answer questions about the study, encourage people to complete the follow-up survey, and provide any technical assistance that respondents may need to access and complete the online questionnaire. Interviewers will also be able to complete the interview by phone if needed. For households and classroom staff who do not have a good mailing address, interviewers will make contact by phone first to introduce the follow-up study and attempt to collect new contact information to send study materials. Additional mailings and emails may be sent during data collection to address common reasons for refusal or other barriers to participation. Limited in-person outreach will be implemented to address issues of sample representativeness.

### **Data Collection Monitoring**

#### 2024 NSECE (currently approved information collection, no revisions) and 2024 NSECE Longitudinal Follow-ups

A series of consistency and range checks are or will be built into the questionnaires to prevent invalid responses from being recorded. The data collection team thoroughly tested programmed questionnaires prior to the start of data collection and will thoroughly test the follow-ups. This testing includes a review of the data to confirm that responses are being recorded as expected. Throughout data collection, we monitor the functioning of the questionnaire to detect potential technical issues and possible misinterpretation of questions by respondents. We will produce regular data quality assurance reports that collate questionnaire data across variables of high analytic value to help identify such issues and allow us to take corrective action.

In addition to questionnaire functioning, the project monitors data collection progress carefully throughout the field period to achieve good response rates and representative data. Daily production reports will show how data collection is progressing across each sample and enable us to identify problem areas and take remedial action quickly when needed. These reports also allow us to monitor completion rates by sample subgroups in order to protect against bias in the sample. When we detect that a subgroup is completing surveys at lower rates, we can adjust our field procedures to boost completion among that group.

To monitor field interviewer performance specifically, the project developed a series of performance metrics built from multiple data sources (e.g., item non-response rates, questionnaire completion rates, case prompting rates). These metrics, produced weekly, show where interviewers are deviating from the norm on key performance measures, thereby revealing areas where re-training or special coaching may be needed. The project supplements these metrics with computer-assisted recorded interviewing (CARI). The project listens to CARI recordings to validate interviews and ensure that key questionnaire items are being administered consistently across interviewers.

## Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

### B5. Response Rates and Potential Nonresponse Bias

#### *Response Rates*

##### 2024 NSECE (currently approved information collection, no revisions)

As a measure of data quality, response rates are calculated for multiple stages of data collection, including both the completion rate for the household/provider eligibility screener and the interview completion rate of selected households/providers/workforce. The screener completion rate is calculated as the number of households/providers that completed a screener or for which eligibility/non-eligibility was determined divided by the total number of households/providers selected. In turn, the interview completion rate is the number of eligible households/unlisted home-based and listed providers that completed an interview divided by the number of eligible households/unlisted home-based and listed providers. Workforce survey interview completion rate is the number of workforce survey completes divided by the number of eligible workforce sample. Based on prior experience with fielding the NSECE in 2012 and 2019 we could anticipate an 85% screener completion rate for both households and unlisted home-based providers and a 75% interview completion rate for households and 60% interview completion rate for unlisted home-based providers; and anticipate an 87% screener completion rate, a 70% interview completion rate for listed providers, and 74% interview completion rate for workforce. However, data collection has been slower than initially anticipated. Difficulties contacting respondents may result in lower screener completion rates or interview completion rates, perhaps up to 5% lower than prior experience.

##### 2024 NSECE Longitudinal Follow-ups

We are targeting 2024 NSECE Longitudinal Follow-up completion rates of 75 percent for each sample type and have presented burden estimates assuming 75 percent of the eligible sample participates in data collection. Ensuring that the achieved sample is representative based on 2024 characteristics will be even more important than interview completion rates in ensuring that representative estimates can be generated from collected data. Since our goal is to interview sample members participating in the 2024 NSECE, we do not propose to include as stages of response the participation rates in the 2024 NSECE.

#### *NonResponse*

##### 2024 NSECE (currently approved information collection, no revisions)

Sub-group response rates will be monitored throughout data collection for all samples to identify potential non-response bias. Written and interviewer outreach will be increased to address disparities in participation, especially for subgroups of particular analytic interest. To date, slower data collection has not revealed systematic patterns of non-response in household, listed home-based, unlisted home-based, or center-based samples. The workforce sample is too early in data collection to document systematic non-response.

## **Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes**

Unit non-response in the household/provider survey will be handled by weight adjustments. Where possible, item non-response will be handled via imputation. The exact method of imputation chosen will vary by data item based on prior research regarding the most appropriate method.

