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Authors

Whitebook, Marcy
Sakai, Laura
Kipnis, Fran
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California Early Care and Education Workforce Study

Licensed Family Child Care Providers

Marin County 2006

By Marcy Whitebook, Laura Sakai, Fran Kipnis, Yuna Lee, Dan Bellm,
Richard Speiglmán, Mirella Almaraz, LaToya Stubbs, and Paulina Tran

Center for the Study of Child Care Employment,
Institute of Industrial Relations, University of California at Berkeley
California Child Care Resource and Referral Network

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Center for the Study of Child Care Employment
Institute of Industrial Relations
University of California at Berkeley
2521 Channing Way #5555
Berkeley, CA 94720
(510) 643-8293
<http://www.iir.berkeley.edu/csce/index.html>

California Child Care Resource and Referral Network
111 New Montgomery Street, 7th floor
San Francisco, CA 94105
(415) 882-0234
<http://www.rrnetwork.org>

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Contents

Introduction	9
Purpose of the Study	10
Licensed Family Child Care in California	12
Marin County	12
Study Design	15
Survey Population and Study Sample	16
Interviews	16
Data Collection Procedures	17
Survey Completion and Response Rate	17
Data Analysis	19
Findings	20
Who constitutes the licensed family child care workforce in Marin County?	22
Gender and Age	22
Ethnic Background	22
Linguistic Background	24
Tenure	26
Home Ownership	29
Paid Assistants	29
Size of the Licensed Family Child Care Workforce	30
What are the characteristics of children served by Marin County’s licensed family child care providers?	31
What is the level of educational attainment and early childhood development-related training among licensed family child care providers?	34
Overall Educational Attainment of Family Child Care Providers	34
Education, Training and Certification Related to Early Childhood Development	35
Professional Preparation of Family Child Care Paid Assistants	38
How do levels of overall educational attainment, and of training related to early childhood development, vary among licensed family child care providers?	41
Overall Educational Attainment, by Licensed Capacity	41

Overall Educational Attainment, by Ages of Children Served	41
Overall Educational Attainment, and Early Childhood-Related Training, by Number of Children Receiving Government Subsidy	42
Overall Educational Attainment, and Early Childhood-Related Training, by Provider Demographic Characteristics	44
How well prepared are licensed providers to care for and educate children who are dual language learners or have special needs?	49
Preparation to Work with Young Children Acquiring a Second Language	49
Preparation to Work with Young Children With Special Needs	50
Discussion	58
1) Who constitutes the licensed family child care workforce in Marin County?	60
2) What are the characteristics of children served by Marin County’s licensed family child care providers?	62
3) What is the level of educational attainment and early childhood development-related training among licensed family child care providers?	64
4) How do levels of overall educational attainment, and of training related to early childhood development, vary among licensed family child care providers?	65
5) How well prepared are licensed providers to care for and educate children who are dual language learners or have special needs?	67
Appendix A: Additional Tables	69
Appendix B: Methodology for Estimating the Number of Children Served in Licensed Family Child Care and the Size of the Family Child Care Workforce in Marin County	76
Overview	77
Methodology: High Estimate	77
Methodology: Low Estimate	77
References	79

Tables

Table 2.1. <i>Marin County Sample Composition</i>	16
Table 2.2. <i>Survey Response Rate</i>	18
Table 2.3. <i>Comparison of Survey Respondents and County Population of Providers, by Communities Served and by Licensed Capacity</i>	18
Table 3.1. <i>Licensed Provider Mean Age, by Tenure</i>	23
Table 3.2. <i>Marin County Children in Public Kindergarten, 2004-2005: 15 Most Commonly Spoken Languages of English Language Learners</i>	26
Table 3.3. <i>Reported Language Fluency of English- and Spanish-speaking Licensed Providers, by Number of Children Receiving Publicly Subsidized Child Care</i>	27
Table 3.4. <i>Reported Language Fluency of English- and Spanish-speaking Licensed Providers, by Number of Children with Special Needs</i>	27
Table 3.5. <i>Tenure of Licensed Providers, by Ethnicity and Licensed Capacity</i>	28
Table 3.6. <i>Distribution of Licensed Providers, by Tenure</i>	28
Table 3.7. <i>Estimated Number of Licensed Providers and Paid Assistants</i>	30
Table 3.8. <i>Estimated Number of Children Served, by Age</i>	31
Table 3.9. <i>Mean Number of Children Served by Licensed Providers, by Age Group</i>	33
Table 3.10. <i>Comparison of Licensed Providers Serving Children with Special Needs, by Ethnicity</i>	33
Table 3.11. <i>Educational Attainment of Licensed Providers, by Number of Children Receiving Publicly Subsidized Child Care</i>	43
Table 3.12. <i>Percentage of Licensed Providers by Degree Attainment Related to Early Care and Education, by Ethnicity</i>	46
Table 3.13. <i>Reported Language Fluency of English- and Spanish-speaking Licensed Providers, by Educational Level</i>	48
Table 3.14. <i>Percentage of Spanish-speaking Licensed Providers Obtaining Bachelor's Degree or Higher from Foreign Institutions</i>	48
Table 3.15. <i>Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Dual Language Learning Children</i>	51
Table 3.16. <i>Mean Hours of Training Among Licensed Providers Reporting Completion of Non-Credit Training Related to Dual Language Learning Children</i>	51
Table 3.17. <i>Percentage of Licensed Providers Reporting Completion of College Credits Related to Dual Language Learning Children</i>	51

Table 3.18. <i>Mean Number of Credits Among Licensed Providers Reporting Completion of College Credits Related to Dual Language Learning Children</i>	51
Table 3.19. <i>Percentage of Licensed Providers Reporting Completion of Credit or Non-Credit Training Related to Dual Language Learning Children, by Language Fluency and Educational Attainment</i>	52
Table 3.20. <i>Percentage of Licensed Providers Reporting Completion of Credit or Non-Credit Training Related to Children with Special Needs, by Number of Such Children Served</i>	55
Table 3.21. <i>Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Children with Special Needs, by Number of Such Children Served</i>	55
Table 3.22. <i>Mean Hours of Training Among Licensed Providers Reporting Completion of Non-Credit Training Related to Children with Special Needs, by Number of Such Children Served</i>	56
Table 3.23. <i>Percentage of Licensed Providers Reporting Completion of College Credits Related to Children with Special Needs, by Number of Such Children Served</i>	56
Table 3.24. <i>Hours of Training Among Licensed Providers Reporting Completion of Non-Credit Training Related to Children with Special Needs, by Number of Such Children Served</i>	57
Table 3.25. <i>Educational Attainment of Licensed Providers Serving Children with Special Needs, by Number of Such Children Served</i>	57

Figures

Figure 3.1. <i>Age Distribution of Licensed Providers Compared to Women in the Marin County Labor Force</i>	22
Figure 3.2. <i>Estimated Age Distribution of Licensed Providers, Countywide and by Licensed Capacity</i>	23
Figure 3.3. <i>Ethnic Distribution of Licensed Providers Compared to the Marin County Female Adult Population</i>	23
Figure 3.4. <i>Ethnic Distribution of Licensed Providers Compared to Alameda County Public K-12 Teachers and Children 0-5 Years</i>	25
Figure 3.5. <i>Reported Language Fluency of Licensed Providers Compared to the Marin County Adult Population</i>	25
Figure 3.6. <i>Percentage of Licensed Providers with Paid Assistants, Countywide and by Licensed Capacity</i>	29
Figure 3.7. <i>Percentage of Licensed Providers Serving Children with Special Needs, Countywide and by Licensed Capacity</i>	33
Figure 3.8. <i>Educational Attainment of Licensed Providers Compared to the Marin County Female Adult Population</i>	35
Figure 3.9. <i>Percentage of Licensed Providers, by Degree Attainment Related to Early Care and Education</i>	37
Figure 3.10. <i>Mean Number of Credits Among Licensed Providers Reporting Completion of College Credits Related to Early Care and Education, by Educational Level</i>	37
Figure 3.11. <i>Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Early Care and Education, by Educational Level</i>	37
Figure 3.12. <i>Percentage of Licensed Providers who Employed At Least One Paid Assistant with College Credits, by Provider Education</i>	40
Figure 3.13. <i>Educational Attainment of Licensed Providers, Countywide and by Licensed Capacity</i>	43
Figure 3.14. <i>Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Early Care and Education, by Number of Publicly Subsidized Children Served</i>	44
Figure 3.15. <i>Ethnic Distribution of Licensed Providers, by Educational Level</i>	46

Appendix Tables

Table A1. <i>Age Distribution of Licensed Providers Compared to Women in the Marin County Labor Force</i>	70
Table A2. <i>Age Distribution of Licensed Providers, Countywide and by Licensed Capacity</i>	70
Table A3. <i>Ethnic Distribution of Licensed Providers Compared to the Marin County Female Adult Population, Public K-12 Teachers, and Children 0-5 Years</i>	70
Table A4. <i>Reported Language Fluency of Licensed Providers Compared to the Marin County Adult Population</i>	71
Table A5. <i>Percentage of Licensed Providers with Paid Assistants, Countywide and by Licensed Capacity</i>	71
Table A6. <i>Percentage of Licensed Providers Serving Children with Special Needs, Countywide and by Licensed Capacity</i>	72
Table A7. <i>Educational Attainment of Licensed Providers Compared to the Marin County Female Adult Population</i>	72
Table A8. <i>Percentage of Licensed Providers, by Degree Attainment Related to Early Care and Education</i>	73
Table A9. <i>Mean Number of Credits Among Licensed Providers Reporting Completion of College Credits Related to Early Care and Education, by Educational Level</i>	73
Table A10. <i>Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Early Care and Education, by Educational Level</i>	73
Table A11. <i>Percentage of Licensed Providers who Employed At Least One Paid Assistant with College Credits, by Provider Education</i>	73
Table A12. <i>Educational Attainment of Licensed Providers, Countywide and by Licensed Capacity</i>	74
Table A13. <i>Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Early Care and Education, by Number of Publicly Subsidized Children Served</i>	74
Table A14. <i>Ethnic Distribution of Licensed Providers, by Educational Level</i>	75

Introduction

Purpose of the Study

Recognizing the critical role that early childhood educators play in the lives of California's children and families, First 5 California commissioned in 2004 a statewide study of the early care and education (ECE) workforce in licensed child care centers and licensed family child care homes. The overall goal of the study was to collect information on the current characteristics of this workforce – particularly its educational background, and its potential need and demand for further opportunities for professional development.

The statewide study sample included providers from every county in the state, but there were not sufficient numbers of providers in the sample to generate county-specific reports. Counties were invited, however, to contract for additional local interviews in order to build a representative county sample, and First 5 Marin was one of nine county organizations that agreed to commission a local study of its early care and education workforce, building on the statewide study.

An identical procedure was used for statewide and county data collection, although the statewide study interviews were conducted earlier in 2005, and the county interview included one question about home ownership not included in the statewide study. The statewide and county surveys were built upon numerous workforce studies conducted by the Center for the Child Care Workforce over the last three decades (Center for the

Child Care Workforce, 2001).¹ Prior to data collection, the survey instrument and data collection procedures were approved by the Committee for the Protection of Human Subjects at the University of California at Berkeley, and were then pre-tested in the field.

The following description applies to the sample and response rate for the Marin County-commissioned component of the study. For information about the statewide completion and response rate, see the statewide study at the First 5 California web site, <http://www.cfc.ca.gov>.

In partnership, the Center for the Study of Child Care Employment (CSCCE) at the University of California at Berkeley, and the California Child Care Resource and Referral Network (Network), have gathered this information to help county policy makers and planners assess current demand at teacher training institutions; plan for further investments in early childhood teacher preparation; and gain a baseline for measuring progress toward attaining a well-educated ECE workforce whose ethnic and linguistic diversity reflects that of Marin County's children and families.

This report contains the study's findings for licensed family child care providers in Marin County. In studying the county's population of licensed family child care providers, our primary objectives were to:

¹ Specifically, the survey instrument was adapted from the 2001 California Child Care Workforce Study, an eight-county effort funded by the David and Lucile Packard Foundation as a pilot for this statewide survey (Whitebook, Kipnis, Sakai, Voisin & Young, 2002). For its use in 2005, certain changes were made to the 2001 survey in order to shorten the interview time, and to capture specific information requested by First 5 California to assist in its workforce development planning related to preschool services.

- Compile baseline data on licensed providers' demographic and educational characteristics;
- Identify the extent to which providers' educational backgrounds vary with respect to their age, ethnicity, linguistic characteristics, and tenure as licensed providers;
- Profile the children that providers with varying characteristics serve, in terms of numbers, ages, subsidy status, and special needs; and
- Document the professional preparation of licensed providers for working with children who are dual language learners and/or have special needs;
- Develop a sound estimate of the number of paid assistants working in licensed family child care, and the extent to which they have engaged in professional development.

Licensed Family Child Care in California

Many providers care for their own children, as well as children from other families, in their own homes. When an individual cares for children from more than one unrelated family, the California Department of Social Services requires that the provider obtain a license to provide child care services. In order to receive a family child care home license, providers must meet a number of requirements. These include:

- Fingerprint, criminal background and California Child Abuse Central Index clearances for everyone 18 years or older living in the home;
- 15 hours of training on preventative health practices, which must include pediatric CPR; pediatric first aid; the recognition, management and prevention of infectious diseases; and the prevention of childhood injuries;
- A tuberculosis clearance; and
- Home inspection by someone from the licensing agency to ensure that it meets basic health and safety requirements.

There are also regulations on both the number of children that can be cared for in a licensed family child care home and the number of paid assistants in the home, based on the number of children served.

