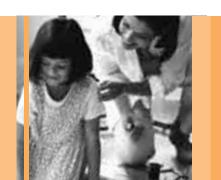
Shaping Young Lives

A Profile of Connecticut's Early Care and Education Workforce







November 2005

Prepared by: Early Childhood DataCONNections

A partnership of the Child Health and Development Institute of Connecticut and the Connecticut Department of Social Services



SHAPING YOUNG LIVES

Authored by:

Susan Wilson, M.S.W. and Frances Duran, M.P.P. Child Health and Development Institute of Connecticut

Survey Conducted by:

The University of Connecticut

Survey Design: Christopher Barnes, M.A., Department of Public Policy

Data Collection/Statistical Analysis: Abdoulaye Diop, Ph.D., Center for Survey Research and Analysis

Acknowledgements:

CHDI is grateful to the following partners who dedicated their time and expertise toward the design of the study and completion of this report:

Helene Alisberg

CT Association for the Education of Young Children

Julie Bisi

CT Department of Social Services

Helene Figueroa

CT Association for Human Services

Deb Flis

CT Charts-A-Course/Accreditation Facilitation Project

Judy Goldfarb

Hartford Area Child Care Collaborative

Lori Matyjas

State Department of Education

Peg Oliveira

CT Voices for Children

Alice Pritchard

CT Women's Education and Legal Fund

Darlene Ragozzine

CT Charts-A-Course

This study was commissioned through a grant from the Career Ladder Advisory Committee with funding for additional staff support through DataCONNections from the Child Care Bureau of the Administration for Children and Families, Department of Health and Human Services and the Children's Fund of Connecticut. CHDI extends its appreciation to these funders, whose generous support made this study possible.

About the Early Childhood DataCONNections Project:

Early Childhood DataCONNections is a public-private partnership of Connecticut's Department of Social Services (DSS) and the Child Health and Development Institute of Connecticut (CHDI). The project mission is to promote well-informed decisions on policies and programs for young children by improving state agencies' research capability. For more information, contact Susan Wilson at 860.679.1524 or swilson@uchc.edu, or visit www.chdi.org.

About the Child Health and Development Institute of Connecticut:

The Child Health and Development Institute of Connecticut is a not-for-profit organization established to promote and maximize the healthy physical, behavioral, emotional, cognitive and social development of children throughout Connecticut. CHDI works to ensure that children in Connecticut who are disadvantaged will have access to and make use of a comprehensive, effective, community-based health and mental health care system.

For additional copies of this report, call 860-679-1519 or visit http://www.chdi.org.

Any portion of this report may be reproduced without prior permission, if cited as: Wilson, S. & Duran, F. (2005). *Shaping Young Lives: A Profile of Connecticut's Early Care and Education Workforce*, Farmington, CT: Child Health and Development Institute of Connecticut.

INTRODUCTION

In Connecticut, nearly two-thirds (62%)¹ of children under age 6 live with working parents. Many of these children spend considerable time in the care of an early childhood professional, either at a child care² center or in a family child care home. Thus, the estimated 16,000 early care and education teachers in licensed child care centers, school-based preschool programs and licensed family child care homes are positioned to have a significant impact on Connecticut's children. The nature of that impact, however, is dependent upon their ability to provide a high quality child care experience.

Why is quality important?

A significant body of research supports the strong connection between quality of care and child outcomes. The Cost, Quality and Outcomes study, which tracked a group of children from age 3 through the early elementary years, found that higher quality child care led to improved cognitive skills (e.g. math and language abilities) and social skills (e.g. interactions with peers, behavioral skills) for children. These gains remained through the transition into school and at least through kindergarten.³

What constitutes quality?

Research clearly identifies several factors that contribute to high quality care and positive child outcomes: small group size, low staff-to-child ratios, caregiver stability and well-qualified providers. High quality settings are nurturing, teach children the developmental skills of daily living and prepare them for success in school.

Why focus on the workforce to achieve quality?

Research shows that a well-educated, stable child care workforce is the foundation of quality programs. Thus, in-depth knowledge of the child care workforce is essential for assessing how well the system provides care and fosters healthy physical, social, emotional and cognitive development in Connecticut's youngest children.

Provider issues of particular interest are:

- Education and experience
- Wages and benefits
- Turnover

I U.S. Census 2000.

² "Child care" is used throughout this report as a synonym for early care and education, day care, preschool, nursery school, early childhood development, early literacy and other similar terms.

³ Cost, Quality and Outcomes Study. National Center for Early Development and Learning. Available at http://www.fpg.unc.edu/~ncedl/pages/cq.cfm.

ABOUT THE SURVEY

To expand the pool of knowledge regarding Connecticut's caregivers and provide a means for comparing findings with earlier data collection efforts, Early Childhood DataCONNections, the Connecticut Career Ladder Advisory Committee⁴, and the Connecticut Women's Education and Legal Fund commissioned the Department of Public Policy and the Center for Survey Research and Analysis (CSRA) at the University of Connecticut to conduct a telephone survey of child care centers⁵ and family child care homes to evaluate the key provider issues previously outlined.

