FINDING CHILD CARE IN TWO CHICAGO COMMUNITIES:

THE VOICES OF LATINA MOTHERS

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Finding Child Care in Two Chicago Communities: The Voices of Latina Mothers

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TABLE OF CONTENTS

List of Tables

List of Figures

ABSTRACT

This study explores how Latino families living in predominantly Latino communities in Chicago make childcare decisions given the density of formal care options in their communities. The study draws on interviews with 32 Latina mothers and 8 directors of childcare centers from two communities, Little Village (lower-density formal childcare) and Belmont Cragin (higher density formal childcare). It also considers different sources of information about childcare options and the range of factors that shape childcare decisions among Latina mothers. Overall, we did not find substantial differences in perceptions of childcare access, use, or decision making between the study participants in Little Village and Belmont Cragin. This finding suggests that in a context of relative scarcity, differences in density of childcare options may matter less than other factors. Families in both communities perceived a limited supply of childcare and noted that they lacked sufficient information about their options. We found that issues of trust, safety, logistics, cost, and familial beliefs about care, especially as it relates to very young children, were driving factors in families' decisions about placing their child in formal care. An overview of findings and recommendations can be found in the Executive Summary, with more detailed information in the full report. With this report, we aim to equip policymakers, childcare providers, parents, and community organizations with new information about Latino parents' knowledge of childcare options in their community and the factors that are most important in their efforts to meet their childcare needs.

EXECUTIVE SUMMARY

Finding childcare is a major challenge for families. Childcare decisions are complex and are based on the alignment of family preferences and needs with the supply, affordability, availability and quality of options. Despite a large body of research on parents' childcare use, preferences, and decision making, there remains limited research focusing specifically on childcare perspectives and decision making within Latino communities. Although Latino parents face many of the same barriers to accessing and using childcare as their non-Latino counterparts, some challenges may be more severe and others may be unique to their historical, cultural, and political circumstances, resulting in diverging experiences regarding childcare, work, and family life.

Latino families in Illinois are heavily affected by limited childcare options, with 86% living in childcare deserts (Malik et al., 2016). Despite this dearth in childcare options, there is growing evidence that Latino families are increasingly using early care for their children. For instance, while Latino families were once less likely to enroll their children in formal childcare centers, Latino children between the ages of 3 and 4 are now enrolled in early childhood care and education programs at similar rates as their non- Latino peers (Lopez et al., 2017).

Recognizing the importance of cultural and community contexts in childcare access, use, and decision making, this study investigated how Latino families make childcare decisions, given the supply and types of formal childcare options in their communities. We recruited participants from two predominantly Latino communities in Chicago: Belmont Cragin and Little Village (also known as South Lawndale). While these communities have similar demographics, they have significantly different densities of formal childcare options (densities are calculated by dividing the total number of slots in licensed childcare centers and licensed home-based programs by the number of children age 5 and younger). The study draws from 32 in-depth interviews with Latina mothers who live in Belmont Cragin or Little Village and have at least one child 5 years old or younger. We also interviewed eight directors of childcare in the two communities to inform, guide, and contextualize our parent interviews.The study was further informed by a constructive partnership with two community-based organizations, one in each community, that provided the research team ongoing consultation, guidance and feedback throughout the project.

From the interviews, we gleaned several key insights:

- **Despite differences in the actual density of formal childcare programs, both communities perceived the supply of formal childcare programs to be limited.** In

both Belmont Cragin and Little Village, most mothers were aware of at least one formal childcare option within their community, but often not more than one. The level of awareness of formal childcare options varied more across participants within each community than between them.

- **Families learned about childcare arrangements in their communities from a variety of sources.** These included social networks, direct observation, and the internet. Mothers in both communities suggested ways to improve access to knowledge about childcare options.

- **Mothers considered a number of factors when making decisions about whether to use childcare and what kind of care to use.** These factors included logistical issues, safety and quality concerns, and specific children's needs. Seldom did participants make decisions based on only one factor. Rather, influential factors included both practical concerns and those related to children's needs and development. Previous experiences with childcare arrangements also often influenced mothers' decisions.

- **Childcare decisions are often embedded in family decisions about paid employment and parenting roles.** Some mothers stayed home with their children instead of working outside the home, or shared caregiving with a partner or relative. These mothers avoided using nonparental childcare, either because of family belief systems discouraging use of nonparental caregivers, because of financial constraints concerning the cost of childcare, or a combination of both of these factors.

- **Grandmothers and spouses/partners are influential in the decision-making process.** Social network members helped mothers select childcare arrangements, and, in some cases, these individuals influenced whether mothers stayed home and cared for children or worked outside the home. Familial influence was mitigated by parent employment and views on the appropriate age in which to place their child (typically children over 2 years of age) in a formal childcare setting.

We did not find distinct differences in childcare perceptions and experiences between mothers in the Belmont Cragin and Little Village samples despite differences in formal care density between these two communities. Mothers face myriad challenges regardless of the increase in supply that some communities have experienced in recent years. This study provides policymakers, community organizations, childcare providers, and families with important information for their efforts to improve the childcare landscape in predominantly Latino communities.

Below are specific recommendations to address access to and use of diverse childcare options. More detail can be found in the full report.

- **Maintain and regularly update bilingual directories outlining childcare options in the community and nearby areas. Expand dissemination strategies to increase awareness of resources**. It was not uncommon for mothers to express the need for accessible information on childcare in their community with some suggesting a community guide.

- **Equip existing community access points, such as libraries, home visiting programs, health clinics, and ESL sites, with information and resources to help families enroll in formal childcare.** Existing community access points that families are familiar with can be leveraged for dissemination of information as well as to provide support in the childcare enrollment process.

- **Promote local hiring of childcare providers.** Hiring childcare workers from within the neighborhood may alleviate some concerns about safety. Parents will be more likely to know a community member providing care.

- **Work with local organizations to form informal support groups for new parents which can serve as spaces to share knowledge and experiences.** Creating spaces for information sharing can help parents to make informed decisions about childcare.

- **Encourage provider outreach to be rooted in personal connections as opposed to consumer relations.** Participants expressed the importance of provider-parent relationships to be built on personal connections in order to facilitate familiarity and trust in formal care.

- **Encourage childcare programs to hold open houses and highlight safety features in marketing materials.** Mothers also suggested childcare providers hold open houses and include safety features (particularly the use of video cameras) as a way to get to know families, build trust, and mitigate concerns about safety.

- **Encourage a enhanced methods of engagement between Illinois Action for Children and local childcare providers to disseminate information on the Child Care Assistance Program (CCAP) subsidy program.** Some participants knew about childcare subsidies but many did not. Given that subsidies help offset the cost of care (a main concern of mothers) and promote work, close collaboration to disseminate information on childcare subsidies between Illinois Action for Children and community childcare providers may be useful.

- **Revise CCAP subsidy income eligibility threshold for two-parent households.** Mothers with partners often reported that their family income was just above the threshold to qualify for subsidies or that working additional hours would place them above the income limit. Raising CCAP income eligibility limits for two-parent households might increase subsidized care enrollment and mothers' employment.

- **Provide incentives that encourage childcare providers to increase the number of slots for infants and toddlers and increase public support for this care.** A number of mothers specifically reported difficulty locating infant and toddler care and programs that served both infants and toddlers and older children.

- **Relax identification requirements to access care.** In some instances, mothers discussed the high cost of identification requirements, particularly among predominantly Spanish-speaking mothers.

- **Increase the transparency of eligibility requirements at childcare centers**. Many mothers mentioned the need for more transparent, and easily accessible, information on income eligibility for subsidized childcare, including CCAP and Head Start.

- **Increase supply of formal childcare and early education options in communities.** There is an urgent need for more options in both communities, including the ability to place multiple children with diverse ages in one center, more options for infant care, and attention to low-cost arrangements at unique and diverse sites such as ESL locations.

Implications of Study Regarding COVID-19

The study was undertaken during 2018–19, prior to the COVID-19 pandemic and the emergency closure of so many childcare programs in Chicago and nationwide. As this report goes to press, communities are trying to make it through this pandemic. Families are facing unprecedented levels of unemployment and suffering serious health crises. These crises disproportionately affect Latino and Black communities. These times have also laid bare the structural racism and violence that Black and Brown communities endure on a daily basis. Given the timing of our study, this immediate context is not reflected in the interviews that we conducted nor in our findings. Even so, we believe that the key takeaways and recommendations remain current—and even more critical during these times.

INTRODUCTION

This study explores how Latino families living in predominantly Latino communities in Chicago make childcare decisions. The study considers how parents of young children get information about childcare options and the range of factors that shape their decisions. More specifically, we explore parental choices of mothers of young children in two Chicago communities. The communities are demographically similar but differ in the density of formal childcare arrangements. With this report, we aim to equip city-level policymakers, childcare providers, and community organizations with new information about Latino parents' knowledge of childcare options in their communities and the factors most important in their efforts to meet their childcare needs.

Historically, Latino parents have been less likely than other ethnic and racial groups to enroll their children in formal childcare centers and more likely to use family, friend, and neighbor providers (Magnuson & Waldfogel, 2016; Magnuson & Waldfogel, 2005; Malik et al., 2016; Ha & Ybarra, 2014). Perhaps fueled by recent investments in public preschool in some predominantly Latino communities, there is evidence that longstanding differences in use of formal childcare by race/ethnicity are narrowing nationally and in Chicago, especially for children ages 3 to 5 (Crosby et al., 2016). National data from 2012 indicate that 50–80% of low-income Latino children are now enrolled in childcare programs (Mendez, Crosby, & Siskind, 2018). In Chicago, Lopez and colleagues (2017) found that 3- and 4-year-old Latino children are enrolled in early care and education programs at similar rates to non-Latino children. However, Latino children are less likely to use subsidized childcare through the Child Care Assistance Program (CCAP).

The City of Chicago has made increasing enrollment in high-quality childcare and early education a priority. The City recently expanded early learning and care opportunities (City of Chicago Office of the Mayor, 2017). Despite these encouraging developments, federal, state, and local level investments in formal childcare (i.e., licensed center-based programs and licensed family childcare homes) remain uneven geographically and across racial and ethnic groups (Malik et al., 2016).

Parental decisions about childcare are shaped by a diverse set of factors. One of these factors, but only one, is supply of childcare. In this report, we seeks to increase understanding of the ways in which Latino families in two communities in Chicago navigate the child care search process in the context of varied childcare supply.

1. Background

Like all parents, Latino parents must accommodate multiple constraints and weigh competing factors in making childcare decisions. Research indicates that the process of child care decision making is complex and often depends on a combination of parental preferences, family resources and needs, and community opportunities and constraints (Forry et al., 2013; Chaudry et al., 2010). In an effort to accommodate these factors, parents may select centers, licensed family childcare homes, or informal family, friend, and neighbor caregivers to meet their childcare and early education needs. Parents seek childcare that is consistent with the goals and values they hold regarding child development, health, and wellbeing. Research also demonstrates that Latino families hold similar values as other racial/ethnic groups regarding the role of childcare in supporting their children's learning and developmental trajectories (Guzman et al., 2016). Indeed, Latino parents perceive centers positively in terms of their ability to prepare children for kindergarten and their socialization value.

At the same time, parents are constrained by program availability, cost, parental work and school schedules, and the schedules of older children and other family members. Latino families have a significant need for affordable childcare that aligns with their hours of employment and their family's needs. Despite their disproportionately high rates of employment, Latino families have relatively low average earnings and their jobs frequently require work outside of weekday, daytime hours (Crosby et al., 2020; Crosby & Mendez, 2017). Although Latino families are more likely to have a household member provide childcare for no cost, research suggests that on average, Latino families who pay for childcare spend a greater proportion of their earnings on child care than white or Black families (Crosby et al, 2019). This may be due to aforementioned supply constraints, a lack of information on care options, or the limited availability of low-cost options. In some cases language barriers or a lack of familiarity with the local market hamper access to low-cost care (Vesely et al., 2015). In addition, some families may not have access to government subsidies because of their immigration status.

Careful childcare searches require both time and access to good information. Latino families typically engage in short searches or no search at all (Mendez & Crosby, 2018), which may be the result of both time constraints and a lack of information. Time constraints may prevent parents from carefully weighing their options before choosing an arrangement. The decision-making process is often hampered by a dearth of information on the availability, cost, or quality of nearby childcare options. Informational constraints are particularly great for some Latino families, especially recent arrivals to a community, those whose primary language is not English, and those who are unfamiliar with the U.S. childcare system. Research demonstrates that Latino families are less likely to have extended family members living nearby, which suggests that some families may lack a potential source of guidance that could offset information deficits.