Family child care homes in California can be licensed as either small or large. The number of allowable children in small and large homes includes children under age 10 who live in the licensee's home. The license for small homes allows providers to serve up to eight children if two of them are of school age (over six years old) and no more than two are infants (0-23 months). (Alternatively, if small-home providers do not care for school-age children, they can care for up to six children, three of whom can be infants.) Large family child care homes can serve up to 14 children if at least two of them are of school age, and no more than three are infants. (Alternatively, if large-home providers do not care for school-age children, they can care for up to 12 children, four of whom can be infants.)

Marin County

Located between the Pacific Ocean and San Francisco Bay, Marin County has the largest median family income of California's counties, and its economy is largely based on information, professional and technical services, as well as financial, insurance and real estate transactions. Its largest cities are San Rafael and Novato.

In 2004, Marin County's population of 250,200 represented a 1.2-percent increase over the 2000 Census (US Census Bureau, 2000a). The county is projected to increase in population by only 1.6 percent between 2000 and

2010, and a 14.9-percent decrease in the number of children ages 0-4 is anticipated for that period (California Department of Finance, 2004).

Population estimates for 2005 describe the county as 77.5 percent White, Non-Hispanic; 12.4 percent Hispanic; 4.6 percent Asian; 2.9 percent Black; 2.2 percent Multiethnic; 0.4 percent American Indian; and 0.2 percent Pacific Islander (California Department of Finance, 2005). At the time of the 2000 Census, over three-quarters (78.7 percent) of county households were estimated as

speaking English, 8.2 percent Spanish, and 3.0 percent an Asian or Pacific Island language (US Census Bureau, 2000b).

Several demographic measures, as well as summary statistics concerning economic well being, suggest the breadth of need for early care and education in Marin County:

- Median family income in 1999 was \$88,934 (California Department of Finance, 2003).
- In 1999, 6.6 percent of residents had incomes below the poverty level (California Department of Finance, 2003).
- These figures disguise individual family economics, which is highly influenced by the cost of housing. The 2005 annual fair market rent for a two-bedroom unit in Marin County was \$18,468 (US Department of Housing and Urban Development, 2005).
- According to the 2000 Census, 7.6 percent of children 0-5 years of age

lived in poverty² (California Child Care Resource and Referral Network, 2003).

- In 2000, 39,323 children under the age of 14 resided in the County, over one-half (57.9 percent) of whom had both parents in the labor force or a single head of household in the labor force³ (California Child Care Resource and Referral Network, 2003).
- Among those children were 16,106 children under age six, 51.5 percent of whom had working parents⁴ (California Child Care Resource and Referral Network, 2003).
- 13.1 percent of children ages 0-5 resided in a single-parent household⁵ (California Child Care Resource and Referral Network, 2003).

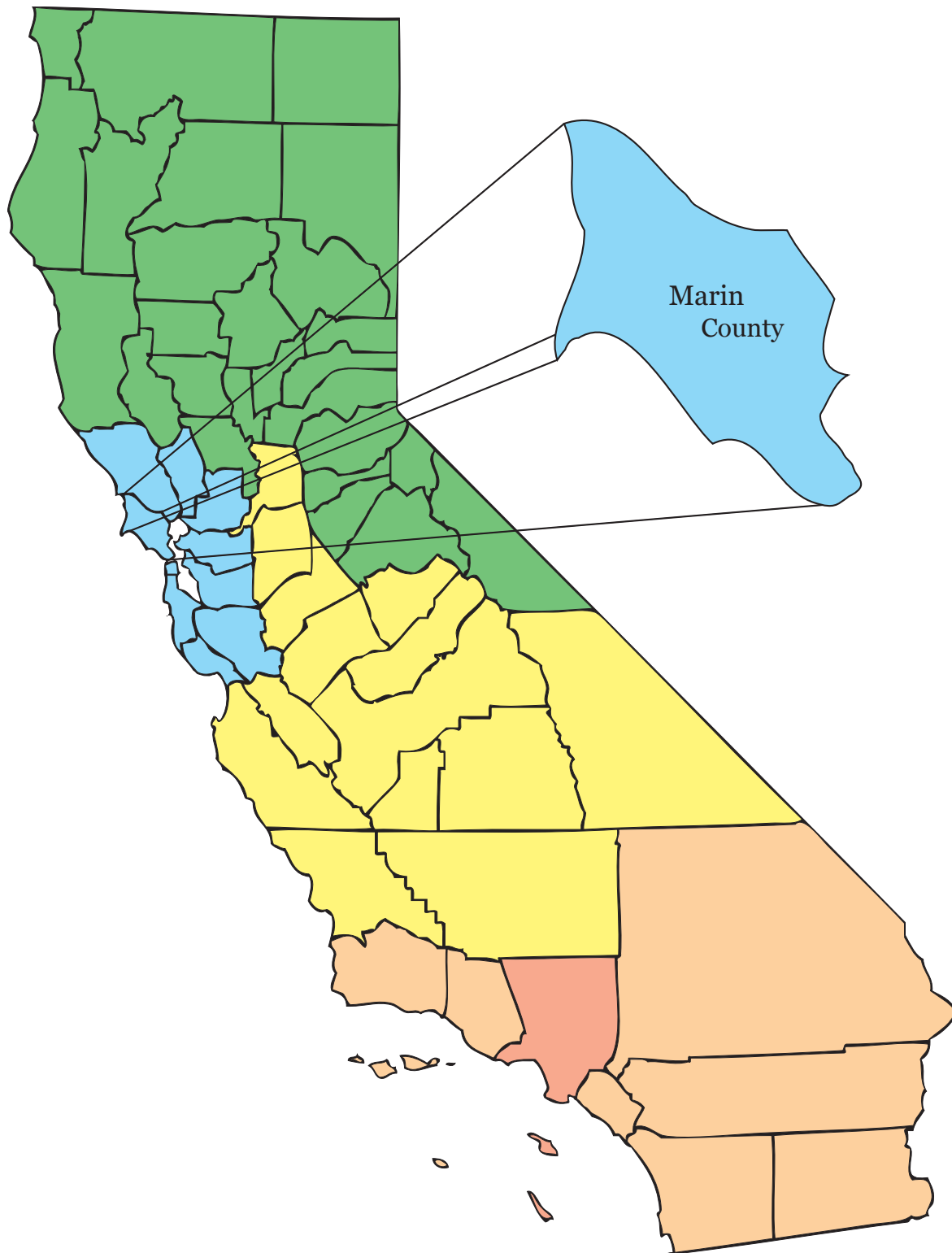
In 2004, 9,980 licensed child care slots were available in Marin County, one-fifth of which (19.6 percent) were in family child care homes, and four-fifths in child care centers (California Child Care Resource and Referral Network, 2005).

² Data derived from 2000 U.S. Census (universe: population for whom poverty status is determined). Poverty threshold varies by family size and composition. For a family of four, two adults and two children under 18, the 1999 poverty threshold used for the 2000 Census was \$16,895.

³ Data derived from 2000 U.S. Census (custom tabulation). Number of children with either both parents or a single head of household in the labor force (universe: own children in families and subfamilies).

⁴ Data derived from 2000 U.S. Census (custom tabulation). Number of children with either both parents or a single head of household in the labor force (universe: own children in families and subfamilies).

⁵ Data derived from 2000 U.S. Census (universe: own children).



Study Design

Survey Population and Study Sample

First 5 Marin sought information about licensed family child care providers in the county as a whole. The survey population included all 195 active, licensed family child care homes that were listed as of January 2004 with the county’s state-funded child care resource and referral (R&R) program, the Marin Child Care Council. These listings were aggregated, cleaned and verified by the California Child Care Resource and Referral Network (Network), and updated in winter 2005.

Because of the relatively small size of the licensed family child care population in Marin County, we attempted to conduct a census of all providers in the county. To reach our target number of providers, 14 interviews conducted in Marin County as part of the statewide study were added to 80 interviews conducted for the county study, to build a sample of 94 licensed providers. (See Table 2.1.)

Interviews

In each case, telephone interviews were conducted in English or Spanish with the owner of the family child care home. A small percentage (2.2 percent of eligible providers in the county) were unable to complete the interview because of communication barriers. The results

reported below, therefore, provide a county-wide portrait of providers who speak either English or Spanish, and do not extend to those who do not speak either language.

The survey questions addressed:

- Provider demographics: age, ethnicity, and languages spoken in addition to the interview language;
- Levels of education and training: highest level of education; type of degree, if any; credit and non-credit training, including training to work with children with special needs or English language learners; accreditation status; and participation in the Marin CARES program;⁶
- Career longevity;
- Business and program characteristics: numbers and ages of children served, including children with special needs; participation in government subsidy programs; and home ownership status; and
- Paid assistants’ characteristics: numbers of paid assistants, and their level of education and training.

⁶ Marin County is one of over 40 counties in California that have implemented professional development stipend programs for child care center teachers, administrators, and family child care providers based on the California CARES program model. These initiatives are intended to help build a skilled and stable early education workforce by providing monetary rewards, based on participants’ education levels and continued commitment to their professional development.

Table 2.1. *Marin County Sample Composition*

	Marin County licensed providers	Percentage of final sample
Quota target	195	
Completed interviews: statewide study	14	14.9%
Completed interviews: county study	80	85.1%
Final sample	94	100.0%

Data Collection Procedures

The Network mailed a notification letter, describing the purpose of the survey and encouraging participation, to all the providers in the survey population. The letter was signed by representatives of CSCCE, the Network, and First 5 California. Providers were informed that they would receive a copy of the latest version of First 5's Kit for New Parents as an incentive for completing the interview.

Field Research Corporation, Inc. (FRC), a professional public opinion research firm, conducted the interviews using computer-assisted telephone interviewing (CATI). During the CATI process, the interviewer reads the survey question from a computer screen and enters the survey data directly into the computer. This promotes uniformity of interview technique as well as accuracy and consistency during data input. FRC completed 80 interviews over a six-week period beginning in early June 2005.

Licensed family child care providers were contacted during the work day, and whenever they requested it, were called back in the evening or during the weekend to complete the interview. Interviews took an average of 10.6 minutes to complete. FRC made up to eight attempts to complete an interview with each provider.

Survey Completion and Response Rate

The Network provided FRC with contact information for the 195 providers in the survey population. Because some of these providers either had completed an interview or had been coded ineligible for some other reason

during the statewide survey, FRC released 178 providers' names for the county survey. As anticipated, we were unable to reach all the providers in the county. Of the 178 provider contacts, 23 percent were determined to be ineligible, either because they were out of business or were presumed to be. (See Table 2.2.) Because of unanticipated delays, several months passed before the survey began. For that reason, we assume that many of the providers with "unresolved phone numbers" were actually out of business. To increase the likelihood of including as many providers as possible, the Network attempted to correct any incorrect phone numbers.

Among those eligible, 58.4 percent completed the survey. Those who did not complete the survey included 15.3 percent who refused, and another 19.0 percent whose answering machine or voice mail prevented successful contact. Again, to ensure the highest response rate possible, Network staff attempted to contact all the providers with answering machines or voice mail to encourage them to participate in the study. Approximately 5.1 percent of the providers contacted were not available to complete the survey during the study period, and 2.2 percent presented communication barriers we were unable to surmount.

While we were unable to assess whether the providers who participated in the study differed from those who did not participate with respect to the variables of interest in the study, we compared the county provider population to the providers that completed interviews. We calculated the extent to which providers participating in our study represented the county overall in terms of geographical distribution and licensed capacity. As

Table 2.2. Survey Response Rate

	Marin County number of providers	Percentage of sample	Percentage of eligible
Sample released and dialed	178	100.0%	
Ineligible: out of business	16	9.0%	
Presumed ineligible*	25	14.0%	
Eligible	137	77.0%	100.0%
County surveys completed	80	44.9%	58.4%
No response, presumed eligible**	26	14.6%	19.0%
Refusals	21	11.8%	15.3%
Respondent not available	7	3.9%	5.1%
Communication barrier	3	1.7%	2.2%
Other reasons for non-completion	-	0.0%	0.0%

* Disconnected, wrong number, changed phone number, or no answer.

** Answering machine, voice mail, or busy phone.

Table 2.3. Comparison of Survey Respondents and County Population of Providers, by Communities Served and by Licensed Capacity

	County population (N=195)	Survey completed (N=94)
LICENSED CAPACITY		
Small homes	71.8%	71.3%
Large homes	28.2%	28.7%
CITY		
Bolinas	0.5%	1.1%
Corte Madera	8.2%	8.5%
Fairfax	3.6%	3.2%
Kentfield	1.0%	2.1%
Marin City	3.6%	2.1%
Mill Valley	12.8%	9.6%
Novato	28.7%	31.9%
Pt. Reyes Station	0.5%	1.1%
San Anselmo	6.7%	7.4%
San Rafael	30.8%	29.8%
Sausalito	1.5%	2.1%
Stinson Beach	0.5%	0.0%
Tiburon	1.0%	0.0%
Woodacre	0.5%	1.1%
TOTAL	100.0%	100.0%

shown in Table 2.3, our survey closely approximates the countywide distribution and licensed capacity of licensed family child care homes.

As shown in Table 2.1, the final sample included 94 providers, with 85.1 percent of the sample participating in the county data collection and the remainder drawn from the statewide study.

Data Analysis

Data analysis sought to address the goals of the study as outlined in the introduction to this report. All analyses were performed using Statistical Package for the Social Sciences (SPSS 12.0) and StataSE 8. First, we compiled statistics that described characteristics of the workforce, including providers' age, ethnicity, tenure, language(s) spoken, home ownership, and paid assistants employed. Second, we conducted analyses of the number of children of various age ranges served, as well as the number of children with special needs and subsidized children. Third, we examined providers' educational backgrounds, making comparisons among educational levels and provider characteristics. Fourth, we examined whether providers had completed non-credit or college credit-bearing training to care for children with special needs and/or English language learners. To more closely examine differences between providers licensed to operate small or large homes, we conducted inferential statistical tests (e.g., chi-square, t-test, ANOVA). All significant results are reported, including group differences at a p value of .05 or better.