A total of 407 centers, both licensed and license-exempt (operated by schools), and 204 licensed family child care homes participated. Respondents were interviewed during the month of June 2005. The sample was designed to capture an approximately equal number of interviews with centers and homes in each of five regions, as defined by the Department of Social Services (DSS). Weighting techniques were then applied to the sample data to generate accurate population estimates. This report is based on analysis of weighted data. To view a copy of the survey instrument with unweighted responses, visit www.chdi.org.

⁵ Sample includes both licensed and license-exempt centers, as well as 15 group day care homes.



⁴ Public Act 03-142, An Act Concerning Career Ladder Programs, was enacted in June 2003 establishing a Connecticut Career Ladder Advisory Committee to promote the creation of new career ladder programs and the enhancement of existing career ladder programs for occupations with projected workforce shortages. The Office of Workforce Competitiveness, in consultation with the Permanent Commission on the Status of Women, was charged with developing a three year plan for the creation or enhancement of career ladder programs for occupations in early childhood education, child care, health care or any other programs for occupations with projected workforce shortages for the next five years and to report to committees of the General Assembly having cognizance of matters related to higher education and employment advancement. This plan documented the lack of data on the early care and education workforce and resources were set aside to commission this study.

TABLE I

Regional Distribution of Participating Survey Respondents ⁶				
Location	Child Care Centers	Family Child Care Homes		
East	80	43		
North Central	82	40		
North West	81	40		
South Central	84	41		
South West	80	40		
Total	407	204		

As with any survey, there are some limitations in the data collected. Because this study's center-based informants were generally directors, detailed data on individual teachers were not collected, preventing statistical analysis of the interrelationship between educational attainment, salaries, employee benefits and turnover. A periodic study of individual employees would provide that valuable information. Furthermore, this aggregate level of data collection precludes one's ability to examine variability among individual staff members within one site. Additionally, for

several survey questions, there were a large number of "don't know" or "refused" responses. This primarily impacted questions regarding family child care assistants and gross income for family child care providers. Finally, in hindsight, there are additional questions that would have strengthened the survey, particularly with respect to the data gathered on center directors. The survey did not capture directors' annual incomes nor did it ask for their overall years' of child care experience; just the number of years in the current position.

Weights were applied to data collected from each region based on estimated population totals for each region as contained in the original sample frame. Two weights were applied. One weight adjusted the proportion of all records to reflect the relative population located in that region. A second expansion weight adjusted the data to reflect the total number of facilities in each region.

SURVEY HIGHLIGHTS

What's in this Report?

- Introduction and Survey Highlights
- Profiles of Connecticut's Child Care Centers and Family Child Care Homes
- Snapshots of Provider Qualifications, Compensation and Turnover
- Spotlight on Workforce Data by Position: Directors, Teachers, Assistant Teachers/Aides, and Home Providers
- Comparative Analysis of Variations Across Private, School-Based and Grant-Funded Programs

Some of the information gathered during the 2005 survey was not "new," but rather an update on major data points previously examined by DataCONNections and other organizations.⁷ Interestingly, when contrasting data from the current survey with relevant findings from Connecticut's 2001 Child Care Market and Workforce Study, there was little movement on most issues common to both surveys.⁸ However, many of the survey findings are based on data that were unavailable in the previous study.

The new and more robust dataset offers a more complex view of Connecticut's child care workforce, enabling comparisons across different workforce positions (e.g. director, teacher and assistant teacher/aide), as well as analyses of full-time versus part-time employment and comparisons across private, school-based and grant-funded programs. The findings also provide greater detail on professional qualifications of center-based staff, turnover rates and the provision of benefits to center-based employees, specifically the extent to which those benefits are subsidized.

- 7 For an overview of several key sources of existing information on Connecticut's child care workforce, see DataCONNections' June 2003 report, A Research Perspective on the Child Care Workforce in Connecticut, available at www.chdi.org.
- 8 Common variables included median annual salary for full-time teachers, provision and subsidization of health benefits for center- and home-based providers, and educational attainment among family child care providers. The report on the 2001 study, Connecticut's Child Care Workforce, is available at www.chdi.org.



4

TABLE 2

Connecticut's Child Care Workforce At-A-Glance: Typical Staff Profile by Position

	Center Director	Center Teacher	Center Assistant Teacher/Aide	Family Child Care Provider
Age ^a	48	33	29	44
Race/Ethnicity	White ^b	White	White	White
Gender	Female	Female	Female	Female
Highest Level of Education	Bachelor's Degree	Bachelor's Degree	High School Diploma or GED	High School Diploma or GED
Child Care Experience ^a	6 years ^c	6 years	4 years	12 years
Annual Salary ^{a,d}	NA	\$24,000	\$17,000	NAe

a: Median calculation b: African Americans and Hispanics represent 4% and 2% respectively of Connecticut's pool of directors. c: Data reflect the number of years serving as director at their current center. d: Data reflect full-time employment. e: Income data is not provided, given that 46% of family child care survey respondents declined to provide financial information.