### 2024 NSECE Longitudinal Follow-ups

Sub-group response rates will be monitored throughout data collection for all samples to identify potential non-response bias. Written and interviewer outreach will be increased to address disparities in participation, especially for subgroups of particular interest.

Unit non-response in the follow-up surveys will be handled by weight adjustments. Where possible, item non-response will be handled via imputation. The exact method of imputation chosen will vary by data item based on prior research regarding the most appropriate method.

## **B6. Production of Estimates and Projections**

### 2024 NSECE (currently approved information collection, no revisions)

The household survey data will be used to generate nationally representative estimates of families' child care usage, both for internal use by ACF and by the broader research community and public. To produce unbiased, nationally representative estimates, survey weights will be created. Because estimates for both household and child characteristics are desired, weights will be created both for households and for individual children with eligible age within selected households.

Household- and child-level base weights will be created from the household's selection probability at each stage of sampling. These base weights are adjusted to account for eligibility and non-response. After eligibility and non-response adjustment, the weights are then calibrated to control totals for children under 13 within cells defined by state, MSA status (MSA or not MSA), race ethnicity, age group (0-4 and 5-12), and sex (male/female). The control totals will be derived from ACS Public Use Microsample (PUMS) data. This calibration step ensures that the estimated number of children under 13 within these cells will align with reliable Census totals. As a final step, large weight values will be truncated to reduce the influence of extreme weights on standard errors.

Survey weights for UHBs will be produced in a manner similar to the household survey weights. Base weights will be created from a household's probability of selection in each stage of sampling, and subsequently adjusted for eligibility, non-response, and the selection of only one UHB in selected households with more than one eligible UHB provider. Because there are no known control totals for the number of unlisted home-based providers, no calibration step is performed.

Estimates from the provider survey component are intended to be generalizable to the three groups of ECE providers described in section B1. Sampling weights will be based on the selection probabilities at each sampling stage, with adjustments made for eligibility and non-response. Use of the sampling weights will enable unbiased estimation of the descriptive statistics for each of the three populations of providers.

## Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

### 2024 NSECE (currently approved information collection, no revisions) and 2024 NSECE Longitudinal Follow-ups

When producing estimates from NSECE data, sampling variances are estimated using the Taylor series method as an estimate of sampling error. Strata and cluster variables will be used in conjunction with the sampling weights to produce design-based standard errors. In addition to published estimates, we will also produce public use files that contain survey weights, stratum and cluster identifiers, and survey data. In order to protect privacy, all geographic identifiers will be removed, and some variables will be recoded (e.g., by top-coding of income variable). Users will also be provided with instructions on the appropriate use of survey weights and the calculation of standard errors in standard statistical software packages such as SAS™ and Stata™.

### 2024 NSECE Longitudinal Follow-ups

Estimates will be produced for official external release by OPRE and are intended to be generalizable to the two groups described in section B1. Sampling weights for the follow-up surveys will be based on the weights developed for the 2024 NSECE, with adjustments made for non-response in the follow-ups. Because the follow-up surveys re-interview respondents from the 2024 NSECE, they will be able to draw on a rich set of household and workforce characteristics collected in the 2024 study – in addition to design variables such as strata and clusters – to correct for panel attrition. These auxiliary variables will be used to form weighting adjustment cells comprising both respondents and non-respondents. The weighting adjustment is then the inverse of the response rate in each cell. Use of the sampling weights will enable unbiased estimation of the descriptive statistics for each of the two populations. Strata and cluster variables will be used in conjunction with the sampling weights to produce design-corrected standard errors.

As with the 2024 NSECE, selected data from the information collection will be made available to the public for secondary analysis. Datasets will include sampling weights as well as strata and cluster variables to allow analysts to produce design-corrected standard errors for their analysis. Study documentation will describe how these variables can be used with commonly available statistical software to produce valid population estimates.

## **B7. Data Handling and Analysis**

### *Data Handling*

Procedures to minimize errors in the data begin with designing questionnaires which will collect accurate data and which have skip patterns that minimize situations where respondents are unable to navigate appropriately. Questionnaire programming builds on this through techniques such as ranges for numeric items, presenting in words any numbers entered, and the inability of data entry of invalid codes for fixed-coded items. Coding of verbatim responses undergoes 100 percent double-blind coding with reconciliation, and error rates exceeding 3 percent trigger a second round of more expert coding. Variable creation and analysis also have strict quality assurance protocols with review at a specifications

## **Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes**

development stage, review of statistical programming code, and then verification of analytic output (including against comparison data when available).