Findings

The findings described in this report are based on interviews with 94 licensed family child care providers across Marin County who spoke English or Spanish sufficiently well to participate in a phone interview. Significant differences are reported at a p level of .05 or less. Figures and tables included in this chapter summarize data referred to in the text. Standard errors for all findings represented in this chapter, as well as additional data not discussed in the text, can be found in the Appendix Tables. After reporting the statewide findings, we report statistical differences between providers licensed to care for 14 children (large homes) or eight children (small homes).

Who constitutes the licensed family child care workforce in Marin County?

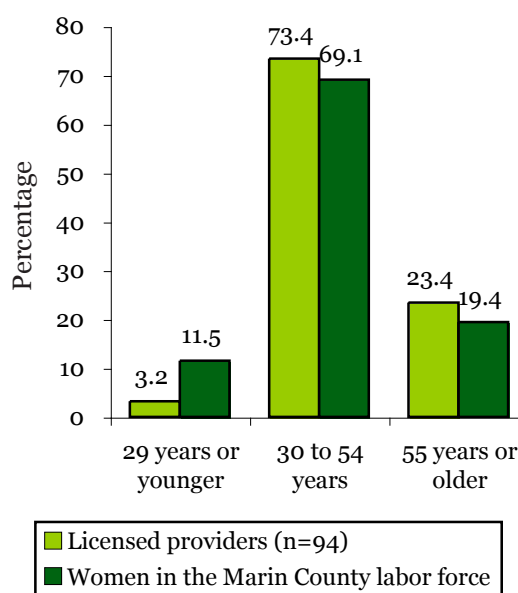
In Marin County, the typical licensed family child care provider is a woman in her mid-forties who has been taking care of children in her home for nearly 12 years. She usually works without a paid assistant. A provider is most likely to be White, Non-Hispanic, followed by Latina. She is likely to speak English only, or English and Spanish.

Gender and Age

Marin County’s licensed family child care workforce is overwhelmingly female. To ascertain gender, since the interview did not specifically include this question, we analyzed the names of providers in our sample. Eighty-nine percent of the names in our sample were female, one percent were male, and ten percent of the listings contained two names, typically a man and a woman.

This almost exclusively female workforce is typically middle-aged. Compared to women in the Marin County labor force overall, licensed family child care providers were less likely to be younger than 30 (3.2 percent vs. 11.5 percent) and more likely to be over 55 (23.4 percent vs. 19.4 percent). (See Figure 3.1.) On average, licensed providers were 47 years of age, with the youngest provider 21 years old and the oldest 73. New entrants (those who had been serving children in their homes for 24 months or less) were, on average, 11.5 years younger than providers who had been serving children in their homes longer than 24 months. (see Table 3.1.) Nine percent of new entrants were age 55 or older, compared to 22 percent of those with longer tenure. In Marin County, Latina providers were typically younger (41 years, SE=2.1 versus 49.4 years, SE=1.3) than White, Non-Hispanic providers.

Figure 3.1. Age Distribution of Licensed Providers Compared to Women in the Marin County Labor Force^a



^a US Census Bureau (2000a).

The age distribution of licensed providers differed by their licensed capacity. (See Figure 3.2.) Providers operating smaller licensed family child care homes were 45.2 years old on average, compared to large home providers who were 51.6 years old on average.

Ethnic Background

As shown in Figure 3.3, licensed family child care providers in Marin County are more ethnically diverse than the adult female population in the

Figure 3.2. *Estimated Age Distribution of Licensed Providers, Countywide and by Licensed Capacity*

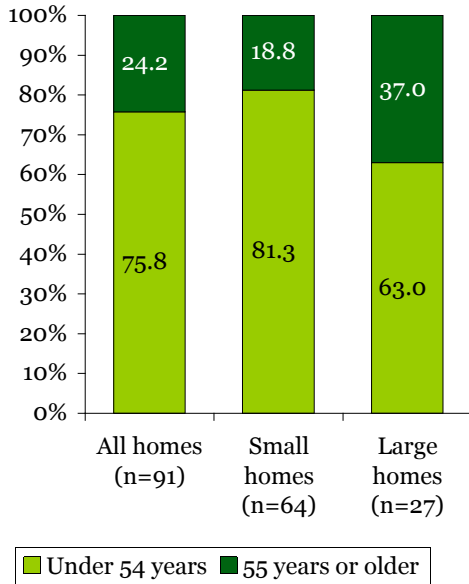
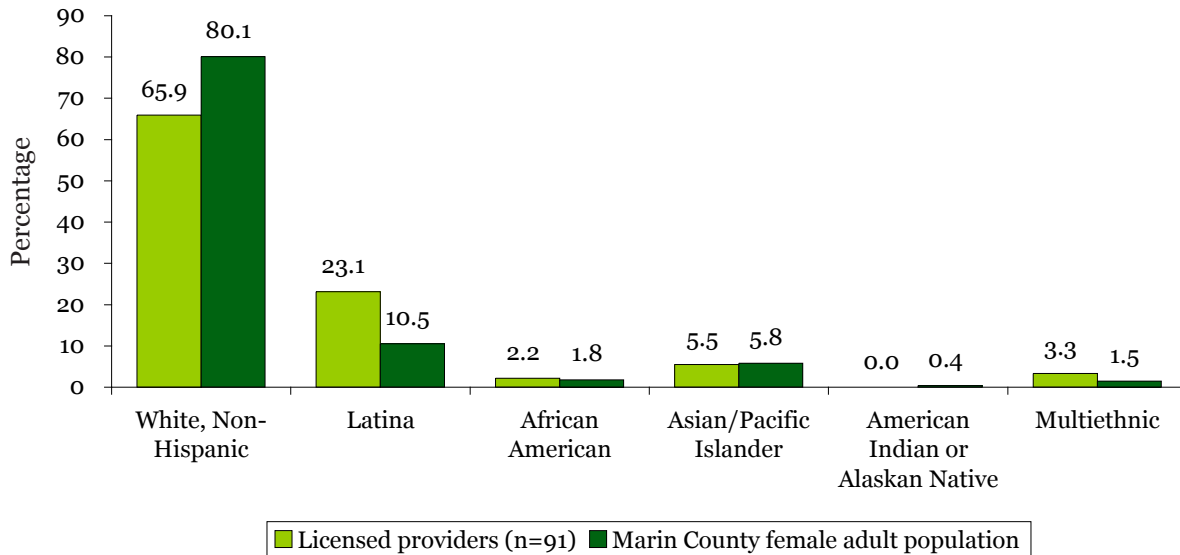


Table 3.1. *Licensed Provider Mean Age, by Tenure*

	Mean tenure (SE)	
	24 months or less	Over 24 months
Age of licensed provider*	36.7 (2.66)	48.1 (1.11)
Number of providers	9	84

*p < .01, 24 months or less < over 24 months.

Figure 3.3. *Ethnic Distribution of Licensed Providers Compared to the Marin County Female Adult Population^a*



^aCalifornia Department of Finance (2004)

county as a whole. Compared to the county's adult female population, Latina providers were more represented and White, Non-Hispanic providers were less represented in the licensed family child care population.

We found that more than one-third of licensed family child care providers in Marin County (34.1 percent) were people of color. (See Figure 3.3.) White, Non-Hispanic providers (65.9 percent) constituted a majority among licensed providers in the county. Latinas were the second largest group (23.1 percent). As shown in Figure 3.3, Asians/Pacific Islanders (5.5 percent) were the next largest group of providers, followed by those identifying themselves as Multiethnic (3.3 percent), and African American (2.2 percent). No providers identified themselves as American Indian or Alaskan Native.

Licensed family child care providers were far more diverse, and more closely reflected the ethnic distribution of children ages birth to five in Marin County, than teachers of Grades K-12 in Marin County public schools. (See Figure 3.4.) Nearly all public school K-12 teachers (92.1 percent) were White, Non-Hispanic, compared to 65.9 percent of licensed family child care providers and 70.1 percent of children ages birth to five. Licensed family child care providers were much more likely to be Latina (23.1 percent) than were K-12 teachers (3.5 percent), and were slightly more likely to be Latina than were children ages birth to five (19.9 percent).

Linguistic Background

Eighty-five percent of interviews were conducted in English, with the remainder conducted in Spanish. As stated earlier,

a small percentage of providers (2.2 percent) were unable to complete the interview in either English or Spanish. Results reported below, therefore, provide statewide and regional portraits of providers who speak either English or Spanish, and do not extend to those who speak neither language.

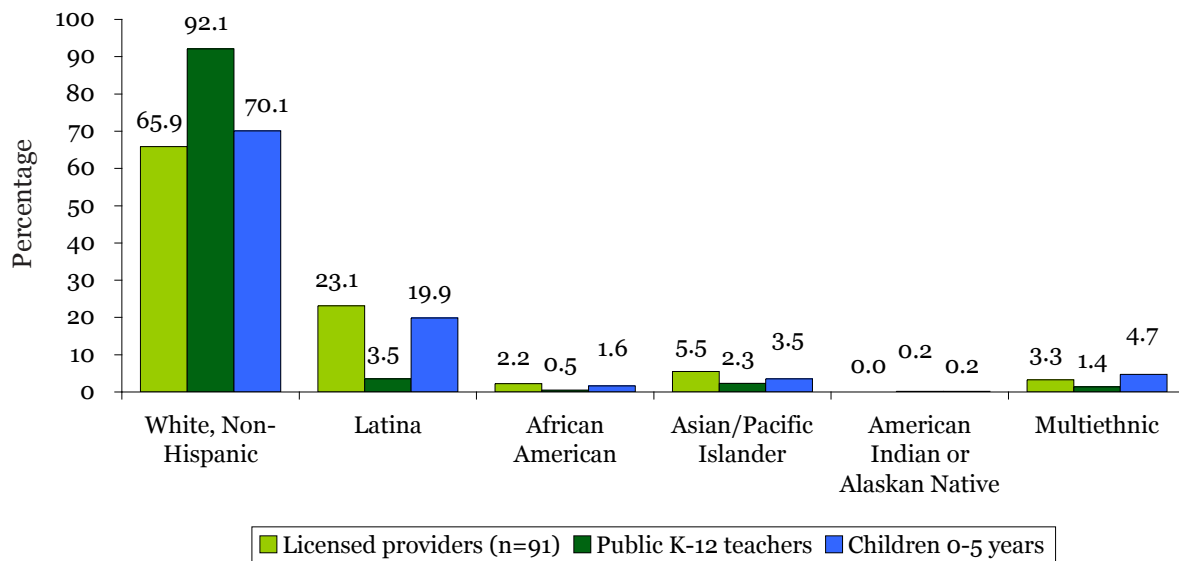
Providers were asked whether they spoke any other languages fluently besides the interview language. If they answered affirmatively, they were asked which language(s) they would be able to speak fluently with children and families if necessary. Our description of providers' fluency in these other languages is based entirely on providers' self-assessments.

We found licensed family child care providers to be more linguistically diverse than Marin County's adult population as a whole.⁷ As shown in Figure 3.5, licensed providers were less likely than other adults in Marin County to speak only English, and were more likely than the average Marin County adult to speak English and Spanish or English and another language other than Spanish. Slightly more than one-half of licensed providers (54.3 percent) spoke only English. About seven percent of those interviewed (7.4 percent) spoke only Spanish, or Spanish and another language besides English. Another 24.5 percent reported speaking English and Spanish fluently, or speaking English, Spanish and at least one additional language.

Nearly 14 percent of interviewed providers reported self-assessed fluency in

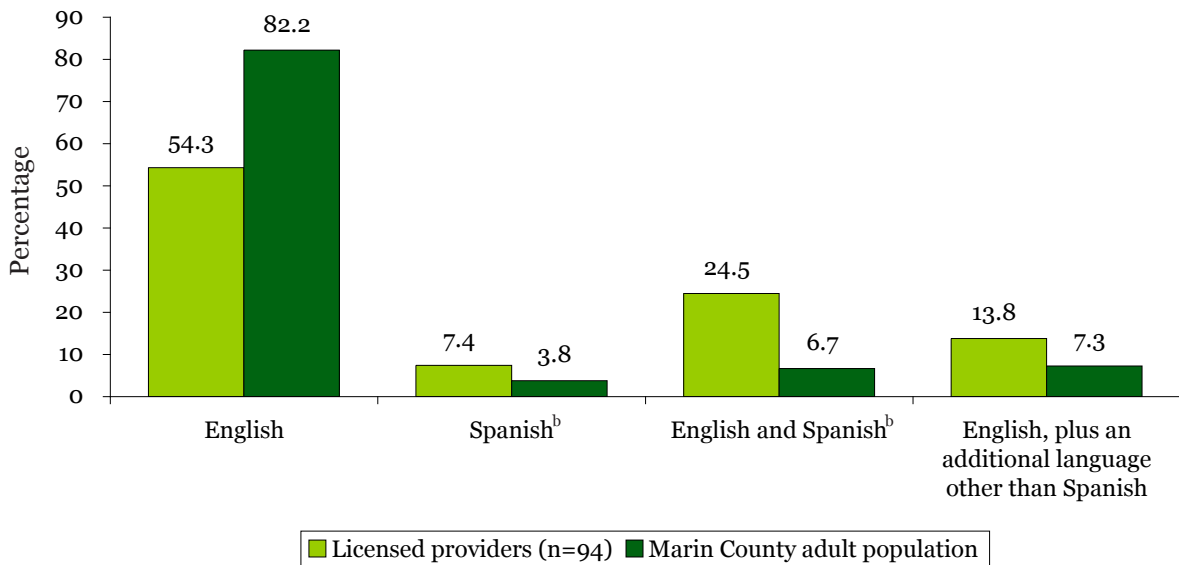
⁷ The most recent data available at the county level on the language background of Marin County adults are based on the 2000 U.S. Census. Further, these data are only available for all adults 18 to 64 years of age, whereas the licensed family child care population was composed predominantly of women ages 25 to 64.