SUMMARY OF KEY FINDINGS

Below is a snapshot of several key findings from the survey. Many others are highlighted throughout this report, organized first by provider type (child care center v. family child care home) and secondarily by workforce position (director, teacher, assistant teacher/ aide, home provider).

Qualifications

- More than half of center directors (57%) and teachers (68%) have completed at least 12 credits in early childhood education.9
- Among directors, 76% have at least a bachelor's degree. The same holds true for 43% of teachers, 11% of assistant teachers/aides and 14% of home providers.
- One in five centers (20%) has no teachers on staff with at least a bachelor's degree.
 However, among school-based programs, this is the case in only 10% of the centers.
- The median level of experience in child care is 6 years for teachers and 12 years for home providers.

Compensation: Income

- Median income for full-time teachers is \$24,000 and for assistant teachers/ aides, it is \$17,000. The overwhelming majority of teachers and assistant teachers/ aides earn less than \$30,000 a year (75% and 86%, respectively).
- Teachers in license-exempt centers (i.e. school-based programs) are much better compensated than those in licensed centers, with median annual salaries of \$40,000 and \$22,000, respectively.
- Between 2001 and 2005, the median income for full-time teachers in licensed¹⁰ child care programs rose by only 6% from \$20,800 to \$22,000, failing to keep pace with inflation (9.3%).¹¹

There is little regional variability in the salaries paid to Connecticut's full-time teachers, although teachers in the southwestern part of the state fare slightly better (65% earn less than \$30,000 a year, compared to roughly 75% in the remaining four regions).

Compensation: Benefits

- A little over 75% of centers provide health benefits to their full-time employees. Of those, nearly one-fifth (18%) cover the full cost of the premium while 74% pay just a portion.
- Among family child care providers, 15% lack health coverage and 33% lack dental coverage.

Turnover

- Overall, Connecticut centers experience a 15% annual turnover rate among their full-time teaching staff (i.e. teachers and assistant teachers/aides). The same turnover rate applies to public school teachers nationally.¹²
- School-based programs (license-exempt) experience less turnover than licensed programs, with only 9% of full-time employees leaving their position within the year, in contrast to 15% in licensed centers.
- The turnover rate is highest among full-time assistant teachers/aides, with one in five (20%) leaving their employer within a 12-month period.
 - ⁹ Data include those with a master's, bachelor's or associate's degree in early childhood education (ECE) or in another field with at least 12 ECE credits.
 - ¹⁰ The majority (85%) of Connecticut's centers are licensed.
 - ^{II} Calculation is based on the inflation rate between June 2001 and June 2005, using the Consumer Price Index as a benchmark.
 - Special Analysis 2005: Mobility in the Teacher Workforce. National Center for Education Statistics. Available at http://nces.ed.gov/programs/coe/2005/analysis. Based on turnover between the 1999–2000 and 2000–2001 school years.

NEW ECONOMIC POLICY INSTITUTE REPORT REVEALS DECLINE IN WORKFORCE QUALIFICATIONS

Losing Ground in Early Childhood Education, a new study by the Economic Policy Institute (EPI), provides a historical view of compensation and educational qualifications among the child care workforce. EPI characterizes the child care industry of 20 years ago as being dominated by nursery schools staffed by degreed teachers caring for middle class children. In contrast, today's larger industry supports a wider demographic array of families and attracts far fewer early childhood educators with college degrees. Wages, however, have remained consistently low over time. To view the report, go to www.epi.org/content.cfm/ece.

Despite differing methodologies used in the EPI study and Connecticut workforce survey discussed herein, one can confidently compare data on educational attainment among early childhood staff (directors, teachers, assistant teachers and aides) in licensed Connecticut child care centers:



TABLE 3

Qualifications of Educational Staff in Connecticut Licensed Child Care Centers

	Below an Associate's Degree	Associate's Degree	Bachelor's Degree or Higher
EPI Study (2004 Data - CT)	43%	14%	43%
CT Workforce Study (2005 Data)	43%	17%	37%

CHILD CARE CENTERS: Overview

About the Data

The survey yielded a sample of 407 child care centers¹³ that serve predominantly children under the age of six. The interview responses, given by center directors, reveal the organizational and personnel practices of the center-based industry.

In this report, center-based findings on qualifications, compensation, working hours and turnover are differentiated by staff position: directors, teachers and assistant teachers/aides. This provides a fresh perspective on Connecticut's workforce, as most national studies have not presented this level of detail. The section on child care centers concludes with a special analysis that contrasts centers by regulation status (licensed, license-exempt) and dominant funding source (public grants, school funds, private fees).