The NSECE data files are developed with a strong commitment to transparency. Raw data, prior to any edits or imputation are always available to interested data users, potentially through restricted use mechanisms provided by the agency. If editing or imputation are elected for specific variables, the contributions of those edits or imputations are easily visible to data users who might wish to critique or replicate the edits. We will not impute raw data (such as reports of income) but may impute created variables (such as estimated household income to poverty ratio) for completeness.

### *Data Analysis*

#### 2024 NSECE (currently approved information collection, no revisions)

The 2024 NSECE has been pre-registered with Clinical Trials. The 2024 NSECE analyses will focus on the following: 1) understanding how the supply of center-based providers, home-based providers, and the early childhood workforce changed from 2012 to 2024; 2) understanding the characteristics, schedules, preferences, and choices of non-parental care among households with children and how these may have changed in this 12-year period; and 3) documenting how providers, the workforce, and households have responded to policy developments that were implemented during this 12-year period. A number of analyses will thus compare statistics generated from the same or similar survey items that were fielded in the 2012 NSECE and 2019 NSECE. Such items may describe supply characteristics, such as whether a provider was in operation or the number and ages of children served, or household or child characteristics, such as household income or participation in regular ECE.

In addition, the 2024 NSECE will introduce new items to address recent research developments or to track the financial, administrative, and operational experiences of providers or households that came about as a result of the legislative responses to the pandemic or other major economic events. Because the main analytic objective is descriptive in nature, statistics will be focused on weighted frequencies, means, and proportions.

#### 2024 NSECE Longitudinal Follow-ups

Analytic goals of the 2024 NSECE Household Longitudinal Follow-up include documenting patterns of household engagement with seeking and using financial assistance for ECE and experiences with using individual paid care. Analyses will use information from the 2024 NSECE Household survey and the Longitudinal Follow-up to explore patterns in household search and selection, use of paid individual care, and use of financial assistance across households and potential household subgroups. For example, analyses may explore differences in search and selection patterns by parental employment or geographic region. Similarly using geographic region, analyses could observe whether parents are aware of free local pre-kindergarten or Head Start in areas where it is available.

Analytic goals of the 2024 NSECE Workforce Longitudinal Follow-up include documenting patterns of retention and attrition, educator ECE career trajectories, and describing year-to-year variation in

## Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

experiences among workers remaining in ECE from 2024 to 2025. Analyses will use information from the 2024 NSECE Workforce survey and the Longitudinal Follow-up to explore patterns in retention and attrition by center and educator characteristics, such as center auspice and workforce supports in 2024. For educators who remain in their center in the follow-up period, analyses can explore stability of experiences over time. For educators who have moved to a new setting, analyses can test whether the educator has experienced differences in workforce supports or job conditions. For educators who have left the ECE field in the follow-up period, analyses can explore where ECE classroom workers go when leaving the field, and the center and classroom contexts from which those workers left.

### *Data Use*

The NSECE has established a deep library of tools for data users and others to understand how to properly interpret, analyze, and evaluate information from the previous collections. These include user guides, tutorials on how best to use the data, and analytic products that describe key findings. All materials for the 2024 NSECE and the 2024 NSECE Longitudinal Follow-ups will be posted on the Child and Family Data Archive funded by ACF, in conjunction with existing NSECE materials. As of November 2022, there have been more than 110 publications produced by researchers outside the NSECE project team using data from the 2012 and 2019 NSECE.<sup>1</sup>

ACF expects to publish many analytic products within 4 years of the data collection period, highlighting key analytic findings, demonstrating the primary topical areas of coverage within the data, and addressing areas of information priority for the agency. We expect analyses will be completed linking other data sources, such as linking American Community Survey data to examine ECE availability and use in communities with different rates of poverty and/or urbanicity. Because NSECE data are broadly available to the research community, not all uses of the data can be anticipated at this time. Some analysts have used 2012 and 2019 NSECE data to conduct quasi-experimental analyses or analyses using multivariate modeling and estimation techniques.

### **B8. Contact Persons**

Don Jang, Chief Statistician [Jang-Don@norc.org](mailto:Jang-Don@norc.org) can answer questions about statistical aspects of the survey. A Rupa Datta, Distinguished Senior Fellow [Datta-Rupa@norc.uchicago.edu](mailto:Datta-Rupa@norc.uchicago.edu) will supervise the collection, processing and analysis of data for OPRE. Jang and Datta both work at NORC at the University of Chicago, the contractor for the 2024 NSECE and the 2024 NSECE Longitudinal Follow-ups.