Figure 3.4. Ethnic Distribution of Licensed Providers Compared to Alameda County Public K-12 Teachers^a and Children 0-5 Years^b



^a California Department of Education (2004).
^b California Department of Finance (2004).

Figure 3.5. Reported Language Fluency of Licensed Providers Compared to the Marin County Adult Population^a



^a US Census Bureau (2000b).
^b Provider may speak an additional language other than English.

languages other than English or Spanish. In order of frequency, these other languages included French, Portuguese, Farsi, German, Italian, Basque, Danish, and Tagalog. No single language other than English or Spanish, however, was reportedly spoken by more than one percent of licensed providers. It is important to note the likelihood, however, that the frequency of various languages other than English or Spanish spoken by licensed providers would increase somewhat from this list if interviews had been conducted in additional languages.

We also found that the population of children served by Marin County’s licensed providers was characterized by great linguistic diversity. Our summary of the language backgrounds of young children is based on 2004-05 data from

the California Department of Education (CDE), which reports that one-fifth of kindergarteners attending Marin County public schools in 2004-2005 spoke a language other than English and were classified as English Learners. Of the more than 21 different languages spoken by English Learners in Marin County’s public kindergarten classrooms, Table 3.2 lists the 15 most commonly spoken.

There were no differences in linguistic background found between providers licensed to care for eight children or for 14 children. Linguistic background varied among licensed providers serving particular groups of children. Providers who reported serving at least one child who received public child care assistance were more likely to speak Spanish only, or English and Spanish, and less likely to speak English only, or English and another language, than were providers not caring for such children. (See Table 3.3.) Providers who cared for at least one child with special needs did not vary with respect to language from providers who did not. (See Table 3.4.)

Table 3.2. *Marin County Children in Public Kindergarten, 2004-2005: 15 Most Commonly Spoken Languages of English Language Learners*

Language	Percentage
Spanish	87.9
Vietnamese	1.6
Portuguese	1.0
French	1.0
Farsi (Persian)	1.0
Gujarati	0.8
Mandarin (Putonghua)	0.8
Korean	0.6
German	0.6
Japanese	0.6
Dutch	0.6
Cantonese	0.4
Hebrew	0.4
Lao	0.4
Punjabi	0.2
<i>N</i>	495

Source: California Department of Education (2006).

Tenure

Providers were asked how long they had been taking care of children in their homes on a *paid* basis; the average reported was 11.8 years. (See Table 3.5.) Tenure varied greatly, however; one-quarter of providers reported offering child care in their homes for three years or less, and one-quarter reported offering care for 18 years or more. (See Table 3.6.)

Tenure varied by ethnicity. (See Table 3.5.) Latina providers, who were younger on average than White, Non-Hispanic providers, reported fewer years caring for children in their homes (M=8.2), than White, Non-Hispanic providers reported

Table 3.3. Reported Language Fluency of English- and Spanish-speaking Licensed Providers, by Number of Children Receiving Publicly Subsidized Child Care

	Percentage of licensed providers, by number of publicly subsidized children (SE)		
	None	1 or more	All providers
English*	77.4 (5.75)	45.0 (11.13)	68.5 (5.44)
English and Spanish**	22.6 (5.75)	55.0 (11.13)	31.5 (5.44)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	53	20	73

Note. Based on the self-assessment of 73 providers.

^a Provider may speak an additional language other than English.

* $p < .001$, 1 or more < none.

** $p < .001$, 1 or more > none.

Table 3.4. Reported Language Fluency of English- and Spanish-speaking Licensed Providers, by Number of Children with Special Needs

	Percentage of licensed providers by number children with special needs (SE)		
	None	1 or more	All providers
English	72.1 (5.74)	53.9 (13.83)	68.9 (5.38)
English and Spanish ^a	27.9 (5.74)	46.1 (13.83)	31.1 (5.38)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	61	13	74

Note. Based on the self-assessment of 74 providers.

^a Provider may speak an additional language other than English.

Table 3.5. Tenure of Licensed Providers, by Ethnicity and Licensed Capacity

		Mean years of tenure (SE)
All providers		11.8 (0.90)
Number of providers		93
By ethnicity*	White, Non-Hispanic	13.6 (1.18)
	Latina	8.2 (1.47)
Number of providers		80
By licensed capacity**	Small homes	10.1 (1.00)
	Large homes	15.9 (1.67)
Number of providers		93

Tests of significance were only performed for White, Non-Hispanic and Latina provider groups.

* $p < .05$, White, Non-Hispanic > Latina.

** $p < .01$, Large homes > small homes.

Table 3.6. Distribution of Licensed Providers, by Tenure

	Percentage (SE)
3 years or less	25.8 (4.56)
4 - 17 years	47.3 (5.21)
18 years or more	26.9 (4.62)
Total	100.0
Number of providers	93

significantly more years ($M=13.6$). The sample size for other ethnic groups was too small to permit comparisons.

Tenure among licensed providers also varied by licensed capacity. As a group, providers licensed to care for 14 children had been in business almost 50 percent longer than those licensed to care for eight. (See Table 3.5.) Countywide, providers licensed to serve eight children reported significantly fewer years offering child care ($M=10.1$ years) than did providers licensed to care for 14 children ($M=15.9$ years).

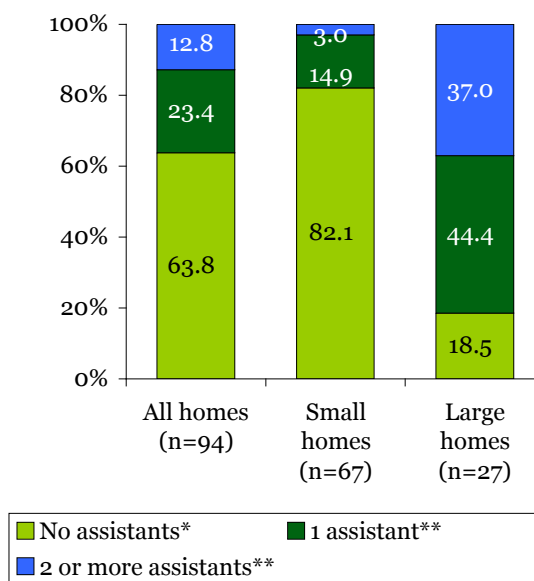
Home Ownership

Approximately two-thirds (67.1 percent) of providers reported that they owned their own homes, compared to 63.6 percent of adults in the county as a whole (US Bureau of the Census, 2000).⁸ There were no differences in home ownership by licensed capacity, educational attainment, ethnicity, age, or tenure. However, due to the small number of providers new to the field and those under 30, the lack of difference may be a function of the small sample size.

Paid Assistants

Many providers involve other adults in their family child care businesses. Spouses, older children and other relatives may assist providers, often in an unpaid capacity. In addition, many providers employ paid assistants. Providers were asked how many assistant caregivers, if any, they *paid* to help them with the children in their care. As shown in Figure 3.6, 63.8 percent reported working without any paid assistants; 23.4

Figure 3.6. Percentage of Licensed Providers with Paid Assistants, Countywide and by Licensed Capacity



* $p < .001$, Small homes > large homes.
 ** $p < .001$, Large homes > small homes.

percent reported paying one assistant; and 12.8 percent reported paying two or more assistants.

As would be expected because of required adult-child ratios, providers who were licensed to care for 14 children were significantly more likely to employ paid assistants than were those licensed to care for eight children. As shown in Figure 3.6, 17.9 percent of providers licensed to care for eight children reported employing one or more paid assistants, compared to about 81.4 percent of providers licensed to care for 14 children. Providers with a larger licensed capacity were also significantly more likely than other providers to employ more than one paid assistant.

⁸ As described in the Study Design section of this report, only 80 of the 94 providers interviewed for this study were asked this question.

Size of the Licensed Family Child Care Workforce

Typically, the number of *active* licensed family child care providers, as verified by the California Child Care Resource and Referral Network, is used to determine the size of the licensed home-based provider workforce. A broader estimate of the size of the workforce would include paid assistants, however, since a sizeable number of providers employ them, yet prior to this study, no countywide data permitted a calculation of the number of paid family child care assistants. Using these data, we estimate that between 89 and 98 paid assistants were employed in licensed family child care homes in 2005. (For a full discussion of how these estimates were calculated, see Appendix B.) Added to the 195 active licensed providers from which our sample was drawn, we estimate that the entire licensed family child care workforce in 2005, including licensees and any paid assistants, totaled between 284 and 293. (See Table 3.7.)

Table 3.7. *Estimated Number of Licensed Providers and Paid Assistants*

	Total number	
	Low estimate	High estimate
Workforce		
Number of active providers	195	195
Number of paid assistants	89	98
Total family child care workforce (paid assistants plus active providers)	284	293

*See Appendix B for a full discussion of the methodology used here. Licensed providers who had been in business for more years typically employed a greater number of paid assistants than those new to the field. The low estimate takes into account tenure of individual providers, while the high estimate does not. If more than one name appeared on the license, only one provider was counted.

What are the characteristics of children served by Marin County’s licensed family child care providers?

In Marin County, nearly 300 licensed family child care providers and paid assistants care for more than 1,600 children, mostly in mixed-age groups. Nearly 90 percent of the children cared for by licensed providers are not yet in kindergarten, and more than one-half of them are age two or under. About one-third of licensed providers report caring for at least one child who receives public child care assistance. Twenty percent of licensed providers report caring for at least one child with special needs.

As shown in Table 3.8, Marin County’s licensed family child care workforce provided services in 2005 to an estimated 1,601 to 1,676 children and their families. (For a full discussion of how these estimates were calculated, see Appendix B.) Table 3.8 also presents a distribution by age group of the estimated numbers of children served. Approximately one-third of these children were preschoolers, ages three to five, and slightly more than one-half were two years old or younger.

Providers licensed to care for eight children comprised 71.3 percent of the estimated population of providers in the county; on average, they reported caring for 7.6 children across all age spans, of whom 6.7 children were age five or younger, not in kindergarten. (See Table 3.9.) Those licensed to care for 14 children reported caring for an average of 10.8 children across all age spans, including 9.8 children age 5 or younger who were not in kindergarten. (See Table 3.9.) On average, large home providers cared for fewer than the maximum number of children they were licensed to serve, while small home providers’ enrollment, on average, was only slightly lower than their licensed capacity.

Because we did not ask those providers who typically cared for fewer than the permitted number of children why they

Table 3.8. *Estimated Number of Children Served, by Age*

	Total number	
	Low estimate	High estimate
All children		
Under age 2	474	448
Age 2	464	506
Ages 3 to 5, not in kindergarten	496	539
Ages 5 or older, in kindergarten	167	183
All ages	1,601	1,676

See Appendix B for a full discussion of the methodology used here. Licensed providers who had been in business for more years typically cared for a greater number of children than those new to the field. The low estimate takes into account tenure of individual providers, while the high estimate does not. However, in some cases, the average number of children served within a particular age group by new providers was greater than the average number served by more tenured providers.

did so, one can only speculate about the reasons for this gap between licensed capacity and enrollment. This finding, however, helps to explain why the estimated number of children *enrolled* in licensed family child care, as presented in this report, is lower than the estimated licensed *capacity* of homes in the county. Currently, the licensed capacity is 1,960 slots, based on the maximum numbers of children (eight or 14) for small and large licensed homes (California Child Care Resource & Referral Network, 2005.)

Licensed providers were asked about the number of children they served in various age groups. Providers reported a variety of configurations of the ages of children they served:

- less than one-fifth (17.4 percent, SE=3.97) reported caring for children across the entire age span from infancy to school age;
- only 2.2 percent of providers (SE=1.53) cared exclusively for children ages three to five but not yet in kindergarten;
- most providers serving children ages three to five also served younger (92.2 percent, SE=3.37) and older children (37.5 percent, SE=6.08);
- nearly one-quarter of providers (22.8 percent, SE=4.40) reported caring exclusively for children age two and younger; and
- only 2.2 percent (SE=1.53) reported caring exclusively for children age five and older, and two-thirds (66.0 percent, SE=4.91) reported serving no children of kindergarten age or older.

Each provider was asked how many children (if any) with disabilities, or with special emotional or physical needs, she served in her home. As a result, we estimate that approximately 20.2 percent of Marin County's licensed family child care providers care for such children.⁹ As shown in Figure 3.7, there were no significant differences by licensed capacity between providers who reported for caring for at least one child with special needs and those who did not. Among

⁹ Interviewees were told, "By disabilities or special needs, we mean any child who is protected by the American with Disabilities Act (ADA)." If the provider asked for clarification, interviewers added, "This would include children who are considered at-risk of a developmental disability, or who may not have a specific diagnosis but whose behavior, development, and/or health affect their family's ability to find and maintain services."

providers caring for at least one child with special needs, those speaking Spanish only reported caring for more such children, on average, than those speaking other languages. No significant difference was found among ethnic groups. (See Table 3.10.)

Providers were also asked how many of the children they served, if any, received public child care assistance.¹⁰ We then calculated the percentage of subsidized children cared for by licensed family child care providers in order to assess the extent to which government dollars contribute to providers' businesses. Approximately one-third (32.3 percent, SE=4.87) reported caring for at least one child who received government assistance. Among providers who cared for at least one subsidized child, 38.6 percent of the children enrolled in their homes received such assistance (SE=5.0). Among *all* providers, four percent reported that 70 percent or more of the children enrolled in their programs received assistance.