A Profile of Connecticut's Child Care Centers

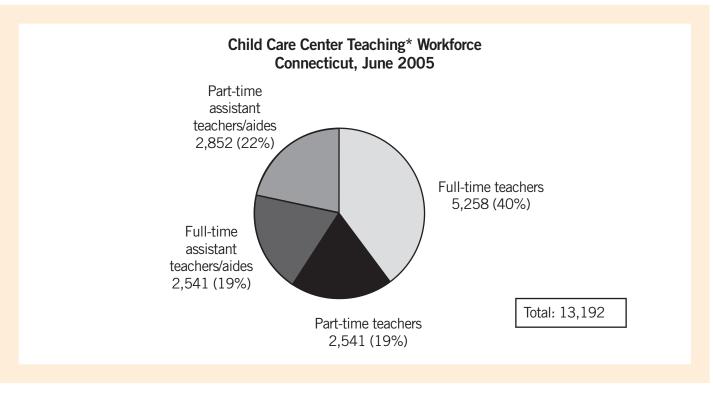
The majority (86%) of centers in Connecticut have been **in operation** for more than five years. One-third (34%) of the centers are open for only 10 or fewer months out of the year, although most (62%) are open year-round.

With regard to **staffing**, the percentage of centers with full-time teachers on staff is much higher (87%) than the percentage employing part-time teachers (56%). On the contrary, there is little variation in centers' employment of full-time and part-time assistants/aides (52% and 59%, respectively). The overall distribution of teaching staff positions within the state's child care workforce is illustrated in Figure 1. (Note: the data presented in this report pertains to full-time employees unless otherwise stated.)

¹³ Fifteen group homes are also included within the "center" category.



FIGURE I



The **turnover rate** in Connecticut's child care centers is lower than estimates of the national average.

Overall, Connecticut centers experience a 15% annual turnover rate among their full-time teaching staff (i.e. teachers and assistant teachers/aides). The turnover rate is highest among full-time assistant teachers/aides, with one in five (20%) leaving their employer within a 12-month period. More than one in ten (12%) full-time teachers vacate their position within a year.

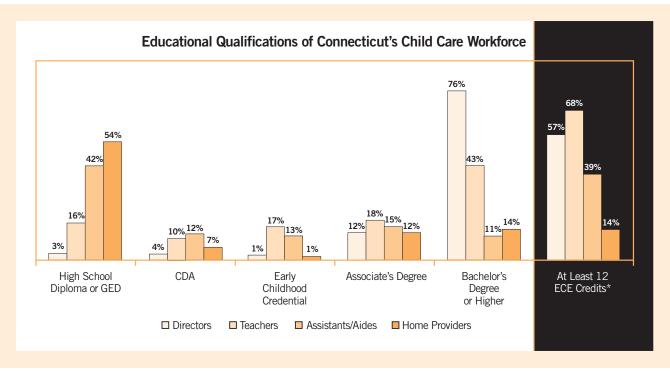
Sixteen percent (16%) of centers had two or more teachers leave in the past 12 months. That figure increases to 19% among assistant teachers/aides.

*Includes teachers and assistant teachers/aides.



SHAPING YOUNG LIVES

FIGURE 2



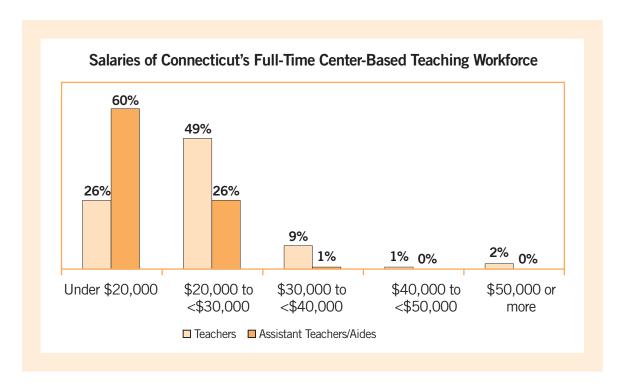
Note: Data is based on full-time teachers and assistant teachers/aides.

* Regardless of whether credits are through a degree program or not.

The survey captured for the first time comprehensive data on the **qualifications** of Connecticut's early care and education workforce. Figure 2 displays for each category of center personnel the highest level of education or early childhood training achieved. Family child care home providers are included as well. The data are summarized by each category of staff later in the report, but this allows the reader to compare the level of educational qualifications across categories.

Most notable is the analysis that highlights whether the staff have at least a minimum of 12 credits in early childhood education. This benchmark of a foundation of learning regarding the development of young children and how to care for and teach them has become an indicator of basic competence and intentionality on the part of teaching staff and directors.