In Chicago and nationwide, studies indicate a shortage of affordable, quality childcare centers in low-income communities of color. This shortage is acute in Latino communitites, despite Latino parents' desires to enroll their preschool-aged children in childcare centers at equal rates as other parents (Guzman et al, , 2016). For example, according to a report by the Center for American Progress, Latino families frequently live in communities deemed "childcare deserts"[1] (Malik et al., 2016). In response to many of these shortcomings, in recent years there has been considerable investment in public preschool in low-income communities, including predominately Latino communitites.[2] This has likely reduced inequities in access and availability of preschool programs by neighborhood. Even so, the availability of center-based and home-based childcare programs in Chicago neighborhoods still varies greatly. Moreover, the center-based childcare market rarely extends its services to families needing care during evening, weekend, or overnight hours and is less available to infants, toddlers, or families with special caregiving needs (NSECE Project Team, 2015a, b; Sullivan et al., 2018; Dobbins et al., 2016; Henly & Adams, 2018).

Despite the complexities in access and use of childcare, there remains limited research on the child care decision making of Latino parents. Although Latino parents face many of the same constraints and opportunities as other parents, Latino families' specific cultural and familial backgrounds, community ties, legal status, and proximity to family members may result in differential access to childcare information, public benefits, and informal supports. Disproportionate residence in "childcare deserts" may also constrain the choice sets of low-income Latino families to home-based markets, especially informal, unlicensed caregivers (Forry, et al 2013; Malik et al, 2016). To close these gaps in research, this report highlights findings from a study of Latina mothers with young children in two predominantly Latino communitites that are similar demographically but differ in the density of licensed centers and licensed family

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[1] "A childcare desert is defined as a ZIP code with at least 30 children under the age of 5 and either no childcare centers or so few centers that there are more than three times as many children under age 5 as there are spaces in the centers" (Malik et al., 2016).
[2] Chicago is currently finishing the second year of a 4-year plan to provide free, full-day pre-k for all 4-year-olds in the city, ultimately increasing the number of children in preschool by 7,000. During the 2019–20 school year, the city rolled out Universal Pre-K (UPK) in 28 of the highest-need communities, including South Lawndale (Little Village), one of the communities of focus in this study. The *UPK Roadmap* (City of Chicago, 2019), a city plan for preschool expansion in Chicago, indicates that next year (SY 2020–21), UPK will expand to 35 additional communities, including Belmont Cragin, the other community of focus in this study. At the time of our interviews, UPK had not been rolled out in either community. However, childcare center directors were concerned that the UPK expansion would result in fewer 4-year-olds enrolling in community-based programs, which would create financial problems since reimbursement rates for preschool classrooms are higher than those for infant and toddler classrooms (Burke, 2019).

childcare homes. We considered formal or licensed childcare to include both center-based programs and family childcare programs. We ask four questions:

1. How do families living in two Latino communitites in Chicago perceive their childcare options?
2. How do they make decisions regarding childcare enrollment?
3. How, if at all, does the supply of formal early care and education programs in these communities impact parents' perceptions of childcare and shape parental decision-making?
4. Who influences parents' decisions?

2. Report Overview

This report draws primarily on interviews conducted with mothers of young children and directors of center-based childcare programs in two Chicago communities. The interviews with directors were conducted from October 2018 to December 2018 while the interviews with parents were conducted from February 2019 to August 2019. The next chapter describes the characteristics of the two communities selected for the study and our study methods. We then present our findings on how Latino families learn about the range of options for childcare in their communities and how they make decisions about childcare for their children. The final chapter discusses our findings and makes recommendations for future policy and practice to improve families' ability to find affordable, high-quality childcare programs that meet their needs and preferences.

METHODS

The main results presented in this report are drawn from in-depth interviews with 32 Latina mothers of children 5 years old and younger in two Chicago communities. We supplemented these findings with information gleaned from interviews with eight childcare center directors in these two communities. Below we describe how we selected the communities for this study, the recruitment and interview process, data analysis approach, and the characteristics of the sample.

1. Focal Communities

1.1 Community Selection

The initial stage of this project involved selecting two predominantly Latino communitites in Chicago from which to recruit the sample. We selected Belmont Cragin and Little Village.[3]

We arrived at our two focal communities by first identifying predominantly Latino communitites in Chicago that were similar demographically but that differed in level of formal childcare saturation. Childcare saturation is calculated by dividing the number of childcare slots in licensed centers[4] and licensed homes by the number of children 5 years and younger in each community. Five key variables were examined to identify communities of similar demographic composition (see Table1).

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[3] The official name for the community area of Little Village is South Lawndale. Because this area is more commonly referred to as Little Village, we refer to it as Little Village in this report.
[4] This data is available at http://www.excelerateillinois.com/provider-search/ci-Chicago/ct-10374/cl-13691-13689-13823. Accessed January 9, 2018.

Table 1. Variables Used for the Selection of the Community Areas

Variables	Data Source
• Estimated number of residents over the age of 5 who speak English "less than very well"	City of Chicago Data Portal[5]
• Total children ages 0–5; percentage of children ages 0–5 who are Hispanic • Percentage of children ages 0–5 living below the federal poverty line.	Young Children in Chicago[6]
• Percentage of children eligible for childcare subsidies • Percentage of children eligible for Early Head Start and Head Start.	Early Childhood Care Programs Supply and Demand[7]

Based on data from the Chicago Department of Family and Support Services (DFSS), the City of Chicago Data Portal, and the Illinois Department of Children and Family Services (DCFS), we identified 17 communities where more than 70% of children aged 0–5 years are Latino. Figure 1 displays information about these communities. Community areas with pink shading reflect the 17 Latino communitites identified.

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[5] https://data.cityofchicago.org/Health-Human-Services/Census-Data-Languages-spoken-in-Chicago-2008-2012/a2fk-ec6q. Uses U.S. Census data from 2008-2012

[6] http://dfss-ycic.chapinhall.org/ajax/comm_summary.php?geoSpatialID=58. Accessed January 6, 2018.

[7] http://dfss-ecsd.chapinhall.org/child_population_elig.php?comm_id=58. Accessed January 6, 2018.

Figure 1. Chicago Community Areas with More than 70% of Children Aged 0–5 who are Latino
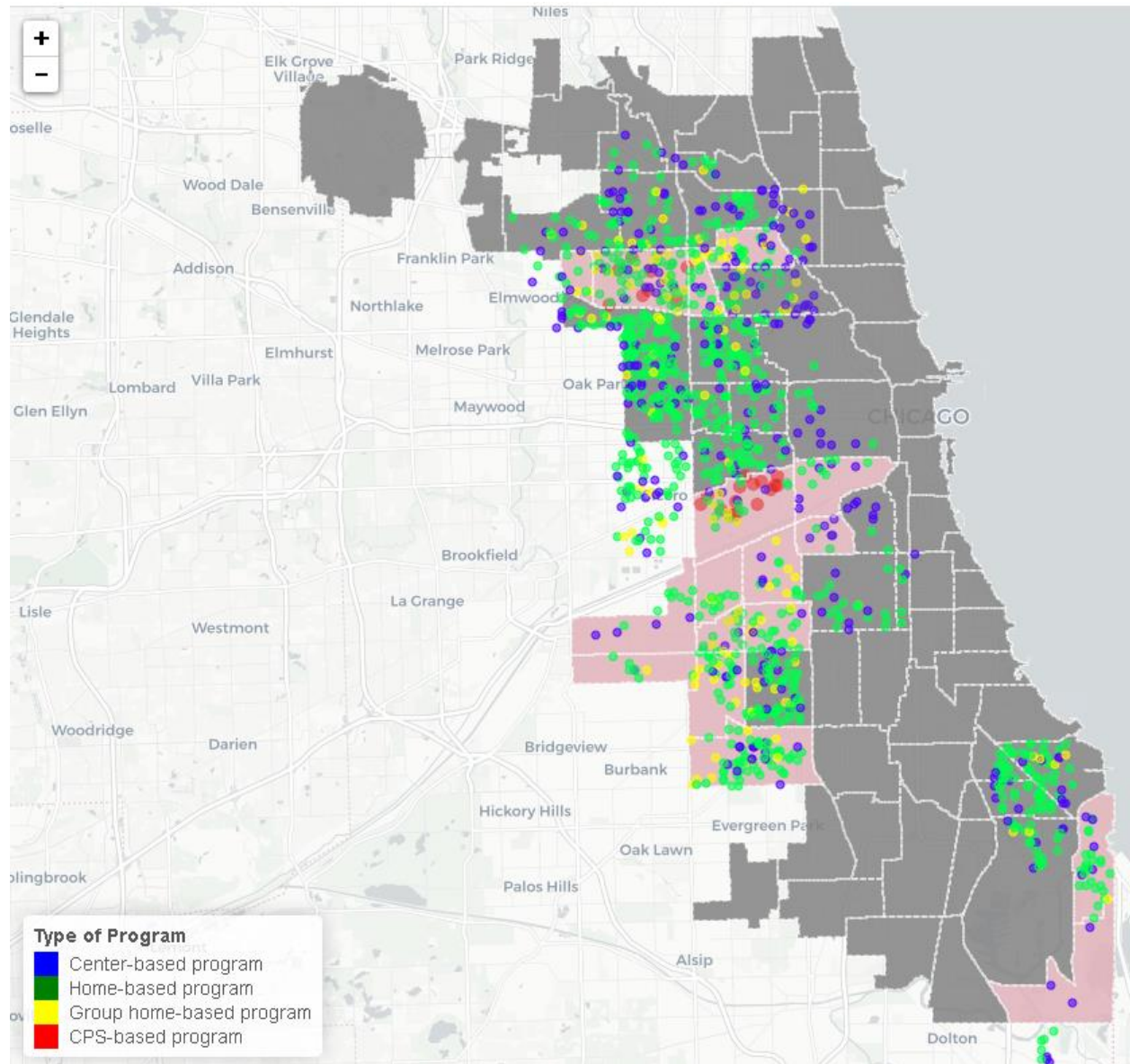
Source of information:
DFSS: Young Children in Chicago 2016 (http://dfss-ycic.chapinhall.org/index.php)
DCFS: Day Care Provider Lookup 2018
(https://sunshine.dcfs.illinois.gov/Content/Licensing/Daycare/ProviderLookup.aspx)

In Figure 1, licensed childcare providers operating in the 17 communities and surrounding communities are also displayed with markers in blue (center-based programs or day care

centers[8]), green (home-based programs or day care homes[9]) and yellow (group home-based programs or group day care homes[10]). Looking at the supply of childcare in communities surrounding the 17 areas helped us better understand the availability of childcare in these communities.

We also considered background information on these selected communities to enhance our understanding of each community (e.g., when the community became majority Latino, total population, location, and income). This information was gleaned from 2019 data published by the State of Illinois (Community Data Snapshots, n.d.).

Based on our review of the variables from Table 1, information displayed in Figure 1 across the 17 community areas, and our understanding of the unique backgrounds of the different communities, we selected the two communities of Belmont Cragin and Little Village to serve as our focus of study. After selecting Belmont Cragin and Little Village, we added Chicago Public Schools' (CPS) Pre-K programs to the map (red markers) to illustrate other formal childcare arrangements that parents might use in these communities.

Thus, the two communities identified for this study are similar across community-level characteristics but differ significantly in the total number of childcare slots in licensed centers and homes (see Table 2).