¹⁰ Government subsidies in Marin County come through CalWORKs and Alternative Payment Program funding. Providers were also asked if they held a contract with the Head Start, Early Head Start, or Migrant Head Start programs, which provide subsidized services to children of low-income families. In contrast to the percentage of providers serving children receiving other forms of public child care assistance, only seven percent of providers reported providing services to children in their homes through any type of Head Start program. Because of the small number of providers offering Head Start services, we did not conduct any comparative analyses. In addition, some family child care providers serve children through a contract with the California Department of Education, although this was not tracked in the survey.

Table 3.9. Mean Number of Children Served by Licensed Providers, by Age Group

	Mean number of children served (SE)		
	All homes	Small homes	Large homes
Under age 2	2.3 (0.17)	2.2 (0.19)	2.7 (0.32)
Age 2*	2.6 (0.23)	2.2 (0.25)	3.7 (0.45)
Ages 3-5, not yet in kindergarten	2.8 (0.34)	2.3 (0.35)	4.0 (0.81)
Ages 5 or under, not in kindergarten*	7.5 (0.43)	6.7 (0.45)	9.8 (0.87)
Ages 5 and older	0.9 (0.20)	0.9 (0.26)	1.0 (0.26)
All age spans*	8.5 (0.46)	7.6 (0.49)	10.8 (0.95)
<i>Number of providers</i>	94	67	27

* $p < .01$, Large homes > small homes.

Figure 3.7. Percentage of Licensed Providers Serving Children with Special Needs, Countywide and by Licensed Capacity

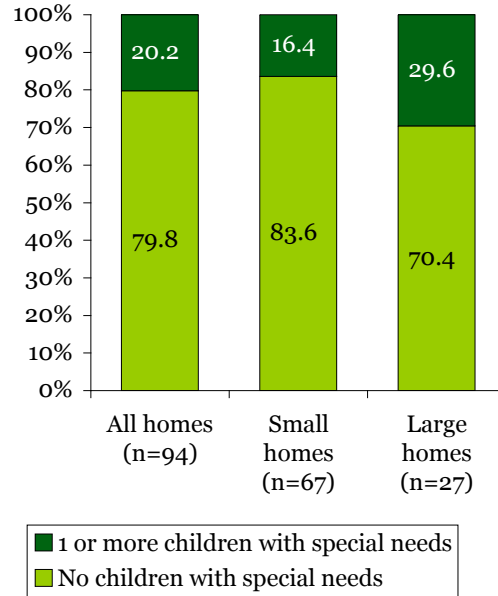


Table 3.10. Comparison of Licensed Providers Serving Children with Special Needs, by Ethnicity

	Percentage of licensed providers, by number of children with special needs (SE)		
	White, Non-Hispanic	Latina	All providers
None	81.7 (5.03)	66.7 (10.35)	77.8 (4.65)
1 or more	18.3 (5.03)	33.3 (10.35)	22.2 (4.65)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	60	21	81

Tests of significance were only performed for White, Non-Hispanic and Latina provider groups. The number of providers described in this table is less than the total sample, because African American, Asian/Pacific Islander, Native American and Multiethnic providers were not included in the tests of significance due to their small numbers within the sample.

What is the level of educational attainment and early childhood development-related training among licensed family child care providers?

Compared to Marin County's overall female population, licensed family child care providers are more likely to have attended college and/or completed a two-year college degree. They are less likely, however, to have obtained a four-year or higher college degree.

About one-half of providers have obtained a two-year, four-year or graduate degree, typically not related to early childhood development. Nearly 90 percent of all providers report having completed at least one college credit related to early childhood development, and about 70 percent report participating in non-credit-bearing training related to that subject. Approximately two-thirds of providers report that their paid assistants have participated in some early childhood-related non-credit training or college courses.

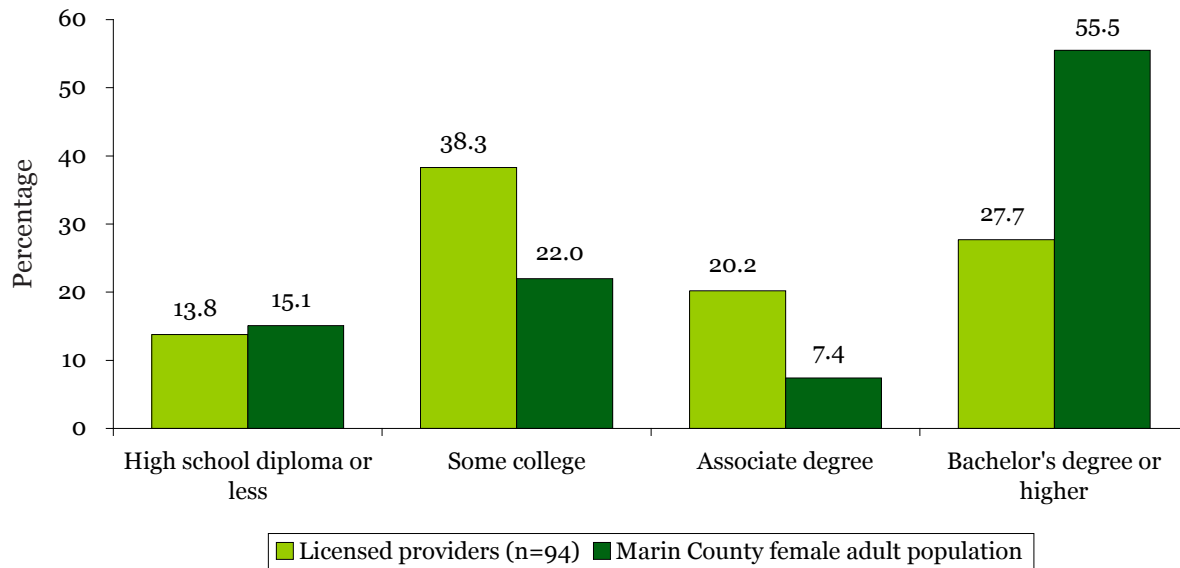
Research has indicated that the presence of better-trained adults enhances the quality of child care services for children (Whitebook & Sakai, 2004; Shonkoff & Phillips, 2000). Because of the critical role that providers' skill and knowledge play in promoting children's optimal development, considerable effort and investment have been devoted to encouraging and supporting providers to pursue professional development through CARES and other programs. With the movement toward publicly funded preschool programs, there is also an increased need to assess the size of the task of recruiting and preparing a sufficient number of teachers who meet higher educational and training standards – i.e., a bachelor's (BA) degree and early childhood certification. While not all preschool teachers will be drawn from the current early care and education workforce, many no doubt will come from its ranks. Although many states operate publicly funded preschools exclusively in center-based programs, Marin County communities are attempting to include licensed family child care providers in the delivery of new publicly funded preschool

services. The educational and training background of licensed family child care providers therefore becomes an important factor in planning the level of resources needed to ensure a well-prepared preschool workforce.

Overall Educational Attainment of Family Child Care Providers

Family child care providers in Marin County typically have completed some college credits at a rate similar to the average adult woman in the county. As shown in Figure 3.8, 86.2 percent of licensed providers reported completing some college-level work, compared to 84.9 percent of adult women in Marin County. Providers reported a higher completion rate for an associate (AA) degree (20.2 percent) than is true for the average adult female in the county (7.4 percent). Providers' completion rate for BA or higher degrees, however (27.7 percent), was one-half that of women in the county as a whole (55.5 percent). Only 6.4 percent of providers with a BA or higher degree reported having attained it through a foreign institution. Only 4.3

Figure 3.8. Educational Attainment of Licensed Providers Compared to the Marin County Female Adult Population^a



^a US Census Bureau (2000)

percent of providers reported completing a graduate degree beyond the BA, most often from a U.S. institution.¹¹

Education, Training and Certification Related to Early Childhood Development

Research findings on the contribution of education and training to provider competence and sensitivity suggest that formal higher education with a specific focus in early care and education leads to more effective care and teaching with children (Barnett, 2003; Whitebook, 2003; Zaslow & Martinez-Beck, 2005). Thus, another important aspect of professional preparation is the extent to which providers have received training, completed coursework, or participated in activities specifically focused on issues

related to early childhood development.¹² To acquire a picture of the professional preparation of providers, we asked providers whether they:

1. had completed a two-year or four-year degree related to early childhood development;
2. had taken college courses related to early childhood development;
3. had participated in non-credit training related to early childhood development, and the extent of such training; and
4. had participated in a professional development program or obtained a professional credential.

1) Degrees Related to Early Childhood Development

¹¹ Only 16.7 percent of all providers with a foreign degree had earned a graduate degree.

¹² “Early Childhood Development-related” was defined as courses or training in early childhood education, child development or psychology.

We examined the percentage of providers with AA and BA degrees who had obtained a degree related to early childhood development, and whether those with a BA or AA degree were more likely to have completed such a degree.

Overall, 47.9 percent of all providers had completed an AA or BA degree or higher. Among those who had completed a degree, 33.3 percent reported that their highest degree was related to early childhood development. Slightly more than one-quarter of providers with a BA or higher degree (26.9 percent) and 42.1 percent of providers with an AA degree had obtained a degree with an early childhood focus. (See Figure 3.9.)

2) College Credits Related to Early Childhood Development

We examined the percentage of providers who reported having completed at least one college credit in early childhood education. Over four-fifths of providers with education beyond high school (88.9 percent, SE=3.51) reported having completed at least one college credit in early childhood education, child development or psychology.¹³

We next examined differences in the percentage of providers, at varying levels of college attainment (some college, or an AA or BA degree), who had completed some early childhood development-related college coursework. We also looked at differences in the amount of such coursework that providers at different levels of college attainment had completed.

¹³ Providers who reported their highest level of education as high school or less were not included in these calculations. However, when they are included, the proportion of all providers who have completed at least one college credit related to early childhood development falls to 76.6 percent (SE=4.39).

Those who had completed an AA degree were somewhat more likely to have completed any courses related to early childhood development than were those who had only completed some college but not a degree. Those who had completed an AA degree reported completing, on average, more college credits in early childhood development than those for whom “some college” was their highest level of educational attainment. The mean number of college credits related to early childhood development was 21.0 units for providers with an AA degree compared to 13.5 units among those who had attended some college classes but had not completed a degree. (See Figure 3.10.)

3) Non-Credit Training Related to Early Childhood Development

We examined the overall percentage of providers who reported having *ever* participated in any non-college training related to early childhood development. Nearly three-quarters (71.3 percent) had done so. Next, we examined the percentage of providers at different levels of educational attainment who reported having *ever* participated in such non-credit training. Participation was most common among providers who had attended some college. As shown in Figure 3.11, approximately one-half (53.8 percent) who reported high school or less, and one-half (52.6 percent) of those who had completed an AA degree, had participated in non-credit training, compared to 83.3 percent of providers with some college.

Next, we examined how many providers had participated in non-credit training providers *during the last 12 months*, the amount of such training, and whether this amount varied by level of educational attainment. Slightly

Figure 3.9. Percentage of Licensed Providers, by Degree Attainment Related to Early Care and Education

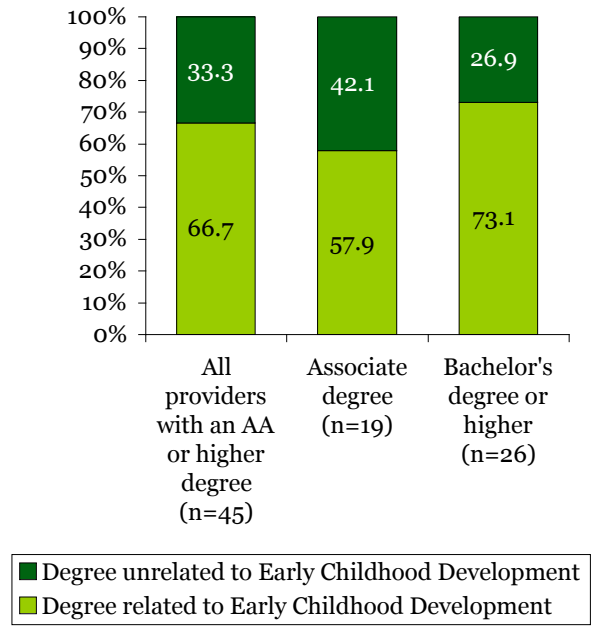


Figure 3.10. Mean Number of Credits Among Licensed Providers Reporting Completion of College Credits Related to Early Care and Education, by Educational Level

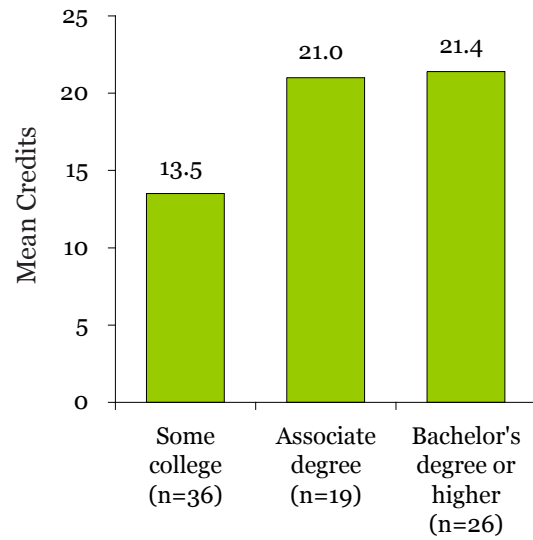
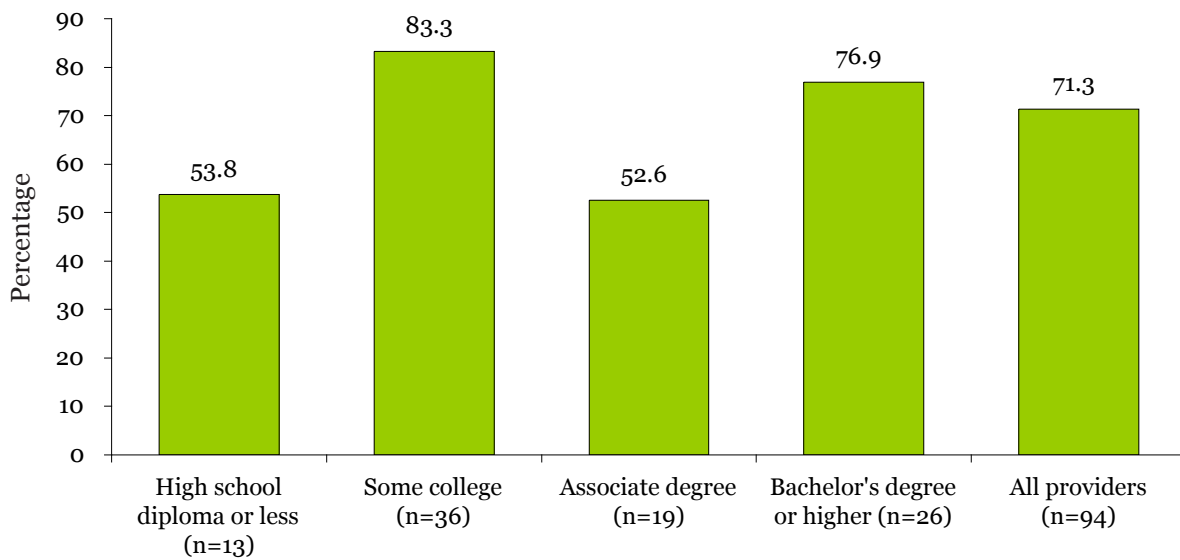


Figure 3.11. Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Early Care and Education, by Educational Level



*p < .05, Some college > high school diploma or less, Associate degree.

more than one-half of all providers (55.3 percent, SE=5.15) had participated in non-credit-bearing training related to early childhood development during the last 12 months. Providers reported participating, on average, in 17.6 hours of training during the last 12 months (SE=2.0). There were no differences among providers by level of educational attainment regarding participation in training in the last 12 months or the number of hours of non-credit early childhood development training completed in the last 12 months.