FIGURE 3

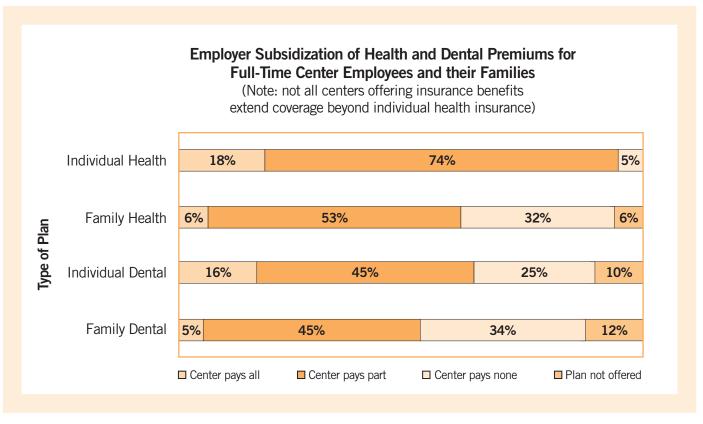


Salaries for full-time teachers and assistants/aides are presented in Figure 3. Both categories of staff experience very low salaries with 75% and 86% respectively earning less than \$30,000 annually and median incomes of \$24,000 and \$17,000.

Overall, most Connecticut centers provide some **fringe benefits** to their employees, although the level of subsidization varies. With respect to vacation and sick leave, the subsidy level is quite high. In fact, an overwhelming majority of centers (81%) provide fully paid vacation and sick leave for their full-time employees.

SHAPING YOUNG LIVES

FIGURE 4



Note: Data is derived from a subset of the sample comprising centers indicating that they offered health insurance plans to full-time employees (n=270). Percentages do not total 100% due to a small number of missing responses.

In contrast, although most centers (approximately 77%) offer **health insurance** plans to their full-time teachers and assistant teachers/aides, ¹⁴ a minority provides full compensation for premium costs (see Figure 4). Of the centers offering health benefits, roughly one-fifth (18%) cover the entire cost of the employee premium while 74% pay only a portion. Most centers (91%) that provide health benefits to employees also extend benefits to families of staff, although premiums are less likely to be subsidized. Six percent (6%) of centers cover the full cost, 53% partially cover the expense, and 32% do not contribute toward the cost of the family premium.

Dental benefits are somewhat less prevalent, as are employer contributions toward dental insurance. In fact, one in ten (10%) centers that provide a health plan, do *not* offer employees a dental plan. Of the centers that offer both health and dental coverage to full-time employees, 16% cover the full cost of the dental premium, 45% provide partial payment, and 25% do not offer any financial contribution. The vast majority (84%) do extend dental coverage to staff family members, however most centers contribute only partially (45%) or not at all (34%) toward the cost of the family premium.

¹⁴ Data only reveal whether a center offers the benefit, not how many staff members actually enroll in the plan.

CHILD CARE CENTERS: Directors

Key Findings:

A director was defined for survey respondents as the primary staff person in charge of center operations. The profile of a typical center director is a 48 year-old white female whose highest level of educational attainment is a bachelor's degree.

Education

- Over three-quarters of child care center directors have a bachelor's (40%) or master's (36%) degree. (See Figure 2.)
- Roughly one in five has earned either an associate's degree (12%), a Child Development Associate (CDA) or Early Childhood Credential (5%), or a high school diploma/GED (3%).
- The majority (60%) of directors have formal training or education in early childhood, either through a degree program (55%) or by obtaining a CDA or Early Childhood Credential (5%).

Experience

Most center directors have been in their current position for six years. One-quarter (25%) have held the position for less than 3 years.

Credential Descriptions:

The Child Development Associate (CDA) credential is a non-credit credential conferred by the national Council for Professional Recognition requiring 120 clock hours of training, a written exam, observation of classroom practice by an advisor and preparation of an individual portfolio.

The Early Childhood Credential requires completion of 30 college credits in early childhood development at a community college.



CHILD CARE CENTERS: Full-Time Teachers

Key Findings:

For the purposes of this survey, child care center teachers were defined as teaching staff in charge of a classroom. There are an estimated 5,258 full-time teachers and 2,541 part-time teachers in center-based programs across the state. The profile of a typical full-time teacher in Connecticut is a 33 year-old white female with six years of experience in child care. She holds a bachelor's degree and earns \$24,000 working 38 hours a week, twelve months a year.

Education

- The survey found that 43% of teachers attained a bachelor's degree or higher in some field of study. In fact, more than one in ten (12%) possess a master's degree. (See Figure 2.)
- In total, 54% have a degree (associate's, bachelor's or master's) with a specialization in early childhood education (ECE) or a minimum of 12 ECE credits. An additional 20% have a CDA (Child Development Associate) credential or an Early Childhood Credential.
- Overall, 68% of teachers have at least 12 ECE credits regardless of whether the credits are through a degree program or not.
- Still, 16% report that a high school diploma or a GED (General Educational Development) credential is their highest level of educational achievement.