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[8] According to the Illinois Childcare Act, "day care center" means any childcare facility which regularly provides day care for less than 24 hours per day for (1) more than 8 children in a family home, or (2) more than 3 children in a facility other than a family home, including senior citizen buildings.
http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=1293&ChapterID=24
[9] According to the Illinois Childcare Act, "day care homes" means family homes which receive more than 3 children, up to a maximum of 12, for less than 24 hours per day.
http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=1293&ChapterID=24
[10] According to the Illinois Childcare Act, "group day care home" means a family home which receives more than 3 children, up to a maximum of 16, for less than 24 hours per day.
http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=1293&ChapterID=24

Table 2. Community Characteristics

Indicator	Belmont Cragin	Little Village
Community-level characteristics		
Total children 0–5 years old[a]	7,065	7,340
Percentage of children 0–5 years old who are Latino[a]	84.70	93.10
Percentage of residents over the age of 5 who speak English "less than very well" and have Spanish as predominant language[b]	33.10	43.80
Percentage of children 0–5 years old living below the federal poverty line[a]	33.60	35.50
Percentage of children eligible for subsidies, ages 0-5[c]	26.50	27.90
Percentage of children eligible for Head Start, ages 0-5[c]	33.60	35.50
Percentage of children eligible for Early Head Start/Head Start not enrolled[c]	85.60	58.90
Percentage of children eligible for subsidies not enrolled in center-based care[c]	77.00	90.20
Number of children in CPS pre-K[a]	1,382	1,189
Childcare slots		
Number of center-based providers[d]	13	5
Number of family childcare home providers[d]	62	19
Total number of slots in the community (total capacity) *,[d]	6,695	1,886

Source of information:
[a] DFSS: Young Children in Chicago, 2016 (http://dfss-ycic.chapinhall.org/index.php)
[b] City of Chicago Data Portal, Census Data 2008–2012
[c] DFSS: Early Care and Education Programs: Supply and Demand 2016 (http://dfss-ecsd.chapinhall.org/index.php)
[d] DCFS: Day Care Provider Lookup 2018
(https://sunshine.dcfs.illinois.gov/Content/Licensing/Daycare/ProviderLookup.aspx
* Includes capacity for all ages across all provider types in each community.

1.2 Community Partners

After selecting the two focal communities, we developed partnerships with community-based organizations in both areas to help guide the study. Enlace, our community partner in Little Village, worked with us to identify our community partner in Belmont Cragin, Northwest Side Housing Center. Enlace is a community-based organization that "convenes, organizes, and builds the capacity of Little Village stakeholders to confront systemic inequities and barriers to economic and social access" (*Who We Are,* n.d.).Northwest Side Housing Center (NWSHC) is a community-based organization that "identifies and responds to the needs of the community by leveraging resources to improve the economic well-being and quality of life in Belmont Cragin and the surrounding communities" (*Mission,* n.d.) These community partners helped us ensure

that our selected community boundaries, which were Chicago's defined community areas, aligned with those perceived by each community. We also checked in with them throughout the study to get input on study design, discuss our progress, and get feedback on preliminary findings through co-interpretation meetings. We then collaborated with them to support the dissemination of project findings.

1.3. Little Village (South Lawndale)

South Lawndale, a community area on Chicago's southwest side, is better known to residents as Little Village, or *La Villita* in Spanish. Little Village has a reputation as "the largest center of Mexican commerce and culture in the city of Chicago" (Acosta-Córdova, 2017). Little Village is also Chicago's most densely populated Latino (primarily of Mexican descent) and undocumented immigrant community. The number of community residents peaked in 2000 at 91,071 residents[11], however, the community has experienced population decline since that time. There are currently about 75,000 residents; population density remains high, at 17,000 residents per square mile (Enlace, 2020). Over the years, local activists have successfully fought for the construction of new schools and parks to address the associated issues of overcrowding and lack of green space (Little Village Quality of Life Plan, 2013).

1.4 Belmont Cragin

Belmont Cragin, a community area on Chicago's northwest side, also has a long history as an immigrant community. Historically, Belmont Cragin was home to Polish and Eastern European immigrant populations. Over the last 30 years, the total population of Belmont Cragin has grown dramatically and become home to sizeable Mexican, Puerto Rican, Central American, and South American populations. The 2016 Belmont Cragin Quality of Life Plan notes that:

> From 1990 to 2013, the population of Belmont Cragin jumped 41 percent (from 56,700 to 78,900), even as the city as a whole lost residents. Belmont Cragin's assets continue to attract new residents, including many families displaced by gentrification and rising housing costs in communities to the east, like Humboldt Park and Logan Square." (Belmont Cragin Quality of Life Plan, 2016)

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[11] 2000 census data is reported as part of a Community Data Snapshot prepared by LISC Chicago's New Communites Program. http://www.newcommunities.org/communities/littlevillage/maps.asp

Like Little Village, the community has also suffered from overcrowded schools, and community activists have successfully pushed for the city to build new schools in the area (Belmont Cragin Quality of Life Plan, 2016).

2. Childcare Center Director Interviews

2.1. Recruitment and Interview Process

At the recommendation of our community partners, we interviewed center-based program directors[12] in each community prior to initiating interviews with mothers. The goal of these interviews was to guide the development of the parent interview protocol and provide important context for the study.

From October 2018 to December 2018, we interviewed eight directors of center-based programs, four in each community. Each interview lasted 45 to 60 minutes and was conducted over the phone. Childcare centers were identified through our community partners and publicly available information. Because we limited our sample to childcare center directors, we did not benefit from the perspective of frontline staff or CPS preschool teachers, nor of licensed or license-exempt family childcare providers, for this study.

The information gleaned from center directors about the availability of formal care in the community, and the opportunities and challenges facing parents seeking care, gave us useful background information during the parent interview process and throughout the data coding and analysis phases of the study. While this report does not include an in-depth analysis of these provider interviews, we contextualize our discussion of parent findings with perspectives from these interviews where appropriate.

3. Parent Interviews

3.1 Data Collection

We used four distinct strategies to recruit participants for parent interviews. First, in both communities, we distributed bilingual project flyers and contact cards with the help of community partners and childcare providers. The study materials highlighted the key eligibility criteria for the study (i.e., a resident of either Little Village or Belmont Cragin with at least one child 5 years old or younger). The flyers and contact cards were distributed to childcare programs, churches, supermarkets, laundromats, food pantries, and other community

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[12] All interviews were conducted with childcare directors, except one interview was conducted with three people: the director of the entire organization, the director of the childcare program, and the manager of the home visiting program.

organizations. Second, we presented information about the study and recruited parents at events held by our community partners. Third, we conducted limited snowball sampling by asking participants at the end of an interview to share the study flyer with potential participants. Finally, to identify parents using the Child Care Assistance Program (CCAP), we relied on support from Illinois Action for Children,[13] who shared information about the study with parents enrolled in the subsidy program. Parents expressing interest in the study and who agreed to have Illinois Action for Children share their contact information with the research team were then contacted for participation. Ultimately, we had a sampling frame of 54 potential participants. Based on information regarding household composition, age of children, and childcare arrangements, we purposively drew a sample that was diverse within both communities, but similar across them.

We conducted semi-structured interviews that included a set of questions and probes related to childcare arrangements at the time of the interview, child care decision making, perspectives on current arrangements, ideal care, and work–family responsibilities. A set of closed-ended questions were asked at the end of each interview to gather descriptive information on the sample. The interviews were, on average, 60 minutes in length and were conducted in Spanish or English, depending on participant preference. All interviews were conducted by one of four researchers and took place between February 2019 and August 2019. We conducted interviews in participants' homes, local businesses, and libraries. All interview participants completed a verbal informed consent process prior to the start of each interview. At the end of the interview, participants received $30 and a bilingual children's book. Interviews were audio-recorded with participant consent.[14] After each interview, the interviewer wrote a debriefing memo to capture the participant's nonverbal communication as well as the interviewer's observations and initial analytic reflections. English language interviews were transcribed directly, while Spanish language interviews were transcribed into English.

3.2 Data Analysis

Analyzing the interviews with an interpretive approach, we sought to understand the significance and meaning of childcare opportunities and constraints from the perspective of study participants (Haverland & Yanow, 2012; Schwartz-Shea & Yanow, 2013). We first identified a list of *a priori* codes to capture the key topic areas, supporting topics, and subtopics identified in the research questions and the interview protocol. As the analysis proceeded, we also identified emergent codes that reflected themes uncovered during the close reading of

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[13] Illinois Action for Children is the Cook County Child Care Resource and Referral Agency. It holds the contract with the Illinois Department of Human Services (IDHS) to administer the CCAP in Chicago and suburban Cook County.

[14] In the absence of consent to record, or technology failure, the interviewer took detailed notes throughout the interview.

transcripts, researcher debriefings, and team meetings. We further elaborated and refined the themes that emerged during the initial review of the transcripts through team discussions of sample interviews (Ryan & Bernard, 2000).

A team of seven researchers coded the first six interviews together. After coding each interview, we discussed and resolved discrepancies in interpretation and refined codes through team consensus. Once we established intercoder reliability, one researcher took the lead in coding the majority of the remaining transcripts. To improve reliability, we continued to double code every fourth interview, compare our coding, and resolve inconsistencies. We also met weekly to discuss any coding challenges or questions. For the analysis, we constructed participant-by-code matrices for key topics (i.e., sources of information, perceived supply, factors that inform child care decision making) to identify patterns across participants and also by community. We further interpreted and confirmed our findings through co-interpretation meetings with our partner organizations and parents in each community.

3.3 Sample Characteristics

The total interview sample included 32 participants, 16 in Belmont Cragin and 16 in Little Village. Sixteen interviews were conducted in Spanish and 16 in English. While we did not screen participants based on gender or relation to the child, all of the interview participants were mothers. Given this, in our discussion of findings below, we refer to "mothers" rather than "parents" in describing the participant-generated data. The purposive sample is not meant to be representative of mothers in the two communities but rather to reflect a diversity of Latino families' experiences with childcare.

3.3.1 Demographic characteristics
In our sample, mothers from both communities reported having, on average, two children. Mothers in our sample had a total of 42 children that were 5 years and under, with 22 living in Little Village and 20 living in Belmont Cragin. Table 3 displays the counts of children ages 5 and younger who were part of our sample in each community, by age category. Nearly half of the total children in our sample were between ages 3 and 5, and about one-third were between 12 months and 2 years old. Approximately one-fifth were under 12 months.

Table 3. Number of Children Under the Age of 5, by Community

Age	Belmont Cragin		Little Village		Total sample	
	n	%	*n*	%	*N*	%
Under 12 months	3	15.0	5	22.7	8	19.0
12 months to 2 years	6	30.0	9	40.9	15	35.7
3 years to 5 years	11	55.0	8	36.4	19	45.2

In addition to children 5 years old and under, mothers in our sample also had 33 children ages 6 years and older. Twenty of these children were from Belmont Cragin and the remaining 13 were from Little Village.

The average age of the study participants was 31 years old. Mothers from Belmont Cragin were slightly older than mothers from Little Village. In both communities, the majority of participants indicated that their primary language was Spanish; less than a third were primary English speakers. Only a handful of participants in both communities felt comfortable speaking both languages equally (see Table 4).

Table 4. Participants' Demographic Characteristics by Community

Variable	Belmont Cragin		Little Village		Total sample	
	n	%	n	%	N	%
Average age	34	-	29	-	31	-
Primary Language						
Spanish	10	62.0	9	56.2	19	59.4
English	4	25.0	4	25.0	8	25.0
Both	2	12.0	3	18.8	5	15.6
Level of Education						
Less than HS	4	25.0	5	31.0	9	28.1
HS or GED	5	31.0	6	38.0	11	34.4
Some college, certificate program, or AA degree	6	37.5	3	18.8	9	28.1
BA degree	1	6.0	2	12.0	3	9.4
Employment Status						
Full time	6	38.0	2	12.0	8	25.0
Part time	4	25.0	5	31.0	9	28.1
Unemployed	6	38.0	9	56.0	15	46.9

Over a quarter of the mothers in our sample did not complete high school; about one-fifth had an associate's or bachelor's degree. The distribution was similar in both communities.

Just over half of the participants were employed at the time of their interview. One-quarter had full-time jobs and about another quarter had part-time jobs. More mothers from Little Village were not working at the time of the interview than mothers from Belmont Cragin. Additionally, in Little Village, only two mothers (13%) reported having full-time jobs, while in Belmont Cragin, four mothers (25%) had full-time jobs. The interview gathered information about mothers' childcare experiences for both past and current jobs.