4) Provider Participation in Professional Development Activities or Certification

Another measure of providers' professional preparation is their involvement with professional development activities or certification processes. We asked providers about their involvement with four professional programs:

1. whether they had heard of or participated in the Marin CARES program;
2. whether they were accredited by the National Association for Family Child Care (NAFCC);
3. whether they held a Child Development Permit issued by the California Commission on Teacher Credentialing; and
4. whether they held a Teacher Credential issued by the California Commission on Teacher Credentialing and/or by an equivalent agency in another state.

Nearly three-quarters of providers were familiar with the Marin CARES program. Among these providers, 29.4 percent reported that they were current participants.

We lack confidence about the reliability of the particular finding related to NAFCC accreditation, because the response to this question was disproportionate to the actual number of known program participants. Other studies and program administrators have noted this phenomenon in the field, in which providers and other early childhood staff report participation in various programs or achievement of a particular status that does not reflect administrative records (Whitebook & Sakai, 2004). This may be due to confusion about the various names of professional development-related programs.

A Child Development Permit requires some college credits related to early childhood development, but is not required for obtaining a family child care license. Reflecting these requirements, the vast majority of licensed providers (91.1 percent) did not report having a Child Development Permit.

A teaching credential requires the holder to have completed a BA degree at a minimum, and typically the equivalent of a fifth year of college coursework. We asked those providers who had completed a BA or higher degree whether they held a teaching credential issued by the State of California or by another state. Among the 27.7 percent of providers (SE=4.64) who had completed a BA or higher degree, 3.8 percent (SE=3.85) reported holding a California teaching credential and 3.8 percent (SE=3.85) reported holding a credential from another state. Based on these findings, we estimate that only 1.1 percent (SE=1.06) of all providers in the county (including those with BA degrees, as well as those with lower levels of educational attainment) hold a California public school teaching credential.

Professional Preparation of Family Child Care Paid Assistants

To further explore the educational background of adults in licensed family child care homes, we examined two issues:

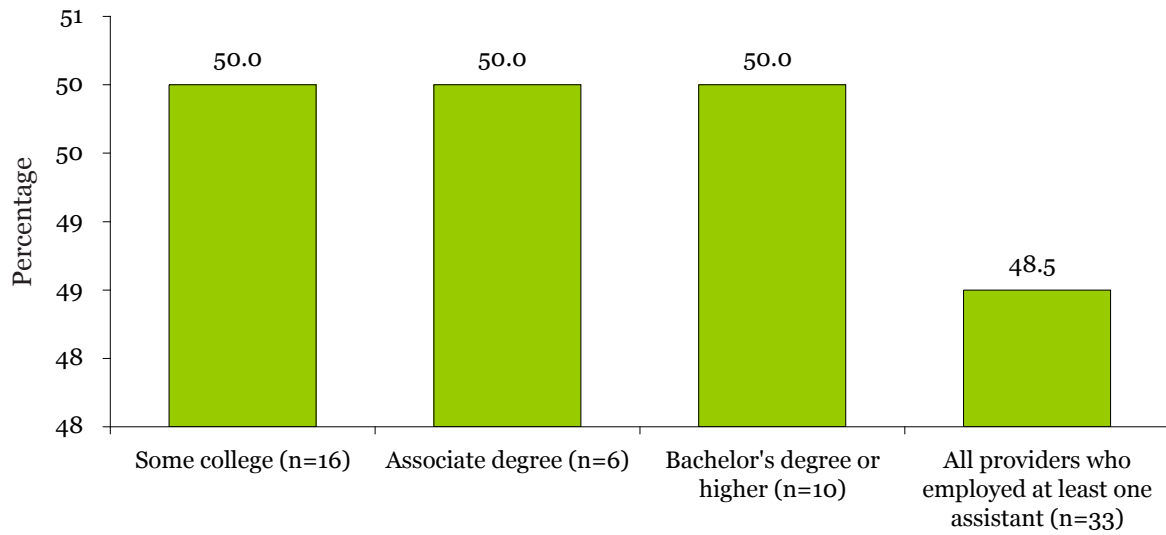
1. the extent to which providers were working with paid assistants who had received some training or education related to early childhood development, and
2. whether providers who employed better-trained and /or educated paid assistants had themselves completed more education and training.

To explore the extent to which providers were working with paid assistants with some training or education related to early childhood development, we examined what percentage of providers reported that their paid assistants had earned college credits or participated in non-credit training. Providers reported that, on average, 35.3 percent (SE=7.10) of their paid assistants had earned college credits, and 58.1 percent (SE=8.39) had received non-credit training related to early childhood development.

About one-half (51.5 percent, SE=8.83) of providers with paid assistants reported that *none* of their paid assistants had earned such college credits, and 35.5 percent (SE=8.73) reported that *none* of their paid assistants had received non-credit training in this field. Approximately one-fifth (21.2 percent, SE=7.23) of providers reported that *all* of their paid assistants had received college credits related to early childhood development, and 51.6 percent (SE=9.12) reported that *all* of their paid assistants had participated in non-credit training.

To explore whether providers who employed better-trained and/or educated paid assistants had themselves completed more education and training, we calculated the percentage of providers who reported that *at least one* paid assistant in their employ had participated in education or training related to the care of young children, and compared these rates across educational levels. Because of the small sample size, however, we were not able to test for significant differences. As shown in Figure 3.12, providers whose highest level of education was high school or less did not employ paid assistants with college credits or non-college training related to early childhood development. Those providers who had completed some college or an AA or BA degree were as likely as not to employ paid assistants with college credits or non-credit early childhood-related training.

Figure 3.12. *Percentage of Licensed Providers who Employed At Least One Paid Assistant with College Credits, by Provider Education*



How do levels of overall educational attainment, and of training related to early childhood development, vary among licensed family child care providers?

Providers caring for children age three to five do not vary in their education or early childhood training from those who care exclusively for younger or older children, but those with BA degrees or higher care for more three-to-five-year-old children, on average, than those with less education. Providers caring for at least one subsidized child are not likely to have attained higher levels of education than providers who do not care for any subsidized children, but providers caring for at least one subsidized child are more likely to have participated in non-credit bearing training in the last 12 months related to early childhood development.

White, Non-Hispanic providers have completed BA or higher degrees at a higher rate than Latina providers. Providers who speak English and Spanish, or English and another language, have typically completed some college and often have completed an AA degree or higher. Those who speak Spanish only have not attended college.

Regardless of educational level, the average family child care provider is in her mid-to-late forties.

In the previous section, we described the educational attainment and specific early childhood related training for licensed family child care providers in Marin County as a whole. In this section, we explore differences among providers along these dimensions based on:

- the licensed capacity of their homes,
- the ages of children with whom they work,
- whether they receive public dollars to care for children of low-income families, and
- such provider demographic characteristics as age, ethnicity and language background.

Overall Educational Attainment, by Licensed Capacity

We explored whether providers licensed to care for larger or smaller groups of children varied from each other with respect to their level of education.

We did not identify significant differences in this regard, but this may be a function of sample size. See Figure 3.13 for a description of educational attainment by licensed capacity.

Overall Educational Attainment, by Ages of Children Served

Because of proposed increases in qualifications for teachers or providers working in publicly funded preschool programs targeting four-year-old children, there is considerable interest in whether providers who currently work with preschoolers differ in educational attainment from those working with younger children. We examined whether providers who served children between three and five years of age, whether exclusively or with other children, differed as a group with respect to educational attainment from those who worked exclusively with younger or older children.

As noted earlier in this report, however, there were few family child care providers in the sample who served children of one age group exclusively. Overall, most providers served a mixed age of children, and most groupings included children between the ages of three and five. Only 2.2 percent of providers (SE=1.53) cared exclusively for children between the ages of three and five; overall, 68.8 percent (SE=4.83) cared for children ages three to five, usually with children from another age range as well. Providers with a BA or higher degree were no more likely to care for children ages three to five than providers with lower levels of educational attainment, but if they did care for children ages three to five, they cared for more children of this age on average (M=5.6; SE=1.00) than providers who reported high school or less (M=2.3; SE=0.42) or some college (M=3.2; SE=0.39) as their highest level of educational attainment. Also, providers caring for children five and older were more likely to report some college, rather than high school, as their highest level of educational attainment than were those who did not care for school-age children.

Overall Educational Attainment, and Early Childhood-Related Training, by Number of Children Receiving Government Subsidy

Research suggests that children of low-income families derive greater benefit from higher-quality early care and education programs than do children of middle- and upper-income families (Helburn, 1995). Studies have found programs rated higher in quality to be staffed by teachers and providers with higher levels of education, and with training specifically focused on early childhood (Helburn, 1995; Galinsky,

Howes, Kontos & Shinn, 1994; Whitebook, Howes & Phillips, 1990; Whitebook & Sakai, 1995).

In California, however, licensed providers receiving subsidies through vouchers to care for children of low-income families are not required to meet higher educational or training standards than providers not receiving subsidies. Reflecting these current standards, we found that overall educational attainment, or the likelihood of completion of a college degree related to early childhood development, did not vary between providers who reported caring for at least one child receiving public child care assistance and those who did not care for any children receiving subsidies. (See Table 3.11.)

We also examined whether providers' completion of college credits and/or participation in non-credit training related to early childhood development varied between providers caring for at least one subsidized child and those not caring for any children receiving public child care assistance. We found that providers caring for one or more subsidized children were no more likely to have completed college credits related to early childhood development than were those caring for no subsidized children.

Providers caring for at least one child receiving subsidy were more likely to have completed some non-credit hours related to early childhood development *in the last 12 months* (80.0 percent) than were those who did not report caring for any such children (42.9 percent). (See Figure 3.14.) In addition, among providers who had participated in non-credit-bearing early childhood training in the last 12 months, those who cared for at least one subsidized child had completed, on

Figure 3.13. Educational Attainment of Licensed Providers, Countywide and by Licensed Capacity

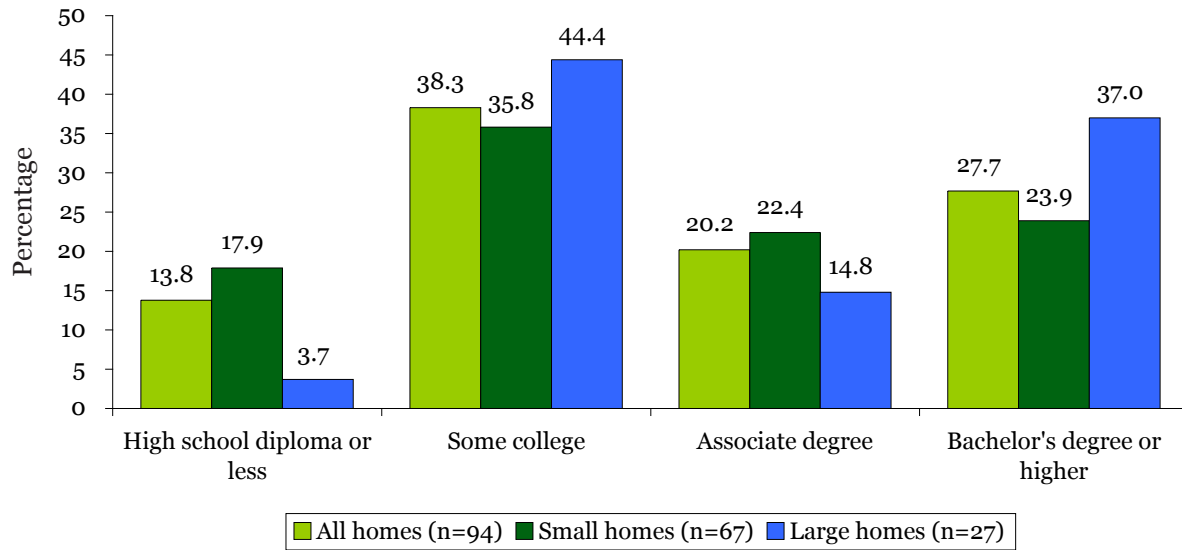


Table 3.11. Educational Attainment of Licensed Providers, by Number of Children Receiving Publicly Subsidized Child Care

	Percentage of licensed providers, by number of publicly subsidized children (SE)		
	None	1 or more	All providers
High school diploma or less	12.7 (4.22)	16.7 (6.84)	14.0 (3.62)
Some college	36.5 (6.10)	40.0 (8.99)	37.6 (5.05)
Associate degree	19.0 (4.97)	23.3 (7.76)	20.4 (4.20)
Bachelor's degree or higher	31.7 (5.90)	20.0 (7.34)	28.0 (4.68)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	63	30	93

average, more hours of training (27.5 hours, SE=3.07) than had those who did not care for such children (17.7 hours, SE=2.62).