Experience

- More than half (60%) of full-time teachers have been in the child care field for
 5 or more years; roughly one-third (31%) for 10 or more years.
- The median length of time working in child care is 6 years.

Wages

- The median annual salary for teachers, regardless of setting, is \$24,000. However, there is great contrast in median annual salary between teachers in licensed and license-exempt (school-based) programs: \$22,000 versus \$40,000, respectively.
- One-quarter (26%) of full-time teachers earn less than \$20,000 a year. (See Figure 3.)
- Centers with master's-level teachers on staff are more likely to pay annual salaries of \$30,000 or greater as compared to those centers without teachers that have attained this level of education.

Working Hours

- The median work week for a full-time teacher is 38 hours.
- Fifty-eight percent (58%) of full-time teachers work more than 35 hours per week. Very few (2%) work more than 40 hours a week.



CHILD CARE CENTERS: Full-Time Assistant Teachers/Aides

Key Findings:

Survey respondents were instructed that assistant teachers/aides are defined as teaching staff that assist the lead teacher in a classroom. Estimates show that there are 2,541 full-time assistant teachers/aides and 2,852 part-time assistants/aides employed in the state's center-based facilities. The profile of a typical assistant teacher/aide in Connecticut is a 29 year-old white female with four years of experience in child care. She holds a high school diploma or a GED and earns \$17,000 working 35 hours a week, twelve months a year.

Education

- One-quarter of assistants/aides have an associate's (15%) or bachelor's (10%) degree. An additional 1% attained a master's degree. (See Figure 2.)
- Nearly one in five (19%) has a degree with a specialization in ECE or in another field, but with a minimum of 12 ECE credits. An additional 25% have a CDA (Child Development Associate) credential or an Early Childhood Credential.
- A total of 39% of assistant teachers/aides have at least 12 ECE credits regardless of whether the credits are through a degree program or not.

For a large number of assistants/aides (42%), the highest level of educational attainment is a high school diploma or GED.

Experience

- Sixty-nine percent (69%) of full-time assistant teachers/aides have been in the child care field for less than 5 years; 13% for less than one year.
- The median length of time working in this position is 4 years.

Wages

- The median annual salary is \$17,000.
- An overwhelming majority (83%) earn less than \$25,000 a year − 60% of assistant teachers/aides earn less than \$20,000 annually. (See Figure 3.)

Working Hours

- The median work week for an assistant teacher/aide is 35 hours.
- Overall, full-time assistant teachers/aides work fewer hours per week than full-time teachers. While only 42% of teachers work under 36 hours weekly, this is true for the majority (60%) of assistant teachers/aides.



SPECIAL ANALYSIS: Variation Across Center Types

This report categorizes center data in several ways, so that one can examine differences based on regulation status (i.e. licensed, license-exempt) and funding source (i.e. those centers that receive grants and those that do not).

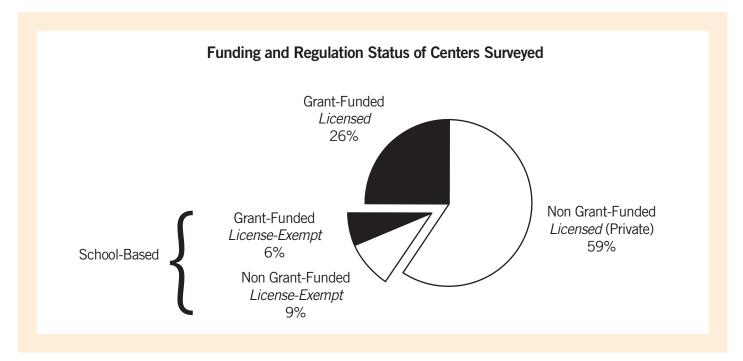
Licensed centers, which are regulated by the Department of Public Health, comprise 85% of the sample. The remaining 15% of the centers operate their child care programs within public or private schools and therefore, are not required to be licensed. These are referred to as license-exempt or school-based programs.

With regard to funding structure, those programs that receive federal or state funding through Head Start, School Readiness

or state-funded Child Development Center grants are designated as grant-funded programs, and comprise 32% of the center sample. Some programs receive grants from more than one of these sources. Of the **grant-funded programs**, most are licensed (82%), though some are license-exempt (18%).

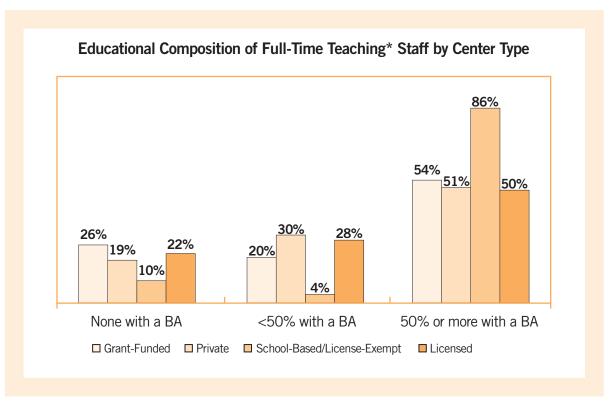
The report contrasts these grant-funded programs with centers that do not receive grants (68% of the sample). Based on regulation status, these **non grant-funded programs** are either designated as private¹⁵ (licensed) or school-funded (license-exempt) centers. Private centers comprise 59% of the full sample, whereas school-funded centers account for only 9%. Figure 5 graphically represents the distinctions between all these segments.