3.3.2 Childcare Arrangements

Twenty-two mothers—more than two-thirds (69%) of the sample—used some form of nonparental childcare arrangement for children ages 5 and under at the time of the interview. These arrangements included center-based care, CPS Pre-K, nonrelative family childcare provider, or relative care. Table 5 displays the different types of primary childcare arrangements used by the families in our sample in each community. Among the 22 mothers who were using some form of childcare for their children (69%), 8 used community-based center program (36%), and another 8 were either using a CPS Pre-K or kindergarten program. Home-based arrangements were also common, with about 40% of children cared for by a nonrelative (14%) or a relative (27%) in a private home.[15] As Table 5 indicates, more mothers from Belmont Cragin were using childcare than mothers from Little Village, as evidenced by the greater frequency of kindergarten attendance. This may be because children in Belmont Cragin were slightly older; or it may reflect the greater density of formal childcare in Belmont Cragin. The Belmont Cragin sample's higher employment rate may also explain some of the difference in use of childcare in our sample across the two communities.

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[15] Home-based, nonrelative care refers to care provided in a licensed or unlicensed family childcare home, or care provided by friends or neighbors. Home-based, relative care refers to care provided by a family member.

Table 5. Participants' Childcare Characteristics by Community

Variable	Belmont Cragin		Little Village		Total sample	
	n	*%*	*n*	*%*	*N*	*%*
Use of childcare						
Currently use	12	75.0	10	62.0	22	69.0
Do not use	4	25.0	6	38.0	10	31.0
Primary childcare arrangement [a]						
Center-based	4	33.0	4	40.0	8	36.0
CPS Pre-K	2	17.0	2	20.0	4	18.0
Kindergarten	3	25.0	1	10.0	4	18.0
Home-based, non-relative	2	17.0	1	10.0	3	14.0
Home-based, relative	3	25.0	3	30.0	6	27.0

[a] The percentages for each value of this category are calculated over the number of participants who were using childcare. These categories are not mutually exclusive, so percentages do not add up to 100%.

4. Co-Interpretation Meetings

A final component of this study was a discussion of the findings with parents from each community. In this report, we use the information gleaned from co-interpretation meetings to supplement the findings from the mother interviews.

On October 29, 2019, the research team met with four mothers from Little Village and four Enlace staff members to discuss preliminary findings. A similar meeting was held on March 9, 2020, with three mothers from Belmont Cragin and three Northwest Side Housing Center staff (two of which were mothers as well). The discussions were about 90 minutes in length and were conducted primarily in Spanish. The Little Village meeting took place at Enlace's office and the Belmont Cragin meeting took place at Northwest Housing Center.

The purpose of these meetings was to "member check," confirm our preliminary findings, and co-interpret the findings with the input of community members and partners. The meetings opened with introductions and a brief overview of the study, followed by a discussion of the findings. During the discussion, parents were able to affirm or present different perspectives about the findings. After each meeting, the research team wrote summary notes with key points discussed by meeting participants in response to the findings. These co-interpretation meetings confirmed the findings included in this report and offered some additional insights. Where appropriate, we have integrated these insights with interview findings.

FINDINGS

1. Community Childcare Contexts

We conducted interviews with eight directors of center-based programs, four in each community. The interviews revealed that the centers in the two study communities offer similar types of childcare arrangements and programming. We also did not identify major differences in the client composition of centers in the two communities. All eight directors indicated that Latino children make up a large share of enrolled children. Two directors in Little Village indicated that they serve approximately equal numbers of Latino and African American children. Programs in Belmont Cragin were more likely to report serving mostly Latino families, but also served a small but more diverse proportion of other racial and ethnic groups.

The centers all offered programming in both English and Spanish, emphasizing that their staff have backgrounds similar to the families they serve. All of the programs offered ways for parents to engage in the program, such as through volunteering, parent–teacher meetings, and holiday parties at the center. However, one director in Little Village reported that requirements for parent volunteers create barriers for some parents. In particular, passing required background checks is challenging for undocumented parents, and the medical testing requirements (such as a TB test) can be too expensive for some families.

Some directors mentioned that they help parents apply for the CCAP subsidy, and others have their own programs for supporting parents financially. For example, one program in Little Village has an emergency fund offering families up to $500. Another program in Little Village has a scholarship program so families can enroll their child while they look for work, before they are eligible for CCAP. Directors of some of the larger programs in the two communities reported that they offer a comprehensive range of services to support child and family needs through their organization, including mental and behavioral health services, parenting classes, and a domestic violence center.

Program directors in both communities also reported similar challenges related to maintaining full and steady enrollment. In particular, the expansion of the city's public pre-K program created new competition for community-based programs. Almost all of the center directors we spoke with shared that they were losing families to CPS pre-K and were not at full capacity, particularly for children ages 3 to 4. One center director in each community shared that enrollment was less of a challenge for infants and toddlers because CPS was not offering care for this age group. Providers in both communities also told us that they face challenges recruiting qualified staff, or are losing qualified staff, because they cannot offer the same

competitive salaries as CPS. All of the directors we interviewed shared that they primarily recruit families to their program through word-of-mouth, though some do targeted outreach as well.

Additionally, directors in both communities discussed barriers that some families face enrolling their children in care. Directors reported that many interested families are not eligible for subsidies that serve families in their programs due to work and income requirements. One director added that there were challenges with the city-wide online application; the system would refer families to their center without ensuring the family met the eligibility requirements for the early childhood program. Directors also reported that administrative requirements, such as proof of work and income necessary for the CCAP program, presented hurdles to program enrollment for some parents. Parents paid in cash had particular problems because they could not easily produce paystubs for employment and income verification. Directors noted that this sometimes resulted in parents losing their eligibility or not qualifying for particular services. Finally, some directors noted that following the 2016 election, there was an initial decline in use of centers by undocumented parents due to fear of deportation.

2. Perceptions of Childcare Options

Our first research question asked how study participants in Belmont Cragin and Little Village perceive their childcare options. To address this, we examined mothers' perceptions of the general supply of childcare in their community. We also asked them about their knowledge of specific programs in their community. In addition, we examined mothers' knowledge of financial assistance for childcare and how they gather information about childcare options available in their communities. Below we outline factors associated with child care decision making and illustrate these challenges with selected quotes from our participants.[16]

2.1 Parent perceptions of childcare supply and enrollment barriers

Our comparative analyses revealed that the mothers interviewed in both communities perceived a limited supply of childcare options. Although Belmont Cragin has many more licensed childcare centers and homes, and substantially more childcare slots than Little Village, this difference in actual supply did not translate into Belmont Cragin mothers' reporting greater availability of childcare programs. Families in both communities appeared to lack vital information to help them understand the different types of childcare arrangements available. They also identified similar barriers to enrolling their children in childcare programs.

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[16] Selected quotes are followed by EL (English language interview) or SL (Spanish language interview) although all quotes are provided in English in this report. Belmont Cragin is abbreviated as BC and Little Village as LV when reporting the number of participants who discussed a specific factor.

At the same time, mothers in both communities sometimes described the perceived shortages in different ways. For example, more mothers in Little Village noted the scarcity of formal childcare centers in the community, whereas mothers in Belmont Cragin were more likely to discuss a shortage of slots (rather than program) and experiences of being waitlisted or referred elsewhere.

Describing the lack of visibility of childcare centers in Little Village, one mother explained, "I've never even seen [a childcare center] around Little Village. . . .And I'm pretty familiar with the area." Many of the mothers in this community that we interviewed assumed that there were more or better options for childcare and early learning in other communities, including Pilsen and Berwyn, two predominately Latino communitites nearby Little Village. This sentiment was echoed in our Little Village co-interpretation meeting, with mothers noting well-known high-quality programs in Pilsen, Cicero, and Humboldt Park. One mother attributed the shortage in Little Village to the lack of financial resources in the community:

> I just feel like there's more better daycares outside of Little Village, because I feel like. . . .Not that this is a bad neighborhood, but I feel like probably where they pay them more they probably do a better job. . . . Everybody right here they're like, "Oh. My kids didn't go to Head Start." Because, there's nothing close.

At the same time, a few mothers in both communities expressed a belief that there actually were many childcare options in their communities. For example, a mother from Belmont Cragin explained, "There are many day cares in the area" *[translated from Spanish]*. A couple of Little Village mothers noted that families just needed more access to information about the available options and how to determine a program's trustworthiness. One mother explained:

> I would like for parents to know that there are many options and to know about the different payment options. . . I think if they knew more about these things they would use child care more.

Most mothers in both communities were able to refer to at least one center or preschool by its specific location. In most instances, mothers provided the exact street intersections, although a few only made vague references such as "some daycares I see on the street." About half of mothers were able to name a specific childcare center or preschool in their community or in neighboring communities, such as Humboldt Park and Pilsen. Mothers also mentioned being familiar with different types of programs, including Head Start, CPS pre-K, and Montessori schools. Perhaps not surprisingly, unless mothers had direct experience enrolling in the programs they identified, they were not aware of additional details about the programs and the services these centers and preschools provided, such as whether or not the program was only a half-day program or had late hours.

In both Belmont Cragin and Little Village, we found a great deal of variation in mothers' knowledge about the childcare programs in their communities. Interestingly, we found more differences across families within each community than we did between the two communities. One factor that seems to influence families' awareness of programs more than the density of formal childcare is primary language. That is, mothers whose primary language was English or who spoke both English and Spanish with equal proficiency were more likely to have knowledge about existing options than those whose primary language was Spanish.

There were several instances in which mothers reported facing barriers to childcare or pre-K enrollment. These barriers aligned with previous research and our findings from director interviews. Barriers that mothers mentioned included programs being at capacity and having long waitlists, hourly work requirements to qualify for subsidies, and administrative burdens such as paperwork. While some directors had shared with us that their centers were under-enrolled, this does not mean that spaces were always available for children. Program capacity varies by age of child and by the type of funding stream subsidizing a family. For example, one mother from Belmont Cragin explained, "There are many children who are already 3 years old, and the school has a limit. It's like, there is a number of children they accept and the rest have to be left out. So there should be more space" *[translated from Spanish]*. Mothers and community partners who participated in our co-interpretation meetings in both Little Village and Belmont Cragin confirmed a high demand for pre-K in both communities and explained that the pre-K programs for children age 3 and older had long waitlists. They also noted that there were not enough afterschool programs for young children and that childcare programs were sometimes unresponsive to parent inquiries about availability.

2.2 Information about financial assistance for childcare

Mothers reported learning about the CCAP program and other subsidized programs like Head Start and CPS pre-K through their own previous experience, their relatives and friends, childcare providers, or Illinois Action for Children. Mothers' knowledge of the eligibility requirements for these programs was vague, and they relied on program staff to inform them as to whether or not they qualified based on the information they provided. The few mothers who had no information about any of these programs were immigrants who primarily spoke Spanish. Mothers who participated in our co-interpretation meetings confirmed that it was especially challenging for families who do not qualify for these childcare subsidies to find affordable childcare in both communities.

2.2.1 Head Start

Nearly two-thirds of the mothers we interviewed had heard of Head Start. Most of these mothers reported already having children enrolled in Head Start or Early Head Start, or

expressed interest in enrolling their children in Head Start in the future. In many cases, mothers reported that they were familiar with Head Start through their or their families' previous experiences with Head Start over the years. In a couple of cases, mothers even referred back to their own experiences as Head Start children. For example, one Little Village mother shared, "I myself when I was a kid, I loved the program," and another explained, "My mom always told me to put him in Head Start" *[translated from Spanish]*.

Some mothers who indicated they were interested in enrolling their children in Head Start were unsure at what age their children would be eligible, and few mothers had knowledge about Early Head Start. For example, one mother of a toddler, who had previously said she would not trust anyone else to watch her child, declared, "I wish I knew the age Head Start started so he can go."

2.2.2 Child Care Assistance Program (CCAP)

Half of the mothers we interviewed were aware of the CCAP subsidy program, although they did not refer to it by name. Some mothers referred to CCAP by the name of the agency that administers the subsidy, "Action for Children" or "Action." Less than one-quarter of mothers reported being enrolled in a subsidy program at the time of the interview.

One mother reported learning about CCAP directly from Illinois Action for Children while others heard about the subsidy from a center or other provider during their application process.

For example, one Belmont Cragin mother shared:

> When I went to the day care centers nearby they had forms and they said to me, "If you want we have the forms, we can guide you through this process. It can last about two weeks, and then you enroll the girl, then you pay half and the government pays the other half," they told me something about that.

Two mothers reported learning about CCAP from relatives or friends. For example, one Little Village mother shared, "I found out about Action for Children, because my sister had kids that were enrolled in that" *[translated from Spanish]*. Another mother explained that she was not informed about the subsidy program through her childcare provider at first, and had to pay the full amount until she learned about the program from a friend.