Overall Educational Attainment, and Early Childhood-Related Training, by Provider Demographic Characteristics

Among providers with different levels of education and specific early childhood-related training, we examined such characteristics as:

- age and tenure,
- ethnicity, and
- language background.

1) Overall Educational Attainment, by Age and Tenure

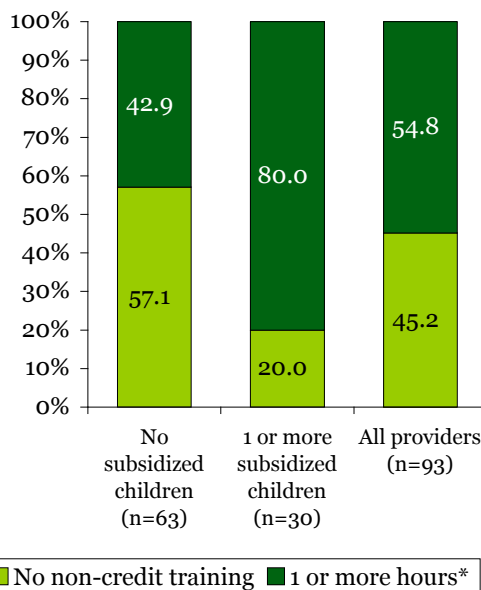
With respect to average age and tenure, we found no significant differences countywide among groups of providers who reported different educational backgrounds. On average, providers were in their mid-to-late forties and had been working with children in their homes for 12 years, whether they had completed a college degree, taken some college courses, or reported their highest level of education as high school or less.¹⁴ There were no differences among providers with or without a degree focused on early childhood development with respect to age and tenure.

2) Overall Educational Attainment, by Ethnicity

We sought to examine provider ethnicity and educational background

¹⁴ On average, those who had completed a graduate degree were 44.5 years old, with an average tenure in the field of 9.5 years. All graduate degree holders had been in the field for 24 months or more.

Figure 3.14. *Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Early Care and Education, by Number of Publicly Subsidized Children Served*



* $p < .01$, 1 or more subsidized children > no subsidized children.

along three dimensions:

- the ethnic distribution of providers *across* different levels of formal education;
- the distribution of educational attainment *within* various ethnic groups, and
- the ethnic distribution of providers at different levels of education, compared to that of Marin County’s adult population.

Combined, these analyses provide a picture of how well providers of various ethnic groups are represented at different educational levels, how this distribution reflects general trends in the population, and where direct supports and incentives might be directed toward particular ethnic groups in order to boost their educational

attainment. Note that because of sample size among other groups, our analysis focuses only on Latina and White, Non-Hispanic providers.

The ethnic distribution of providers varied across levels of educational attainment, as shown in Figure 3.15. White, Non-Hispanic providers comprised 74.1 percent of all providers, but they comprised 88.0 percent of providers who had completed a BA or higher degree. Latinas comprised 25.9 percent of all providers, but only 12.0 percent of those whose highest level of education was a BA degree or higher. In determining the distribution of educational attainment (as represented by college attendance and completion of degrees) *within* various ethnic groups, we found that 56.0 percent of White, Non-Hispanic providers reported completing an AA or higher degree, and approximately one-third of providers had completed a four-year degree or higher. Among Latina providers, approximately one-fifth reported completing an AA or higher degree (19.0 percent), while 14.3 percent reported completing a four-year degree or higher. Two-thirds of Latina providers had completed at least one college-level course. Looking at degree holders by ethnicity, we found no differences between Latina providers and White, Non-Hispanic providers with respect to having a degree related to early childhood development. (See Table 3.12.)

Next, we sought to determine the ethnic distribution of licensed providers at different levels of education, as compared to Marin County's overall adult population. For example, were Latina providers more or less likely than other Latino adults in Marin County to have achieved a BA degree? To make

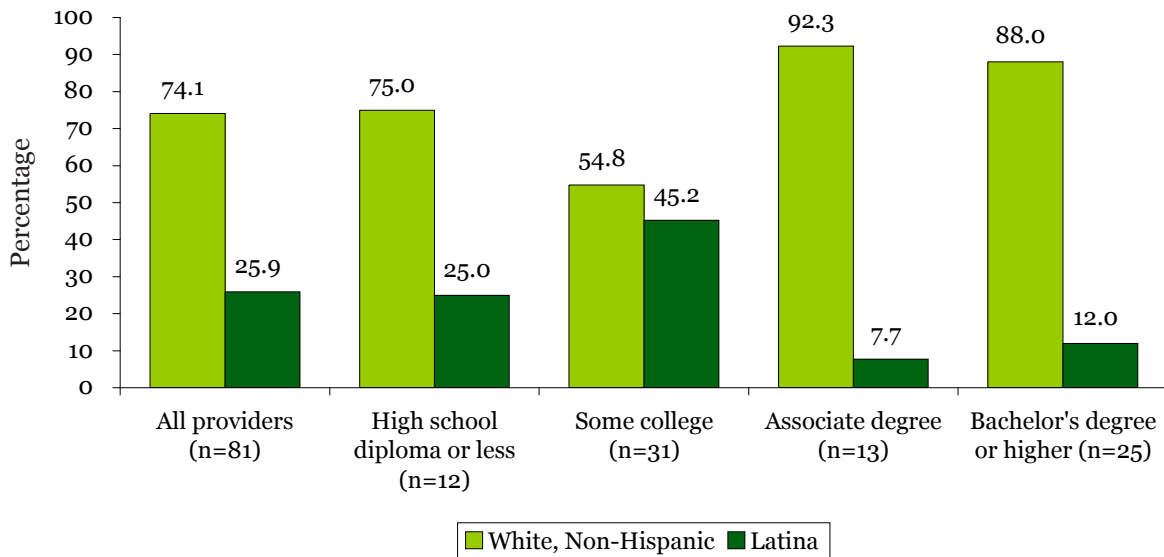
this comparison, we examined data from the 2000 U.S. Census on Marin County adults' attainment of BA or higher degrees. White, Non-Hispanic (56 percent) providers had attained BA or higher degrees at the same rate as their counterparts in the overall county population (all White, Non-Hispanic adults, 56 percent). Latina providers were slightly less likely to have earned a BA (14.3 percent) as Latina Marin County adults (18.1 percent).

3) Overall Educational Attainment, by Language

Since many of Marin County's young children speak a first language other than English, and many have parents with limited English proficiency, there is understandable concern about the ability of the early care and education workforce to communicate well with children and their adult family members, and to create learning environments for children that build upon their first language as a foundation for successful mastery of English (Garcia, 2005; Sakai & Whitebook, 2003; Wong-Fillmore & Snow, 1999). Because of the commonly shared goal among policy makers and advocates to build not only a more educated but an ethnically and linguistically diverse early care and education workforce (Calderon, 2005), it is important to understand how language capacity varies among providers with different levels of educational attainment, in order to design and target professional development resources.

The following is an analysis of educational attainment by language, but it is important to note that since interviews were conducted only in Spanish or English, providers who are fluent in other languages but do not speak English or

Figure 3.15. *Ethnic Distribution of Licensed Providers, by Educational Level*



Tests of significance were only performed for White, Non-Hispanic and Latina provider groups.

Table 3.12. *Percentage of Licensed Providers by Degree Attainment Related to Early Care and Education, by Ethnicity*

	Percentage (SE)		
	Degree in unrelated field	Degree in early care and education	All providers
White, Non-Hispanic	88.5 (6.35)	91.7 (8.09)	89.5 (5.05)
Latina	11.5 (6.35)	8.3 (8.09)	10.5 (5.05)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	26	12	38

Tests of significance were only performed for White, Non-Hispanic and Latina provider groups.

Spanish are not represented in this study. In addition, we note again that language ability was self-reported by providers, rather than independently verified; we also were unable to determine whether or not there was a linguistic match between providers and the children they served.

Our analyses focused on three issues:

1. the percentage of providers at different educational levels with the self-reported capacity to communicate with children in English and in an additional language;
2. the levels of educational attainment and early childhood training among providers with the self-reported capacity to communicate with children in Spanish and/or in Spanish and English; and
3. the self-reported language capacity of providers who had obtained a college degree in a foreign institution.

More than one-third of all providers had the self-reported capacity to communicate with children and families in English and in an additional language. Providers who reported speaking English and Spanish were concentrated among those with some college or a BA or higher degree. Providers who spoke English and a language other than Spanish most typically had completed an AA degree. (See Table 3.13.)

In addition, none of the providers who spoke Spanish only reported completion of an AA or higher degree.

About three-fifths of Spanish-speaking providers (62.5 percent) with a BA or higher degree had earned their degree from a foreign institution, compared to 5.6 percent of non-Spanish-speaking providers with a BA or higher. (See Table

3.14.) About one-third of providers with a BA or higher spoke Spanish, and most had received their highest degree from a foreign institution.

Table 3.13. Reported Language Fluency of English- and Spanish-speaking Licensed Providers, by Educational Level

	Percentage (SE)				
	High school diploma or less	Some college	Associate degree	Bachelor's degree or higher	All providers
English	53.8 (13.9)	50.0 (8.38)	57.9 (11.39)	57.7 (9.74)	54.3 (5.17)
Spanish ^a	23.1 (11.75)	11.1 (5.27)	0.0	0.0	7.4 (2.72)
English and Spanish ^a	7.7 (7.43)	36.1 (8.05)	5.3 (5.15)	30.8 (9.10)	24.5 (4.46)
English, plus an additional language other than Spanish	15.4 (10.06)	2.8 (2.75)	36.8 (11.13)	11.5 (6.30)	13.8 (3.58)
<i>Total</i>	100.0	100.0	100.0	100.0	100.0
<i>Number of providers</i>	13	36	19	26	94

Note. Based on the self-assessment of 94 providers.

^a Provider may speak an additional language other than English.

Table 3.14. Percentage of Spanish-speaking Licensed Providers Obtaining Bachelor's Degree or Higher from Foreign Institutions

	Percentage (SE)		
	Does not speak Spanish	Speaks Spanish	All providers with a Bachelor's degree or higher
Foreign institution	5.6 (5.51)	62.5 (17.46)	23.1 (8.43)
U.S. institution	94.4 (5.51)	37.5 (17.46)	76.9 (8.43)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	18	8	26

Note. Based on the self-assessment of 75 providers.

How well prepared are licensed providers to care for and educate children who are dual language learners or have special needs?

Only a handful of providers have participated in non-credit training or have completed college coursework focused on dual language learning in young children, despite the growing numbers of young children in Marin County who speak a language other than English in their homes. More providers who have participated in training or courses related to dual language learning report completion of an AA or higher degree, but only one-quarter of those who report earning college credits or degrees have taken such training. Providers who speak Spanish are more likely to have participated in such training.

Many more providers are trained to work with children with special needs. Nearly one-half of all providers have participated in non-credit training, and one-quarter have completed college credits, related to children with special needs. Those caring for at least one such child, and those with some college, are more likely to be trained in this area.

As Marin County considers how best to prepare its workforce to meet the needs of young children across the state, particular concern centers on two groups of children:

- the growing number who are dual language learners, many of them from immigrant families; and
- the growing number who have been identified as having special developmental needs.

A pressing question is whether the current early care and education workforce has sufficient skill and knowledge to meet the needs of these children. While it was beyond the scope of this study to assess the overall knowledge and competencies of licensed family child care providers, our interview did allow some initial exploration of providers' professional preparation related to dual language learners and/or children with special needs.

Preparation to Work with Young Children Acquiring a Second Language

In 2005, slightly more than one-fifth of children entering public kindergarten in Marin County were estimated to be dual language learners (California Department of Education, 2006). According to recent projections of the growth of this segment of California's population over the next several decades (Hill, Johnson & Tafoya, 2004), it is likely that soon many more young children receiving early care and education services will be dual language learners and/or living in families in which some or all of the adults do not speak English.

In this survey, we were able only to investigate which languages providers spoke, not the languages spoken by children in their care. We know, however, from anecdotal reports that a sizeable portion of providers in many areas of the state either care for children for whom English is a second language or

will likely be called upon to do so over the course of their careers. We also know from a recent survey of early childhood teacher preparation programs in California institutions of higher education (Whitebook, Bellm, Lee & Sakai, 2005) that only one-quarter of these programs require a course focused on second-language acquisition in young children, suggesting that exposure to professional development around these issues through college courses is limited.

Our goal was to ascertain the extent to which providers had received any training focused on this topic, by asking whether they had participated in relevant credit-bearing courses and/or non-credit training. Most had not: only 17.2 percent of providers reported that they had received non-credit training, and only 15.0 percent of providers reported that they had completed college coursework, focused on dual language learning in young children. (See Tables 3.15 and 3.17.)

Providers who *had* participated in non-credit training reported, on average, participating in 17.4 hours of training on this topic. (See Table 3.16.) Among those who had completed college credits related to dual language learning, the average number of credits was 1.4. (See Table 3.18.)