FIGURE 5



¹⁵ Centers classified as "private" may receive some state/federal funding through vouchers, which low-income parents may use to subsidize care. These centers may be either for-profit or non-profit entities.





* Data reflect educational attainment of full-time teachers. Note: Center categories are not mutually exclusive; some license-exempt programs are grant-funded. Likewise, licensed centers include both private and grant-funded programs.

Licensed vs. License-Exempt Programs

- License-exempt (i.e. school-based) programs are most likely to have bachelor's level teachers on staff. Whereas only half of centers designated as licensed, grant-funded, or private employ a majority of BA-level teachers, this holds true for 86% of license-exempt centers. (See Figure 6.)
- Teachers in school-based programs are much better compensated than those in licensed centers, with median annual salaries of \$40,000 and \$22,000, respectively.
- Turnover of full-time teaching staff is less prevalent among license-exempt (9%) than licensed centers (15%).

Grant-Funded vs. Non Grant-Funded Programs

- One-third (32%) of Connecticut centers receive funding through School Readiness, state-funded Child Development Center, or Head Start grants.
- In one-quarter (26%) of grant-funded centers, there are no full-time teachers on staff that possess at least a bachelor's degree. This holds true for only 19% of private programs and 10% of all license-exempt centers. (See Figure 6.)
- Approximately half of both private (51%) and grant-funded (54%) centers employ a majority of full-time teachers with at least a bachelor's degree in ECE or another field.

FAMILY CHILD CARE HOMES: Overview

About the Data

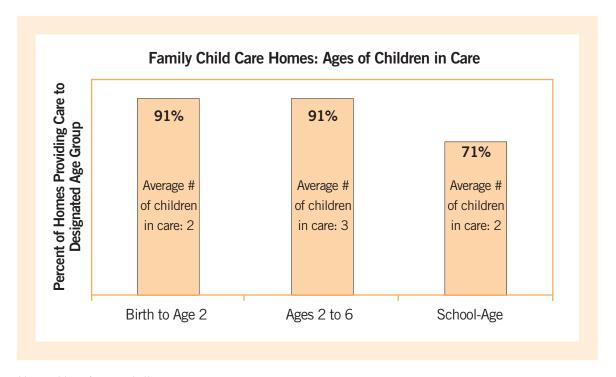
A total of 204 family child care homes participated in the survey. Only 17% of the homes surveyed employed assistants, thus the survey findings concentrate on the primary operators of Connecticut's family child care homes. Furthermore, income data is omitted from the following analysis, given that 46% of survey respondents declined to provide information on the total amount of revenue generated from their family child care services.

A Profile of Connecticut's Family Child Care Homes

Most of Connecticut's family child care homes (81%) provide care for 50-52 weeks out of the year. Two-thirds (67%) of home providers are open for 50 hours or more a week. Approximately one-fifth (17%) of home operators employ an assistant caregiver. Most (60%) survey respondents reported caring or desiring to care for 6 or more children, indicating an interest in maximizing enrollment within the limits of licensing standards. (See Table 4).

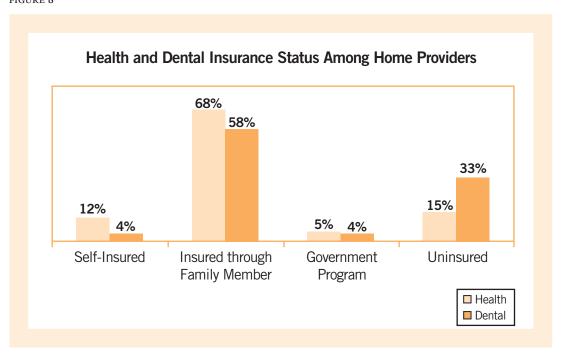
Nearly all of the state's family child care homes provide care for multiple ages (infants – 84%; toddlers – 97%; preschoolers – 91%; school-age children – 82%). However, a sizable number (22%) of home providers offer care for school-age children only during the school year.

FIGURE 7



FAMILY CHILD CARE HOMES: Providers

FIGURE 8



Key Findings:

For the purposes of this survey, family child care home providers were defined as individuals operating a licensed family child care home. The profile of a typical home provider in Connecticut is a 44 year-old white female with 12 years of experience in child care and a high school diploma or a GED (see Table 2 and Figure 2).