The remaining mothers who had heard of CCAP reported that they were not enrolled because they believed they were ineligible due to household income, or work status, or because the copay was not affordable.

2.2.2. Need for additional information about childcare options

Many of our participants were keenly aware of the need for more and better information on childcare options in their communities and Chicago more generally. Mothers who participated in our co-interpretation meetings confirmed that there was a general lack of awareness and misinformation in the community about the full range of childcare options. For example, some of them noted that some parents assume that childcare is too expensive or that they would not qualify for assistance without actively looking into what might be available.

A number of our participants offered suggestions to improve the dissemination of information on childcare. For example, one mother from Little Village spoke about the difficulty of finding childcare arrangements and suggested the development of a guide to help families understand their options. The mother said, "It's really hard to know what is out there. I need a guide or something to guide me about the different programs" *[translated from Spanish]*.

Another mother from Belmont Cragin recommended the community designate a centralized place where families could go to get more information. She described how much she had learned about childcare options from a weekly program she attended and shared:

> There should be places where they put up posters, where they inform, where they say you can come in, that here they can help you with such a thing because I didn't know anything before that. The truth is that I didn't know anything, and there in the meetings I go on Fridays I find out things that I say, "Wow!" *[translated from Spanish]*

Mothers also emphasized the need for access to information and outreach in Spanish in particular. For example, one mother from Little Village stated:

> Especially with the Spanish-speaking community because they think that they don't have it and with the government whole thing, they're scared and that makes it hard. So if anything what we lack is communication.

Like our interview participants, the mothers who participated in our co-interpretation meetings also highlighted the need for some type of childcare directory to provide families with information about available services. Little Village mothers who participated in our co-interpretation also emphasized the importance of the manner in which outreach workers and others share information about available childcare providers. They noted that this information should not be shared through interactions that feel impersonal, transactional, or marketing-oriented. Mothers highlighted that the way outreach workers have shared information about early learning programs in the past led them to feel like they were being pressured, sold something, or treated like a number. Outreach workers focused more on informing a certain

quantity of parents instead of ensuring families understood the *quality* of the information they were providing. These mothers emphasized that families should be given information about childcare options in a respectful, clear, and informative way. Parents and community partners in Little Village also noted that there were some local clinics with social workers who should be able to help families better understand the childcare options in the community.

3. Childcare Decisions

Our second research question examined how study participants make childcare decisions and what factors affect their decisions. We wanted to know how parents made decisions about childcare when considering the following:

- availability of options in their community
- their preferences
- their family circumstances
- their previous experiences
- the complex set of factors related to work, school, and caregiving (previous research indicates these factors affect childcare decisions).

We found similar decision-making strategies in the two communities, with mothers in both Belmont Cragin and Little Village reporting the same factors shaping their childcare choices. The diversity of viewpoints and experiences was greater across individual mothers than between the two neighborhoods.

Our interviews revealed several important findings about child care decision making. Key findings included: how childcare decisions are often embedded in family decisions about paid employment and parenting roles, that grandmothers and spouses/partners were often influential in the decision-making process, and that mothers consider a wide range of issues when making decisions about what kind, if any, of childcare to use.

3.1 Decisions to engage in paid work and use non-parental care

Similar to other research on parental decision making, our interviews suggested that *family belief systems* are critical drivers of parental decisions regarding whether to seek work outside of the home and use nonparental childcare while working (see, for example, Durand, 2011). Several participants spoke about wanting to be with their children at home, especially with children under 3 years of age. Some participants expressed a general view that mothers should be home with their very young children. For example, one mother from Little Village said, "The truth is there's nothing like a mother. There's nothing like a mother taking care of her children especially

when they are this young and small that they depend on you, and that's my thought" *[translated from Spanish]*.

Other mothers shared that the decision to stay with the child was a personal choice, based on particular circumstances around the child's developmental needs. Either way, these views resulted in mothers deciding not to seek work in the paid labor market or pursue education, especially prior to children reaching preschool age. Mothers who participated in our co-interpretation meetings confirmed the prevalence of this belief among many mothers in both communities. They noted this belief is often reinforced by husbands or grandparents.

For some participants who did not use nonparental childcare, family belief systems were less important than cost concerns in decisions to forgo childcare and be full-time caregivers rather than work outside the home or attend school. These participants expressed that it was too expensive to work outside the home as the money they earned would go to pay for childcare. Other participants did attend school or work but arranged it around their partner's work schedule to avoid additional childcare costs. But not all participants who might have preferred a "tag-team" parenting arrangement were able to achieve it, because fluctuating schedules made it difficult to consistently determine working hours.

Some mothers rejected the notion that employment and childcare are choices at all, given the need to work in order to earn money to support a family. A mother from Little Village said, "I don't think anybody really makes the decision like I'm gonna stay at home or I'm gonna work. It's like, I have to stay at home 'cause I can't afford to be at work and pay for childcare, or I have to work 'cause I can't afford not to work."

3.2 Factors shaping childcare decisions

Mothers reported several factors that shaped their childcare decisions, and mothers seldom sought care based on only one factor. Broadly, these decision-making factors can be broken into three overarching categories: convenience, affordability, and responsiveness to children's well-being. Convenience and affordability factors often determined the breadth and scope of childcare options available to families. Family resources were important to understanding the kinds of arrangements that were deemed convenient and affordable, as participants reported different degrees of family support to help transport children, pay for care, and, in many cases, to provide care directly. At the same time, mothers also sought care that was trustworthy and safe, and that met their children's developmental needs.

The factors that drove childcare decisions of mothers in our sample are consistent with those found in prior literature and underscore a key finding of our study: Latina mothers in this study

seek similar arrangements for their children as mothers of other racial and ethnic backgrounds. They want convenient, affordable arrangements where their children will thrive.

3.3.1 Convenience

Families were influenced by a combination of factors related to convenience, such as a provider's hours aligning with family schedules, the opportunity for multiple children to be cared for at the same childcare site, and the proximity of an arrangement from home or work.

Family Schedules. Childcare arrangements need to fit into a family's daily schedule of activities, and also accommodate a family's work schedule. Aligning family schedules with formal childcare, especially center care, can be particularly difficult when a family's daily schedule is inconsistent or difficult to predict. Moreover, the preferred childcare schedule may also be influenced by the schedules of other children, of the partner, and of relatives who may be helping out with care (for example, picking up a child from care).

Overall, for most families, complex scheduling needs dictate the decisions that are made in selecting a caregiver. Families need to find a provider that is available/open during the hours they need care and fits their children's developmental stage. Similar to prior research, we found that family childcare, especially relative care, was better able to respond to the family and work schedules of mothers in our sample. Given competing work and family schedules (coupled with concerns about cost, proximity, and safety), relatives were sometimes viewed as more convenient than formal providers. A participant from Little Village described her mother's flexibility in watching her and her sister's children:

> When I went back to work my mother had agreed to take care of him. So I have an older sister and my niece is five years old, so she was, my mother watched her all her life. It happened to work out that my mom kind of took an early retirement. And it happened at the same time that my sister got pregnant, so it was like an easy decision. "I will watch her," that's my mom, my mom said. "I will watch her until she starts school." And then when I got pregnant it was easy to like, "Okay, are you willing to watch him as well?" Because, otherwise, I wouldn't be able to work.

Accommodating Multiple Children in One Childcare Site. Many participants in our sample had multiple children of varying ages and preferred having them enrolled at one site. The desire to have multiple children at one site was shaped by already complex family schedules. Despite this preference, it was difficult for many families to locate a provider that both accepted children of multiple ages *and* was proximately convenient to work or home. Thus, mothers with multiple children of diverse ages struggled with childcare decisions. In some cases, they chose to stay home with them rather than seek outside work. Although there are a handful of examples in

which families were able to find one provider for multiple children, this was the exception more than the rule in our sample.

One mother from Little Village described the challenges she had finding childcare to meet the needs of her preschool and elementary school-aged children. Because the pre-K hours were too short for her to be able to work a shift at her place of employment, she needed a program that offered a transportation service from pre-K to the center, or a full-day center. In addition, she needed a center that would also accept her elementary-school age child and pick him up from school. While she found one center that met her transportation needs, she could not find a center that would accept both of her children. She remarked, "I didn't choose it because they did not want to let my older child enroll. They said he was too old for the program. And I needed a daycare for both of them, if not who is watching my other kid while the other one is at school?" *[translated from Spanish]*. Because she could not find a program that met both these requirements, she and her husband decided that she would stay home until the youngest went to kindergarten.

Proximity. Many mothers in our sample noted the importance of proximity of a childcare arrangement to one's home, the home of a relative, or one that was located along a route to work. For example, one participant from Belmont Cragin indicated that she considered only a handful of care options, all located close by so that she would not have to travel far. For this mother, proximity was primary and defined her choice set.

Proximity of arrangement is important for most everyone, but especially for those who do not have a car and whose relatives (mostly grandmothers) do not have a car. This is usually an issue of convenience for pickup and drop-off. However, it was also important in the event of an emergency or a sudden need to pick up the child due to illness or some other reason. A participant from Belmont Cragin discussed liking to be close to the care location in the event of an emergency, big or small: "Yes. . . access. I know that if they call me in case of any emergency here, I can be there fast. Because there is always an emergency, they get wet or whatever. So I said, it's better here, it's closer" *[translated from Spanish]*. Some families selected a childcare provider because the program was located within walking distance from their or a family member's home or workplace.

While proximity is important, some mothers actually wanted care outside of their community, or in one section of their community, because of safety concerns. For instance, one mother from Belmont Cragin placed her child in care that was "far away" from home but she knew was safe as her other children had attended the same school:

> That's why you, as a parent, do the effort and look for it. It may be far away. . . . It was far away. . . I already have the experience [with the facility]. There are many Head Starts. But I don't know how they will be treated. There are many in my area, but I don't have the trust. When you have a child, you love him and want to give him the best. You don't want him to suffer, or for a teacher to treat him badly. So, if you have already seen a place where they treated you fine, you continue there. *[translated from Spanish]*

3.3.2 Affordability

Most of the mothers in the sample underscored during their interview that child care needs to be affordable. It was the central to decision making for most participants; for others, it was important but not the fundamental driver. Some families did not put their children in care at all because of affordability reasons. Other mothers used subsidized care, either subsidies or public pre-K, but most did not. Not all mothers knew about the subsidy program (as noted in an earlier section of this report), and some of those that did reported that they either were not eligible or they assumed that they were not. In one case, a mother from Little Village spoke of underreporting income to qualify for a subsidy; two minimum wage jobs in their dual income household put the family over the income ceiling for subsidy eligibility.

Another participant from Belmont Cragin had been using subsidized center care for her children but she lost the subsidy because she had lost her job and was no longer working. Instead of looking for a less expensive care arrangement, she decided to stay home with her daughter. In her words, "I had my kids in daycares for a long time, but then I couldn't, because I couldn't qualify (for a subsidy) anymore. But I saw things that I didn't like, so with the last one, I said this is the last one—it's the last girl so I prefer to take care of her myself" *[translated from Spanish]*.

Affordability compounds other logistical challenges, like finding care for multiple children. For example, one of the mothers from Little Village had trouble finding an arrangement that was affordable (we mentioned this mother earlier, as she had trouble finding a provider that could address the scheduling needs of all her children).. She expressed concerns that she would not be eligible for a subsidy and ultimately decided to stay home with her children. Later in the interview, this same participant stated: "If I had to choose a daycare, I would want it to be affordable. The reason parents work is because they need money so it doesn't make sense that they charge you too much because if you did not need the money then only one parent would be working" *[translated from Spanish]*.

Mothers in the co-interpretation meetings confirmed this affordability challenge, with two noting that they had decided to stop working when they had children because the cost of childcare was higher than their hourly wages. Participants often highlighted the high cost of center-based care in particular. One mother from Belmont Cragin used a center but switched to family childcare because it was somewhat more affordable.

> *Participant*: So that was the only difference, and then the cost, the home daycare was a little bit cheaper because it's a home daycare. It's not an academy like [center she used to use]. So it was, I think, slightly cheaper but not a huge difference, honestly.
>
> *Interviewer*: Got it. But that was the reason that you went back there for a while? It was because of the cost, right?
>
> *Participant*: Right. Right. That's why.