### **Attachments**

Instrument 1 2024 NSECE Household Screener and Questionnaire

Instrument 1S 2024 NSECE Household Screener and Questionnaire (Spanish)

Instrument 2 2024 NSECE Home-based Provider Screener and Questionnaire

---

<sup>1</sup> See the NSECE available at Research Connections.org:  
<https://researchconnections.org/sites/default/files/146221.pdf>

**Alternative Supporting Statement for Information Collections Designed for  
Research, Public Health Surveillance, and Program Evaluation Purposes**

Instrument 2S 2024 NSECE Home-based Provider Screener and Questionnaire (Spanish)

Instrument 3 2024 NSECE Center-based Provider Screener and Questionnaire

Instrument 3S 2024 NSECE Center-based Provider Screener and Questionnaire (Spanish)

Instrument 4 2024 NSECE Workforce (Classroom Staff) Questionnaire

Instrument 4S 2024 NSECE Workforce (Classroom Staff) Questionnaire (Spanish)

Instrument 5 2024 NSECE Longitudinal Household Follow-up Questionnaire

Instrument 5S 2024 NSECE Longitudinal Household Follow-up Questionnaire (Spanish)

Instrument 6 2024 NSECE Longitudinal Workforce Follow-up Questionnaire

Instrument 6S 2024 NSECE Longitudinal Workforce Follow-up Questionnaire (Spanish)

Appendix A 2024 NSECE Household Respondent Contact Materials

Appendix A-S 2024 NSECE Household Respondent Contact Materials (Spanish)

Appendix B 2024 NSECE Household Questionnaire Items - Overview and Comparison

Appendix C 2024 NSECE Unlisted Home-based Provider Survey Contact Materials

Appendix C-S 2024 NSECE Unlisted Home-based Provider Survey Contact Materials (Spanish)

Appendix D 2024 NSECE Listed Home-based Provider Survey Contact Materials

Appendix D-S 2024 NSECE Listed Home-based Provider Survey Contact Materials (Spanish)

Appendix E 2024 NSECE Home-based Provider Questionnaire Items - Overview and Comparison

Appendix F 2024 NSECE Center-based Provider Survey Contact Materials

Appendix F-S 2024 NSECE Center-based Provider Survey Contact Materials (Spanish)

Appendix G 2024 NSECE Center-based Provider Questionnaire Items - Overview and Comparison

Appendix H 2024 NSECE Workforce (Classroom Staff) Survey Respondent Contact Materials

Appendix H-S 2024 NSECE Workforce (Classroom Staff) Survey Respondent Contact Materials (Spanish)

Appendix I 2024 NSECE Workforce (Classroom Staff) Questionnaire Items - Overview and Comparison

Appendix J 2024 NSECE Field Materials for Contacting Respondents

Appendix J-S 2024 NSECE Field Materials for Contacting Respondents (Spanish)



**Alternative Supporting Statement for Information Collections Designed for  
Research, Public Health Surveillance, and Program Evaluation Purposes**

Appendix K 2024 NSECE General Research Review Board Materials

Appendix L 2024 NSECE Research Questions

Appendix M 2024 NSECE Public Comment

Appendix N 2024 NSECE Longitudinal Household Follow-up Respondent Contact Materials

Appendix N-S 2024 NSECE Longitudinal Household Follow-up Respondent Contact Materials (Spanish)

Appendix O 2024 NSECE Longitudinal Household Follow-up Questionnaire Items – Overview and Comparison

Appendix P 2024 NSECE Workforce Follow-up Respondent Contact Materials

Appendix P-S 2024 NSECE Workforce Follow-up Respondent Contact Materials (Spanish)

Appendix Q 2024 NSECE Workforce Follow-up Questionnaire Items – Overview and Comparison

Appendix R 2024 NSECE Longitudinal Follow-ups Field Contact Materials

Appendix R-S 2024 NSECE Longitudinal Follow-ups Field Contact Materials (Spanish)

Appendix S 2024 NSECE Longitudinal Follow-ups Research Questions

Appendix T 2024 NSECE Longitudinal Follow-ups Quality Assurance Questionnaire

Appendix T-S 2024 NSECE Longitudinal Follow-ups Quality Assurance Questionnaire (Spanish)