Education

- One-third (32%) of home providers possess an associate's or bachelor's degree – 10% with a degree concentration or at least 12 credit hours in early childhood education.
- Overall, 14% of home providers have completed at least 12 credits hours in early care and education regardless of whether they have a degree. (See Figure 2.)
- Eight percent (8%) have a CDA credential or an Early Childhood Credential.
- For the majority of home providers (54%), a high school diploma or GED is the highest level of educational attainment.

Experience

- Half of family child care providers have been in the field of child care for 12 or more years.
- The median length of time Connecticut home providers have spent operating their own family child care homes is 10 years.

Benefits16

- The majority of home providers receive their health insurance (68%) and dental insurance (58%) through another family member's job.
- Fifteen percent (15%) of home providers are without health insurance. This finding is consistent with the uninsurance rate (13%) revealed in CHDI's report on the state's 2001 workforce study.¹⁷
- One-third (33%) of home providers lack dental insurance.

¹⁶ Wage and income data is not reported for family child care providers, as nearly half (46%) of survey respondents could not or would not answer that survey question.

¹⁷ See Connecticut's Child Care Workforce at www.chdi.org.

Shaping Young Lives I www.chdi.org

Required Qualifications for Connecticut Child Care Providers

TABLE 4

Standards				
	Centers	Family Child Care Homes		
Connecticut State Licensing	A single head teacher or director, at least 20 years of age, with at least a CDA or 12 ECE credits and 1,080 hours of experience, must be in the center 60% of the time. Two program staff, at least 18 years of age, with a high school diploma or GED and 540 hours of experience must be present in the center at all times. Additional staff must be at least 16 years of age.	Family child care home providers must be at least 20 years of age and have a current First Aid certification. Assistants must be at least 18 years of age. There are no educational requirements for providers or assistants.		
State-Funded Child Care Centers	Center staff must meet state licensing requirements (above).	Not applicable – center-based program only.		
School Readiness Programs	Effective July 2005, a teacher with a CDA, associate's degree, bachelor's degree or higher and 12 college credits in ECE or certification in elementary education with a "Pre-kindergarten endorsement" or "Special Education Pre-kindergarten to Grade 12 endorsement" must be in each classroom. Licensing or local school requirements must also be met. Effective 2015, teachers will be required to have a bachelor's degree in ECE.	Not applicable – center-based program only.		
Head Start Programs (National standards)	Half of the teachers in the center must have an associate's degree, bachelor's degree or higher in ECE or in a related field with preschool teaching experience. All teachers must have at least a CDA or equivalent state certificate. Head Start centers must also meet licensing or local school requirements.	Family child care home providers must have at least a CDA or equivalent state certificate and meet state licensing requirements.		

Summary and Conclusion

The survey findings detailed above provide a profile of the individuals caring for Connecticut's young children. Although the portrait is not yet complete and additional data collection is needed to fill critical gaps in information, policy makers and child advocates now have important new knowledge that can help guide strategic decisions around building a stronger child care workforce.

With respect to provider qualifications, there is good news and bad news about caregivers' training in the field of early childhood. More than half of center directors (57%) and teachers (68%) have at least 12 ECE credits. However, this is true for only 14% of family child care providers. Also noteworthy is that 20% of Connecticut centers have no teachers on staff with at least a bachelor's degree (in any field). This is true of only 10% of school-based programs.

Low wages still plague the child care industry. Median income for full-time teachers is \$24,000 and for assistant teachers/aides it is \$17,000. Furthermore, significant income variation exists across center types. For example, teachers in license-exempt (school-based) centers are much better compensated than those in licensed centers (\$40,000 vs. \$22,000, median annual income).

The majority of child care centers do offer health benefits to their full-time employees (roughly 75%), although only 18% cover the full cost of the premium. Dental benefits are less prevalent. One in ten (10%) centers that provide health benefits do not offer dental coverage. Among family child care providers, 15% lack health coverage and 33% lack dental coverage.

Connecticut centers experience a 15% annual turnover rate among their full-time teaching staff (i.e. teachers and assistant teachers/aides). This figure is considerably lower than national estimates. However, it still indicates instability in the workforce that should be addressed, particularly in light of the fact that the turnover rate among the state's license-exempt (school-based) child care programs is only 9%. The overall turnover rate is highest among full-time assistant teachers/aides, with one in five (20%) leaving their employer within a 12-month period.

In summary, despite a few bright spots, Connecticut's child care workforce is still characterized by meager compensation and modest qualifications. This is of concern, given the body of research indicating that low levels of educational attainment lead to low wages, which in turn generally leads to high staff turnover and, ultimately, compromised child care quality. The data provided within this report not only serve as indicators of problem areas, but also benchmarks for measuring progress. The findings should inform the development of effective workforce policies to strengthen the child care workforce - a group of individuals who play a pivotal role in the health and development of young children.

For example, the 1998 National Child Care Staffing Study reported a 31% turnover rate for all teaching staff in the previous year.

visit our web site: www.chdi.org