Similarly, a mother from Little Village reported using her friend's grandmother who runs a family childcare program because all the centers and schools around her were too expensive. She explained that the cost of childcare kept her from continuing to use formal center-based programs because "half of your paycheck is going to go to you and half is going to the daycare."

Relatives, especially grandmothers, were an affordable solution for many families— when they were available. However, not all relative care is provided without monetary cost and not all mothers had family who could help care for their children. On the other hand, one mother stated that because she could afford a center, she did not want to burden her mother. One mother who used relative care indicated she would prefer a private school if she could afford it, but was not interested in the centers that were near her because she did not perceive them to be high quality.

3.3.3 Responsiveness to children's well-being

The importance of factors such as convenience and affordability does not imply that parents were not also seeking care that met certain quality expectations related to their children's well-being. A mother who emphasized using a particular arrangement because of its schedule might also talk about the importance of finding a provider who could meet a child's developmental needs or provide appropriate socialization experiences to prepare for kindergarten. For example, one Little Village mother's discussion of decision factors shows how these decisions are based on a holistic assessment, not just one factor:

> Well, the biggest reason why my mom is watching him is because one, she's available and it's free. So I guess the cost is a big issue. And she's available. And I trust her, I know her. But she's also very hands on with him and with my niece. And she's very consistent about his schedule. Like she got his schedule down before I got his schedule down, and she was telling me, "This is when he naps, this is when he eats. He usually poops around this time of the day." So I get a report from her at the end of the day, like this is what he did today. There's play time, she has one-on-one time with him where they're just cuddling. . . I will provide the supplies, but she'll do everything else.

As this quote illustrates, while the affordability and convenience of the participant's mother as a childcare provider was a major driver in this decision, trust, intimacy, and consistency of care were also critical factors.

Trust and Child Safety. Nearly all participants in both communities shared the view that child safety and trust are central to decisions about child care. Mothers need to trust that their child will be safe in another person's care in order to use that arrangement. However, mothers have different opinions about what kinds of care are more trustworthy. For example, some mothers only trusted their relatives to care for their child, while others were more comfortable with nonrelative care under certain conditions.

It was common for participants with very young children, and some with older children, to only be comfortable with family or close friends caring for their child. For example, one mother from Belmont Cragin told us, "I don't trust just anybody with my kids. The only ones I really trust are my sister-in-law, my aunt, and my mom, that's it. Nobody else, I'm very overprotective of my babies. They ask me, 'Why isn't he in daycare?' I'm like, 'No, no, no daycare for my baby'."

The majority of mothers that expressed this concern were referring to a child that is 2 years of age or younger. Concerns about the safety of very young children were echoed by mothers who reported that they wanted to wait to put their child in nonrelative care at least until they can talk. A number of mothers felt that once a child can communicate, they can tell the parent if they are being mistreated by a childcare provider. One mother from Little Village said "I don't trust these places. When they are very young they can't talk. They don't know. I do trust more when they are older because they can talk and tell" *[translated from Spanish]*.

Many mothers expressed concern about the potential for abuse and neglect in childcare centers based on information they had seen in the news or online, while others managed these concerns by seeking providers that met their standards for safety and trust. These concerns were echoed by the mothers who participated in our co-interpretation meetings. These mothers

noted that if families have a bad experience with one provider, they are often not willing to try another one.

Several interview participants felt they could trust a provider if they received a reference from a trusted source, and this sentiment was echoed at both co-interpretation meetings. Participants expressed this opinion for both center-based care and informal arrangements. Some participants shared that they had done research, or would do research, in order to trust that a center is safe for their child. One mother from Little Village, who previously had a negative experience with a family childcare center, indicated that she would do research online in addition to observing the center in person. The mother said, "I would want to shadow or go check it out in person. I look at reviews" *[translated from Spanish]*. One mother from Belmont Cragin explained how leaving her child in someone else's care was scary for her as a mother. Emphasizing the importance of researching her childcare options, she said:

> The biggest thing for me is just research. Research. Go in there. Go in and talk to people. Don't hold back from asking questions. It's your kid. . . . Like I said, I'm leaving my kid with someone I really don't know. So you have to get as much information as you can.

When exploring options for child care, participants highlighted certain features of childcare centers that would make them feel the arrangement was safe. Several mothers expressed that they would feel safer in a center that had cameras, or that they chose a center because of cameras. Participants believed that cameras hold providers accountable because parents can ask to see footage if they suspect mistreatment or neglect. Mothers participating in the co-interpretation meetings confirmed that having cameras, as well as clear rules and regulations, helped make childcare providers more trustworthy.

Some participants consider the physical safety of the building. For example, one mother from Belmont Cragin expressed that cameras are not enough, because they do not prevent something bad from happening. This participant selected a center that had multiple doors before entering the center, believing this would help prevent child abduction, saying, "Okay it's registered in cameras, but they've already taken the child" *[translated from Spanish]*. The importance of multiple locking doors was also highlighted by a mother participating in the Belmont Cragin co-interpretation meeting. Interview participants considered other features of the physical environment as well. One mother from Little Village reported that in selecting a center she "observed the walls, the edges of the furniture and I didn't find anything dangerous" *[translated from Spanish]*. Another mother ruled out a center because she felt the area outside the center was too dangerous, including dangerous traffic patterns.

In addition to physical features of centers, some participants also discussed child-to-teacher ratios in regards to safety. In some cases, this was because they believed their child would get

more attention; in other cases it was that there would be more supervision to ensure other children did not hurt their child. Mothers in the co-interpretation meetings also emphasized the importance of having small class sizes and teachers who are well-trained and certified.

Child Needs and Development. Participants often sought childcare to support meeting developmental milestones. In line with previous research, mothers in our sample frequently spoke about using childcare to develop social skills, kindergarten readiness, and language. These items are not mutually exclusive, and many participants reported seeking a center that supported more than one of these goals.

Many participants chose formal childcare options, they explained, in order to develop social skills such as speech, language, and interacting with other children. One mother from Belmont Cragin emphasized that her child needs to learn to share, saying, "I feel that that's what he needs, to be around more kids his age and that way he can learn more about sharing. Cause with his brother, his brother is like 'don't touch my toys, those are my toys. Don't touch my crayons, don't touch this.'" Several mothers expressed that their child is too attached to the parent or too shy around other people. This need for socialization motivated mothers to use nonrelative care. They usually spoke of center-based care as their preferred alternative.

A few participants described the center as a resource that can help parents identify if their child is meeting developmental milestones on time. These participants viewed childcare teachers and staff as experts who could recommend intervention if necessary. In addition, several participants said that a center they used for an older child was able to identify that child's developmental delays. Thus, the mother chose to use the same center with the younger child to ensure issues were identified if they exist and necessary supports referred. For example, one mother from Little Village indicated:

> Because the 5-year-old, I had the same situation with the 6-year-old, they weren't speaking. They were getting therapies and everything, and once they turned 3, that was it. The good thing they were in the care of [center], it was helping them. At the end of the day, once they turned 3, I talked to my caseworker, and she told me to just keep on bringing them. . . . And when they get social with the other kids, they're going to start speaking. And they did. It helped them a lot. *[translated from Spanish]*

A majority of participants indicated that they prefer either bilingual or Spanish language instruction. In some cases, this was because the mother speaks mostly English to the child and they want the child to be bilingual. In other cases, participants felt Spanish language instruction was important because the child only speaks Spanish. Some participants shared that experiences with language for their older children affected the decision for their current child. Although the

majority of participants did prefer bilingual or Spanish instruction, a handful of participants did not have a preference.

Participants who preferred programs that emphasized education and kindergarten readiness often compared childcare programs to school. These participants differentiated between centers that simply looked after children, and those that emphasized learning. One mother from Belmont Cragin who used center-based care said, "And day care, I feel they don't teach them the letters, the numbers, but it's only being there, looking after them. I wanted my kid to learn. This is like a little school" *[translated from Spanish]*. Some participants shared that they particularly liked separate classrooms by age for educational purposes, compared to family childcare centers where children of all ages are together in the same space.

Some mothers in our sample who wanted to use formal childcare reported difficulty finding a program that was equipped to handle their child's health or behavioral needs. Several participants described their children as "hyper," and all participants who described their children this way said that they need providers who are patient. Similarly, mothers of children with severe or complicated health issues reported difficulty finding a program with the knowledge and resources to care for their child. In our sample, this led mothers to provide care for their kids on their own. For example, one Little Village participant was not able find a center that met all of her needs for her child who has a medical condition and requires specific therapy. While public pre-K does offer the therapy, the mother does not like the rigidness of the program. She explained:

> She was sent there because of the therapies at that school. So, I've had many, many, many problems in that balance of her being in a good school that helps in everything, and therapies. She needs therapies, yes, but she's going to go down emotionally and developmentally in that school; and if I take her to [center] she's not going to have therapies. *[translated from Spanish]*

4. Influences on Parent Decisions

Our final research question asked how mothers in our sample learned about childcare options in their communities. Across both communities, mothers referred to similar information sources when searching and making decisions about childcare.

The interviews with mothers identified several key sources of information. The most common sources were social network members, including friends, neighbors, and relatives ($n = 19$), followed by informal observation (e.g., seeing a center or other childcare program on the street; $n = 10$). After learning about a center or family childcare from a friend or relative or seeing it on

the street, a few mothers, who engaged in a more active search process, visited the program in person to observe or get more information. Other sources of information that participants mentioned included using the internet ($n = 3$), their high schools ($n = 2$), parenting programs ($n = 2$), or outreach by childcare providers ($n = 2$). Of the 25 participants who named specific sources of information about child care, more than half reported obtaining information from multiple sources.

4.1 Influence of Family Members and Social Networks on Childcare Decisions

Family members were highly influential in child care decision making. At the same time, our interviews also suggest that these decisions were made, to some degree, jointly; family members' concerns often mirrored those of mothers. It was common for mothers to report that their childcare decisions were not made independently. Partners and grandparents were often involved in the decision about what kind of care to use or whether to use childcare at all, based on their beliefs or cost considerations. Some mothers reported that the child's father was particularly concerned about putting a child in nonparental care because of safety and health concerns or beliefs about the benefits of children being cared for by the mother until kindergarten. One mother from Belmont Cragin talked about her husband's resistance to using formal childcare. She explained, "The idea of my husband is that parents should take care of their children. That is the healthiest. When you can" *[translated from Spanish]*. This mother ultimately convinced her husband that the center was safe and affordable, and that their child enjoyed attending the center. This case suggests that family belief systems may sometimes be mitigated by new information or personal experience with childcare facilities.

These opinions were sometimes discussed by the mother as the father's view, and sometimes a joint perspective of both mother and father. For example, a mother from Little Village reported that with her first child her husband told her, "You are not going to work until my child can speak and defend herself" and then with the next child, she told her husband the same thing. In her words: "When she was born, I told him the same thing now. I told him, 'Now I'm not going to work until my daughter can speak well, can defend herself.' And he said, 'Okay, it's okay'" *[translated from Spanish]*.

In other instances, grandparents were heavily involved in the decision-making process. One participant from Little Village shared that her mother brings home information about childcare programs to share with her, and it was evident that her mother had a strong influence on the participant's childcare decisions.

Relatives were another common source of information for seven of the mothers in the sample. For example, a mother from Little Village learned about a childcare center in the area from her

brother. She reported, "Well, to be honest, when you come here [immigrating to the United States], the truth is you don't have too much information. . . . So, fortunately, I came here with a relative, my brother." According to the mother, this program was the only option she was aware of since her brother was her only source of information during her childcare search. Several mothers added that their relatives guided them through the childcare search process. For example, one mother from Belmont Cragin relied on her own mother to find childcare options, explaining, "She [her mother] is a teacher's assistant, so she's good with kids and other teachers. So she's pretty aware and. . . very good at finding babysitters."

Often mothers reported that they had generally heard good things about programs in their area but did not identify the individuals who provided them information. Twelve mothers, however, reported hearing about childcare arrangements from their friends and neighbors. Several of these mothers mentioned that their friends told them about the childcare programs their children attended. Often, like relatives, friends and neighbors were not only a source of information about childcare options but also about their perceived quality. Two mothers said their neighbors shared positive views of the childcare programs they had used, whereas another participant said she had heard bad reviews about a center from her neighbor.

Other mothers benefited from having friends or relatives who worked for childcare agencies or other institutions that provide information on childcare options. For example, a participant from Little Village found out about childcare from her mother, who worked in a hospital and had access to pamphlets that outlined different childcare options, which she then shared with her daughter. Mothers who participated in our co-interpretation meetings confirmed that word of mouth from family and friends was the most common way to learn about childcare options.

4.2 Informal Observation

Ten mothers reported learning about childcare options from seeing programs when walking or driving through the community. One mother noted that a center's sign caught her attention. Others said that they just noticed programs on the street during their daily commutes. While some mothers knew the names of particular programs, others only knew where they were located. Although these mothers knew where some programs were located in their communities, most had not visited them. The reasons were not always clear but seemed to be related to less urgency in the need for childcare. In addition, one interviewee from Little Village reported that she was not comfortable going inside a center or other program to get more information.

4.3 The Internet

Few mothers reported using the Internet to discover childcare options in the area. One mother from Little Village explained how she did not know how to find out about childcare and said, "I

started looking and there was no one to tell me anything. I wanted a program, or some activity, something. And there was nothing, so I started searching the Internet and everywhere" *[translated from Spanish]*. Two of the mothers who relied on online reviews also thought it was important to visit programs in person to get more reliable information. One mother from Belmont Cragin explained how she prefers to visit in person in addition to using the Internet. She said, "Sometimes I use the Internet. I try not to rely on it too much. . . . Usually, if I want information, I go into the center. I'd rather speak to someone physically. . . you get a better sense of feel when you go in there." This mother understood the limits of online reviews and felt that her first-hand experiences would be more valuable than reading about a second-hand encounter with a center.

In addition to searching for childcare online, mothers also found guidance on social media. One mother from Belmont Cragin saw that a friend from church posted on Facebook offering childcare services. Since the mother knew that her friend had experience taking care of children at their church, she reached out and used her friend's services.

4.4 Other Sources of Information

Although less common, there were mothers who also described learning about childcare arrangements from their high schools, parenting programs, outreach by childcare providers, or a medical provider.

Two mothers reported that their high schools offered resources for students with children. A mother from Belmont Cragin described how her school brought in a worker from a large Chicago-based nonprofit organization to give the students information about childcare arrangements in the area.

Two mothers from Little Village found out about childcare options from various support and information groups for parents. One mother reported that her Parents as Teachers[17] home visiting program provided the participants with information on different centers and their requirements. Another mother from Little Village did not specify the type of support group but referred to it as a "mom group." This mother felt she received contradicting information from the group and said,

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[17] The Illinois Parents as Teachers program (https://patillinois.org/) is an evidence-based comprehensive home visiting and parent education service available to families from before birth through kindergarten.

> In the mom group they would tell us over here for, "Did you guys hear this article? Did you guys hear this article? Did you guys hear the news?" I'm just like, "Why do you want us to put them in daycare?" Because, they give us resources like, "Oh. You could put them in a daycare and fill out the [application for subsidized childcare]". . . I was like, "Why do you want us to put them in daycare then if you're telling us that they're bad?" But they were like, "Oh. We're just saying the pros and cons."

Finally, two mothers from Belmont Cragin reported finding out about childcare options from various centers' community outreach efforts. One mother saw a flyer at a public aid office for a childcare center in the area. The other mother learned about a center from recruiters sharing information about the center in a local park. There were also a couple of families who learned about programs through referrals from other childcare arrangements that were at capacity.

DISCUSSION AND RECOMMENDATIONS

1. Summary of Findings

Findings from this study indicated few differences in the knowledge of childcare options between Latino families in the two selected communities. There also were few differences in how mothers reported learning about childcare options and how they reported making decisions about child care. Our findings suggest that there are greater differences within the two communities than between them. Therefore, we conclude that density of formal (i.e., licensed) childcare centers and homes is not a primary driver of child care decision making in our sample. This does not mean that child care supply is unimportant but rather that other factors in addition to program supply disrupt parental access to care. It may also suggest that child care density is insufficient, even in Belmont Cragin, to noticeably shape families' child care decisions. Below we summarize findings by research question.

1. How do families living in two Latino communitites in Chicago understand their childcare options?

In both communities, participants perceived a limited supply of childcare options. In Belmont Cragin, which has a greater supply of childcare centers, participants were more likely to discuss a shortage of childcare slots and experiences of being waitlisted for care. In Little Village, participants were more likely to discuss an overall shortage of childcare centers. However, nearly all participants were able to identify at least one formal childcare option or preschool by location. Although participants were aware of some programs, they reported needing more information to better assess which options they could trust. Most participants were also aware of public supports to pay for child care, but were less familiar with the eligibility requirements and application process. Participants who spoke English, or English and Spanish, were more likely to be familiar with specific childcare centers and subsidized care than those who primarily spoke Spanish.

2. How do families make decisions regarding childcare enrollment?

Decision-making processes for participants depended on a combination of preferences, family resources and needs, and community resources and constraints. Participants' decisions about childcare were often embedded in family decisions about paid employment and parenting roles. Further, grandmothers and spouses often influenced the decision-making process. When making decisions about childcare, participants considered a wide range of factors, including

issues of convenience and issues related to the provider's quality of care and sensitivity to child well-being. Convenience issues include alignment of scheduling needs, accommodating multiple children at one childcare site, proximity, and affordability. Issues concerning quality and sensitivity to children's well-being include trust and safety and child needs and development. Trust and safety were factors expressed by almost all of the participants we interviewed and they were tied to decisions related to both home-based and center-based arrangements.

3. How do families learn about the childcare arrangements available in their communities?

Participants in both communities primarily learned about childcare options from friends, neighbors, and relatives, and from seeing a center in their neighborhood. Less common sources of information included internet searches and parents' former high schools. A small number of participants learned about childcare options through other community organizations or programs. This was confirmed in interviews with childcare center directors, who reported that families most often find their programs through word-of-mouth referrals.

1.1 Study Limitations

While our study on child care decision making in Little Village and Belmont Cragin offers new insights on the influence of numerous factors shaping Latino parents' childcare decisions, it is limited in its scope. For instance, we did not interview licensed or licensed-exempt home-based providers, or CPS pre-k providers. It may be that these providers would have offered a different perspective on childcare options in their communities than did the center directors with whom we spoke. Our interview participants included mothers in and outside of the laborforce, but mothers in paid employment were underrepresented. It may be that mothers in paid employment in our selected communities did not have as much time to participate or did not have sufficient access to information on the study. Future work that provides a broader representation of Latina mothers in the workforce and childcare providers across all sectors would be useful. Finally, our qualitative design and purposive sampling approach precludes analysis that directly tests the statistical relationship between child care density and parental child care decisions. Future research with a representative sample of Latino families across several communities that vary in child care density is necessary to provide answers to that question.

2. Policy and Practice Recommendations

Contrary to our expectations, we did not find substantive differences between two Latino communitites in mothers' knowledge and decision making about their children's care arrangements as a function of formal childcare supply or density. At the same time, our findings point to several barriers experienced by families seeking formal childcare arrangements and policy directions that would improve childcare access for this population. We recommend that

the City of Chicago continue to strive to provide universal pre-K through both CPS and community-based childcare providers. Additionally, the City should aim to extend universal care goals to reach younger children, and increase supply for underserved groups, including Latino families. Even with increases in supply, though, our study identified barriers to child care associated with information deficits, cost, and complex eligibility requirements (see section 2.2). Specifically, we offer recommendations that aim to improve information dissemination to better inform parents about available options and to address some of the many system- and program-level barriers to enrollment for Latino families.

This set of recommendations was drawn from the interviews with mothers in both communities and shaped by input from community partners. Community partners emphasized the importance of tailoring new initiatives and policies to the unique needs of neighborhoods and drawing on the strengths of neighborhood institutions. They shared the many resources already in place in each community and the challenges that community members and agencies face.

We recommend a multipronged intervention strategy that involves multiple stakeholders and emphasizes knowledge creation and dissemination, as well as improvements in childcare access and supply. Our recommendations include several suggestions for improving and diversifying outreach and information dissemination to the Latino community. Community partners emphasized that gaining trust and showing respect to families is necessary for effective outreach, especially outreach by formal providers and childcare agencies. Greater provider outreach is valuable, and our findings also suggest that word-of-mouth communication through families' social networks is especially effective. Our community partners echoed this finding and expressed that parents value having people who "look and sound like them" sharing their personal experience and guidance. Thus, we emphasize recommendations that leverage and build upon existing community relationships and networks to promote the spread of reliable and trustworthy information and guidance.

Our recommendations apply to both communities. However, by targeting formal childcare providers, community-based organizations, and city- and state-level policymakers, they attend to and expand upon each community's particular childcare landscape. By centering the recommendations around the particular barriers that Latino families in Belmont Cragin and Little Village face, we believe that stakeholders will be better equipped to support Latino families and meet these communities' unique childcare needs.

2.1 Disseminate Information about Childcare Options and Subsidies

Local-Level Advocacy

- **Maintain and regularly update bilingual directories outlining childcare options in the community and nearby areas. Expand dissemination strategies to increase awareness of resources.**

Mothers in both communities reported a need for more information about childcare availability close to home or work. Social networks are a valuable source of information to families in navigating childcare and community resources. Nevertheless, the information available in these networks is limited to the knowledge held by members. Therefore, maintaining community guides on childcare options for parents may help improve and increase the amount of information parents have about childcare. These guides could serve as a directory while also providing information that can help families determine whether a program would be appropriate for their needs. Since many of the mothers in our sample were not currently working, disseminating these community guides at sites that stay-at-home mothers are likely to frequent or be in contact with may be a worthwhile strategy. For instance, clinics and doctor's offices, restaurants, markets (mercados), and local nonprofits (even if they do not work on childcare issues) may be prime sites to distribute information. To increase accessibility, these community guides should be provided in both English and Spanish.

- **Equip existing community access points, such as libraries, home visiting programs, health clinics, and ESL sites, with information and resources to help families enroll in formal childcare.**

Mothers reported a need for more information about childcare options, as well as some confusion about the process for enrollment in formal childcare. Existing community access points that families are familiar with for other resources and services can be leveraged for dissemination of information, such as the community guides identified above, as well as to provide hands-on support in the childcare search and enrollment process.

- **Promote local hiring of childcare providers.**
Several mothers learned about childcare options from relatives or other members of their social networks who worked at childcare programs. If more programs are encouraged to hire their providers and other staff locally, then these local staff members will likely refer members of their social networks to these arrangements. These referrals will help increase program enrollment as well as facilitate the spread of information on local childcare arrangements.

- **Work with local organizations to form informal support groups for new parents which can serve as spaces for parents to share knowledge and experiences about childcare.**

Many participants reported learning from other parents' experiences with formal childcare arrangements. Creating spaces for parents to discuss knowledge and experiences with childcare can promote information sharing and help parents to make informed decisions about childcare.

- **Encourage provider outreach to be rooted in personal connections as opposed to consumer relations.**

Findings from our co-interpretation meetings suggested that mothers want outreach that feels more personal and less like a transaction. Mothers reported how they value human relationships over consumer relationships when it comes to making childcare decisions. Encouraging childcare providers to employ outreach strategies that emphasize personal connection could allow families to feel more comfortable putting their children in formal care arrangements.

- **Encourage childcare programs to hold open houses and highlight safety features in marketing materials.**

Almost all of our participants reported safety of childcare sites as a factor in their child care decision making. Safety features that participants commonly considered important included trained staff, cameras, locking doors, and low teacher-child ratios. To improve trust and help alleviate safety concerns of parents, childcare programs might hold open houses and highlight safety features in their marketing materials.

- **Increase the transparency of eligibility requirements at childcare centers.**

Mothers and childcare center directors both raised concerns about confusion around eligibility requirements and waitlist processes at childcare centers. Community partners highlighted challenges referring families to programs without having a clear understanding of their eligibility requirements. Providers said they were referred families who were not eligible to enroll. Increasing transparency around eligibility requirements and waitlist processes could help families connect with the right programs to meet their needs and increase the efficiency of recruitment and enrollment processes.

2.2 Reduce Barriers for Childcare Enrollment

State-Level Advocacy

- **Encourage enhanced methods of engagement between Illinois Action for Children and local childcare providers to disseminate information on the CCAP subsidy program.**

Many of our participants did not mention, or were unfamiliar with, childcare subsidies which would help offset the cost of care. Some families who were aware of the subsidy program did not investigate it further because they assumed they would not qualify. Enhancing partnerships

between Illinois Action for Children and childcare programs can clear up misconceptions about eligibility criteria and strengthen overall information about affordable child care alternatives. This may improve access to subsidies by improving the information flow to providers and to unsubsidized but eligible parents using childcare programs.

- **Revise Illinois CCAP subsidy income eligibility threshold for two-parent households.** Both center directors and parents expressed the belief that many two-parent families are not eligible for childcare subsidies because of income rules for two-parent households. Families with two working parents sometimes earned too much money to be eligible, but the high cost of care made childcare inaccessible. Increasing the income eligibility threshold for two-parent households may also lead to greater use of childcare programs, as this would make child care more accessible to families.

- **Encourage childcare providers to increase the number of slots for infants and toddlers and increase public support for this care.**

Childcare center directors reported having difficulty filling available slots because of competition from CPS pre-K. At the same time, they reported that they did not have this difficulty with infant and toddler slots because CPS pre-K does not offer care for these age groups. Despite clear demand, caring for infants and toddlers is more expensive because of stricter requirements for child-teacher ratios. Therefore, increasing public support for infant/toddler childcare is critical and could be achieved through such mechanisms as enhanced payment rates, bonuses, and infrastructure grants to incentivize expansion of dedicated slots for infants and toddlers.

- **Relax identification requirements to access care.**

Some participants mentioned that paperwork and identification requirements posed barriers to enrollment in formal childcare arrangements. This might be of particular concern to undocumented parents. Considering policies that would soften these requirements may alleviate some of the administrative burdens for parents, reducing barriers to formal childcare enrollment.

- **Increase supply of formal childcare and early education options in communities.**

Although we did not observe differences in knowledge, access, or use of childcare options between Belmont Cragin and Little Village participants, there is an urgent need for more options in both communities that are tailored to families' needs and preferences. Participants identified especially high need for programs that serve multiple children of diverse ages, more options for infant care, and low-cost arrangements at unique and diverse sites such as ESL locations.

REFERENCES

Acosta-Córdova, J. M. (2017). *The Latino Neighborhoods Report: Issues and Prospects for Chicago.* Great Cities Institute, University of Illinois at Chicago. https://greatcities.uic.edu/2017/10/11/latino-neighborhoods-report/

Belmont Cragin Quality of Life Plan. (2016). Northwest Side Housing Center and LISC Chicago New Communities Network. http://archive.lisc-chicago.org/uploads/lisc-chicago-clone/documents/Belmont_Cragin_Quality_of_Life_Plan_2016.pdf

Burke, C. W. (2019). Here's who will try to solve the billion-dollar funding question in Illinois early education. *Chalkbeat Chicago.* https://chicago.chalkbeat.org/2019/12/16/21055579/here-s-who-will-try-to-solve-the-billion-dollar-funding-question-in-illinois-early-education

Chapin Hall at the University of Chicago, & the Chicago Department of Family and Support Services. (2017). Chicago Needs Assessment Tool. Retrieved from http://cnat.childrenserviceschicago.com

Chapin Hall at the University of Chicago. (2017). Early Childhood Care Programs Supply and Demand. Retrieved from http://dfss-ecsd.chapinhall.org/child_population_elig.php?comm_id=58

Chapin Hall at the University of Chicago. (2017). Young Children in Chicago. Retrieved from http://dfss-ycic.chapinhall.org/index.php

Chaudry, A., Henly, J. R., & Meyers, M. (2010). *Conceptual frameworks for childcare decision-making*. ACF-OPRE White Paper. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. https://www.acf.hhs.gov/sites/default/files/opre/conceptual_frameworks.pdf

City of Chicago Data Portal. (2014). Census Data – Languages spoken in Chicago, 2008–2012 [Data file]. Retrieved from https://data.cityofchicago.org/Health-Human-Services/Census-Data-Languages-spoken-in-Chicago-2008-2012/a2fk-ec6q

City of Chicago Office of the Mayor. (2017). *Mayor Emanuel launches improved universal preschool application to help families enroll in early learning programs.* [Press release]. Retrieved from https://www.cityofchicago.org/content/dam/city/depts/mayor/Press%20Room/Press%20Releases/2017/July/073117_UPreKApp.pdf

Chicago's Roadmap for Implementing Universal Pre-K: A Plan for Investment in Chicago's Early Learning System. (2019). City of Chicago. https://drive.google.com/file/d/1HsCE7fCOWYXoyYLlxKbK-lq0nQSF7oAL/view?usp=embed_facebook

Community Data Snapshots. (n.d.). CMAP. Retrieved October 25, 2020, from https://www.cmap.illinois.gov/data/community-snapshots

Crosby, D., & Mendez, J. (2017). *How common are nonstandard work schedules among low-income Hispanic parents of young children*. Bethesda, MD: National Research Center for Hispanic Children & Families. https://www. hispanicresearchcenter. org/wp-content/uploads/2017/11/Hispanics-Center-parental-work-hours-Brief-11.1-V21. Pdf

Crosby, D., Mendez, J., & Barnes, A. (2019). *Childcare affordability is out of reach for many low-income Hispanic households*. Bethesda, MD: National Research Center on Hispanic Children & Families. https://www.hispanicresearchcenter.org/research-resources/child-care-affordability-is-out-of-reach-for-many-low-income-hispanic-households

Crosby, D., Mendez, J., Guzman, L., & Lopez, M. (2016). *Hispanic children's participation in early care and education: Type of care by household nativity status, race/ethnicity, and child age*. National Research Center on Hispanic Children & Families. http://www.hispanicresearchcenter.org/wp-content/uploads/2016/11/2016-59HispECEType.pdf

Crosby, D., & Mendez, J. (2017). *How common are nonstandard work schedules among low-income Hispanic parents of young children*. Bethesda, MD: National Research Center for Hispanic Children & Families. Retrieved online at https://www. hispanicresearchcenter. org/wp-content/uploads/2017/11/Hispanics-Center-parental-work-hours-Brief-11.1-V21. pdf. Accessed on, 2, 2020.

Crosby, D., Mendez, J., & Barnes, A. (2019). *Childcare Affordability Is Out of Reach for Many Low-Income Hispanic Households*. Bethesda, MD: National Research Center on Hispanic Children & Families. Retrieved from https://www.hispanicresearchcenter.org/research-resources/child-care-affordability-is-out-of-reach-for-many-low-income-hispanic-households

Dobbins, D., Tercha, J., McCready, M., & Liu, A. (2016). *Childcare deserts: Developing solutions to childcare supply and demand*. Arlington, VA: Childcare Aware of America

Durand, T. M. (2011). Latina mothers' cultural beliefs about their children, parental roles, and education: Implications for effective and empowering home-school partnerships. *The Urban Review*, *43*(2), 255–278.

Forry, N. D., Trout, K., Rothenberg, L., Sandstrom, H., & Vesely, C. (2013). *Childcare decision-making literature review. OPRE Brief 2013-45*. Washington, DC: Office of Planning, Research and Evaluation. Administration for Children and Families, US Department of Health and Human Services.

Guzman, L., Hickman, S., Turner, K., & Gennetian, L. (2016). *Hispanic children's participation in early care and education: Parents' perceptions of care arrangements, and relatives' availability to provide care.* National Research Center on Hispanic Children & Families. http://www.hispanicresearchcenter.org/wp-content/uploads/2016/11/2016-60HispECEParentPerceptions.pdf

Ha, Y., & Ybarra, M. (2014). The role of parental immigration status in Latino families' child care selection. *Children and Youth Services Review*, *47*, 342–351. https://doi.org/10.1016/j.childyouth.2014.10.011

Haverland, M., & Yanow, D. (2012). A hitchhiker's guide to the public administration research universe: Surviving conversations on methodologies and methods. *Public Administration Review,* 72(3), 401–408.

Henly, J. R., & Adams, G. (2018). *Increasing Access to Quality Child Care for Four Priority Populations: Challenges and Opportunities with CCDBG Reauthorization*. Urban Institute. https://www.urban.org/research/publication/increasing-access-quality-child-care-four-priority-populations

Illinois Facilities Fund. (1999). The Chicago early childhood care and education needs assessment. Chicago, IL: IFF.

Illinois Facilities Fund. (2003). Latino families and childcare preferences in metropolitan Chicago. Chicago, IL: IFF.

Little Village Quality of Life Plan. (2013). Enlace. Retrieved from http://www.cct.org/wp-content/uploads/2015/05/LittleVillageQualityofLifePlan2013.pdf

Lopez, M., Grindal, T., Zanoni, W., & Goerge, R. (2017) *Hispanic children's participation in early care and education: A look at utilization patterns of Chicago's publicly funded programs* [Issue brief]. Bethesda, MD: The National Research Center on Hispanic Children & Families.

Magnuson, K. A., & Waldfogel, J. (2005). Early childhood care and education: Effects on ethnic and racial gaps in school readiness. *The Future of Children, 15*(1), 169–196.

Magnuson, K., & Waldfogel, J. (2016). Trends in income-related gaps in enrollment in early childhood education. *AERA Open*, *2*(2), 2332858416648933.

Malik, R., Hamm, K., Adamu, M., & Morrissey, T. (2016). *Childcare deserts: An analysis of childcare centers by zip code in 8 states*. Center for American Progress.

https://www.americanprogress.org/issues/early-childhood/reports/2016/10/27/225703/child-care-deserts/

Mendez, J. & Crosby, D. (2018, May). *Why and how do low-income Hispanic families search for early care and education (ECE)*? Bethesda, MD: National Research Center on Hispanic Children and Families. https://www.hispanicresearchcenter.org/wp-content/uploads/2019/08/Hispanics-Center-parental-search-brief-5.16-V21.pdf

Mendez, J., Crosby, D., & Siskind, D. (2018). *Access to Early Care and Education for Low-Income Hispanic Children and Families: A Research Synthesis*. National Research Center on Hispanic Children & Families. https://www.hispanicresearchcenter.org/research-resources/access-to-early-care-and-education-for-low-income-hispanic-children-and-families-a-research-synthesis/

Mendez, J., Crosby, D., & Siskind, D. (2020). *Work Hours, Family Composition, and Employment Predict Use of Child Care for Low-Income Latino Infants and Toddlers*. National Center for Hispanic Children & Families. https://www.hispanicresearchcenter.org/research-resources/work-hours-family-composition-and-employment-predict-use-of-child-care-for-low-income-latino-infants-and-toddlers/

Mission. (n.d.). Northwest Side Housing Center. Retrieved October 25, 2020, from https://www.nwshc.org/about

NSECE (National Survey of Early Care and Education) Project Team. (2015a). *Who is providing home-based early care and education?* Report 2015-43. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research and Evaluation.

NSECE (National Survey of Early Care and Education) Project Team. (2015b). *Provision of early care and education during non-standard hours.* Report 2015-44. Washington, DC: US Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research and Evaluation.

O'Donovan, M. (2011). The top 10 counties, municipalities, and Chicago community areas in need of care. [Issue brief]. IFF Public Policy and Research. http://iff.org/wp-content/uploads/2017/05/Early-Care-and-Education-in-Illinois-Report.pdf

Pilkauskas, N., Waldfogel, J., & Brooks-Gunn, J. (2016). Maternal labor force participation and differences by education in an urban birth cohort study – 1998–2010. *Demographic Research*, *34*, 407–420. doi.org/10.4054/DemRes.2016.34.14

Ryan, G. W., & Bernard, H. R. (2000). Data management and analysis methods. In N. K. Denzin & Y. S. Lincoln (Eds.) *Handbook of qualitative research* (2nd Edition), pp. 769–802. London: Sage Publications, Inc.

Schwartz-Shea, P., & Yanow, D. (2013). *Interpretive research design: Concepts and processes.* New York, NY: Routledge.

Sullivan, A. L., Farnsworth, E. M., & Susman-Stillman, A. (2018). Childcare Type and Quality among Subsidy Recipients with and without Special Needs. *Infants and Young Children*, *31*(2), 109–127. https://doi.org/10.1097/IYC.0000000000000116

Vesely, C. K., Goodman, R. D., Ewaida, M., & Kearney, K. B. (2015). A Better Life? Immigrant Mothers' Experiences Building Economic Security. *Journal of Family and Economic Issues*, *36*(4), 514–530. https://doi.org/10.1007/s10834-014-9422-3

Who We Are. (n.d.). Enlace-Chicago. Retrieved from https://www.enlacechicago.org/whoweare