As shown in Table 3.19, providers who spoke English and Spanish, or Spanish only (40.0 percent) were more likely than those who did not (19.0 percent) to have participated in training or courses related to dual language learning. As shown in Table 3.19, providers who had participated in courses relevant to the needs of dual language children were more likely to report having an AA or BA degree and were less likely to report some college as their highest educational

level, compared with providers who had received no professional development related to dual language learners.

Preparation to Work with Young Children With Special Needs

Over the last 30 years, the deepening understanding of and ability to identify developmental challenges, coupled with changes in federal law,¹⁵ have led to the increased involvement of early childhood settings in providing services to children with special physical and developmental needs and/or disabilities (Shonkoff & Phillips, 2000). Recognizing that the early care and education workforce was being increasingly called upon to provide such services, the California Legislature passed SB 1703 in 2000, supporting local child care resource and referral programs and child care planning councils in providing training related to children with special needs. This funding was renewed in 2005.

For this study, we were interested in determining how much professional preparation licensed family child care providers had received related to children with special needs. Specifically, we determined:

¹⁵ Two federal laws in particular have contributed to the inclusion of children with special needs in early childhood programs. The American with Disabilities Act (ADA), a federal civil rights law passed in 1990, prohibits discrimination by child care centers and family child care providers against individuals with disabilities. The ADA requires providers to assess, on a case-by-case basis, what a child with a disability requires in order to be fully integrated into a program, and whether reasonable accommodation can be made to allow this to happen. In addition, the Individuals with Disabilities Education Act, passed in 1975 and reauthorized in 2004, requires public schools to meet the educational needs of children as young as three with disabilities, guarantees early intervention services to infants and toddlers up to age three in their “natural environments,” and addresses the transition of infants and toddlers from early intervention services to preschool programs. Marin County’s equivalent law, the Early Intervention Services Act, is also known as Early Start (Child Care Law Center, 2005).

Table 3.15. Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Dual Language Learning Children

	Percentage (SE)
None	82.8 (3.93)
1 or more hours	17.2 (3.93)
Total	100.0
Number of providers	93

Table 3.16. Mean Hours of Training Among Licensed Providers Reporting Completion of Non-Credit Training Related to Dual Language Learning Children

	Mean (SE)
Mean hours of training	17.4 (5.45)
Number of providers	16

Table 3.17. Percentage of Licensed Providers Reporting Completion of College Credits Related to Dual Language Learning Children

	Percentage (SE) Providers with some college or higher
None	85.0 (4.02)
1 or more credits	15.0 (4.02)
Total	100.0
Number of providers	80

Table 3.18. Mean Number of Credits Among Licensed Providers Reporting Completion of College Credits Related to Dual Language Learning Children

	Mean (SE)
Mean number of credits	1.4 (4.82)
Number of providers	12

Table 3.19. Percentage of Licensed Providers Reporting Completion of Credit or Non-Credit Training Related to Dual Language Learning Children, by Language Fluency and Educational Attainment

		Percentage of licensed providers, by number of credits or hours in dual language learning (SE)			
		None	1 or more*	Total	Number of providers
By language fluency	Speaks Spanish or Spanish and English	60.0 (8.99)	40.0 (8.99)	100.0	24
	Does not speak Spanish ^a	81.0 (4.97)	19.0 (4.97)	100.0	69
	All providers	74.2 (4.56)	25.8 (4.56)	100.0	93
By educational attainment^b	High school diploma or less	84.6 (10.06)	15.4 (10.06)	100.0	13
	Some college	77.1 (7.14)	22.9 (7.14)	100.0	35
	Associate degree	73.7 (10.16)	26.3 (10.16)	100.0	19
	Bachelor's degree or higher	65.4 (9.38)	34.6 (9.38)	100.0	26
	All providers	74.2 (4.56)	25.8 (4.56)	100.0	93

Note. Language fluency based on the self-assessment of 93 providers.

^a Provider may speak an additional language other than English.

^b Test of significant differences among groups were not performed due to small sample sizes.

* $p < .05$, Speaks Spanish or Spanish and English > Does not speak Spanish.

1. the percentage of providers who had participated in special needs-related training or college courses,
2. whether providers who reported caring for at least one child with special needs were more likely to have participated in relevant education and training, and
3. differences in overall educational attainment between providers who cared for children with special needs and those who did not, as well as those who had or had not participated in special needs-related training or education.

Providers' Overall Levels of Professional Development Related to Special Needs

We found that about one-half of all licensed providers in the county (54.9 percent), whether they served any children with special needs or not, had participated either in non-credit training or in college coursework related to special needs. (See Table 3.20.) Nearly one-half of all providers (46.7 percent) reported that they had participated in non-credit training related to special needs, and their average number of training hours was 12.0. (See Tables 3.21 and 3.22.) As shown in Table 3.23, fewer providers (20.2 percent) had participated in college credit-bearing courses on this subject. The average number of credits completed was 8.4. Providers licensed to care for 14 children (68.0 percent) were more likely than those licensed to care for eight children (38.5 percent) to have completed at least one hour of non-credit training related to children with special needs. Providers licensed to care for more children, however, were no more likely than those licensed to care for fewer children to have completed at least one college credit related to children with special needs.

Professional Development Related to Special Needs, by Number of Children with Special Needs Served

Overall, about one-fifth of providers reported caring for at least one child with special needs. We examined what percentage of providers who cared for at least one child with special needs reported having participated either in non-credit training or in college coursework related to special needs, and found that 78.9 percent had done so. We also found that those who cared for at least one child with special needs were about half again as likely to have participated in some related professional development as were those who cared for no such children. (See Table 3.20.)

Non-Credit Training Related to Special Needs

Providers caring for at least one child with special needs had participated in more non-credit training than had providers caring for no such children. Among those who had at least one child with special needs in their care, 72.2 percent had participated in relevant non-credit training, and 55.6 percent had completed at least eight hours of such training, whereas only 40.3 percent of providers serving no children with special needs had received such non-credit training, and 29.2 percent had completed at least eight training hours. (See Table 3.21 and 3.24.)

College Credits Related to Special Needs

When examining only those providers who had completed some education beyond high school, we found that 24.1 percent had completed college credits related to working with children with

special needs. Among providers who had completed some college work, those serving one or more children with special needs were more likely to have completed one or more college credits related to special needs (31.6 percent) than were those not serving any such children (21.7 percent). (See Table 3.23.)

Providers' Overall Educational Attainment, by Number of Children with Special Needs Served

Providers serving children with special needs report higher levels of overall educational attainment than providers not serving such children. Providers who care for at least one child with special needs are more likely to report some college as their highest level of educational attainment, compared to those who do care for any such children. Their highest reported level of educational attainment was high school or less. (See Table 3.25.)

Table 3.20. Percentage of Licensed Providers Reporting Completion of Credit or Non-Credit Training Related to Children with Special Needs, by Number of Such Children Served

	Percentage of licensed providers, by number of children with special needs (SE)		
	No children	1 or more children	All providers
0 hours*	51.4 (5.92)	21.1 (9.40)	45.1 (5.24)
1 or more credits or hours**	48.6 (5.92)	78.9 (9.40)	54.9 (5.24)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	72	19	91

* $p < .05$, No children > 1 or more children.

** $p < .05$, 1 or more children > no children.

Table 3.21. Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Children with Special Needs, by Number of Such Children Served

	Percentage of licensed providers, by number of children with special needs (SE)		
	No children	1 or more children	All providers
0 hours*	59.7 (5.81)	27.8 (10.62)	53.3 (5.29)
1 or more hours**	40.3 (5.81)	72.2 (10.62)	46.7 (5.29)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	72	18	90

* $p < .05$, No children > 1 or more children.

** $p < .05$, 1 or more children > no children.

Table 3.22. Mean Hours of Training Among Licensed Providers Reporting Completion of Non-Credit Training Related to Children with Special Needs, by Number of Such Children Served

	Mean hours of training, by number of children with special needs (SE)			
	None	1	2 or more	All children
Providers with 1 or more hours	11.7 (1.03)	11.0 (2.24)	16.0 (1.63)	12.0 (0.87)
<i>Number of providers</i>	29	8	4	41
All providers	4.7 (0.79)	9.8 (2.32)	8.0 (3.12)	5.5 (0.75)
<i>Number of providers</i>	72	9	8	89

Table 3.23. Percentage of Licensed Providers Reporting Completion of College Credits Related to Children with Special Needs, by Number of Such Children Served

		Percentage of licensed providers, by number of children with special needs (SE)		
		None	1 or more	All providers
Providers with some college or higher	0 credits	78.3 (5.35)	68.4 (10.73)	75.9 (4.84)
	1 or more credits	21.7 (5.35)	31.6 (10.73)	24.1 (4.84)
<i>Total</i>		100.0	100.0	100.0
<i>Number of providers</i>		60	19	79
All providers	0 credits	82.7 (4.39)	68.4 (10.72)	79.8 (4.16)
	1 or more credits	17.3 (4.39)	31.6 (10.72)	20.2 (4.16)
<i>Total</i>		100.0	100.0	100.0
<i>Number of providers</i>		75	19	94

Table 3.24. Hours of Training Among Licensed Providers Reporting Completion of Non-Credit Training Related to Children with Special Needs, by Number of Such Children Served

	Percentage of licensed providers, by number of children with special needs (SE)		
	None*	1 or more**	All providers
0 hours	59.7 (5.81)	27.8 (10.62)	53.3 (5.29)
1 - 7 hours	11.1 (3.72)	16.7 (8.83)	12.2 (3.47)
8 or more hours	29.2 (5.39)	55.6 (11.78)	34.4 (5.04)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	72	18	90

* $p < .001$, 0 hours > 8 or more hours
 ** $p < .001$, 8 or more hours > 0 hours.

Table 3.25. Educational Attainment of Licensed Providers Serving Children with Special Needs, by Number of Such Children Served

	Percentage of licensed providers, by number of children with special needs (SE)		
	None	1 or more	All providers
High school diploma or less	17.3 (4.39)	0.0	13.8 (3.58)
Some college	33.3 (5.47)	57.9 (11.39)	38.3 (5.04)
Associate degree	24.0 (4.96)	5.3 (5.15)	20.2 (4.16)
Bachelor's degree or higher	25.3 (5.05)	36.8 (11.13)	27.7 (4.64)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	75	19	94

Discussion

This report provides a comprehensive profile of licensed family child care in Marin County. Here, we briefly comment on the findings we consider most relevant to current efforts to design and improve policies that impact the quality and availability of services for young children prior to kindergarten.

Our study has sought to answer five overarching questions:

1. Who constitutes the current licensed family child care workforce in Marin County?
2. What are the characteristics of children served by Marin County's licensed family child care providers?
3. What is the level of educational attainment and early childhood development-related training among licensed family child care providers?
4. How do level of overall educational attainment, and of specific training related to early childhood development, vary among licensed family child care providers?
5. How well prepared are licensed providers to care for and educate children who are dual language learners or have special needs?

1) Who constitutes the licensed family child care workforce in Marin County?

In Marin County, the typical licensed family child care provider is a woman in her mid-forties who has been taking care of children in her home for nearly 12 years. She usually works without a paid assistant. A provider is most likely to be White, Non-Hispanic, followed by Latina. She is likely to speak English only, or English and Spanish.

Demographically, the licensed family child care workforce in Marin County is characterized by both diversity and uniformity.

On one hand, licensed providers are an ethnically and linguistically diverse group, more closely approximating the backgrounds of children and families than teachers in the K-12 public school system. This diversity in language and culture exceeds the cultural and linguistic makeup of the county, and provides a promising foundation on which to revamp and expand services for young children. But in light of the continuing efforts to upgrade the knowledge and skills of Marin County's early care and education workforce – in particular, the proposed increase in educational standards for teachers in publicly funded preschool – the challenge will be to intentionally maintain this workforce diversity. This can only be done by investing in a range of appropriate supports that will truly allow people from a wide spectrum of cultural, educational and financial backgrounds to access professional development opportunities. A proactive strategy will be essential, including scholarships, tutoring, conveniently scheduled and located classes, and resources for students learning English as a second language.

On the other hand, family child care providers are virtually all women, and are in roughly the same age group. Both of

these issues speak to potential problems facing the early care and education field.

The age of this workforce raises questions about the supply of child care services in the future. Currently the pool of providers appears to be self-replenishing, with a relatively constant number of providers entering and leaving the field from year to year, as determined by the stability of licensed capacity. But nearly one-quarter of the family child care workforce is approaching retirement age, and less than five percent of family child care providers are under 30, underscoring the need for more proactive recruitment strategies than are now in place, particularly geared to younger people. The Child Care Initiative Project, a public-private partnership seeking to expand the supply of licensed child care, is active in Marin County, particularly among potential Spanish and Portuguese speaking providers. With respect to gender, it has been noted repeatedly that the absence of male role models can be detrimental for young children, particularly for those without a constant adult male presence in their lives. While the gender balance of the family child care workforce is not likely to shift dramatically, given the complexity of gender-based discrimination and opportunity, the inclusion of more men in this field is worthy of attention as part of ongoing recruitment strategies. It is also possible that there is a greater male

presence in family child care homes than we could ascertain from our data, but due to the interview length, we did not collect data about the gender of paid assistants or of family members who regularly interact with the children; further research could easily answer this question.

In addition, rising housing costs further underscore the importance of expanded recruitment and retention strategies. Previous research has identified a high level of home ownership among licensed providers (Whitebook et al., 2002), in part necessitated by the challenges renters often face in seeking to operate a family child care business – for example, securing a landlord’s cooperation in making the necessary renovations or repairs in order to meet licensing standards. Particularly in Marin County’s expensive housing market, the supply of licensed family child care could be in danger as home ownership grows beyond the reach of new or potential providers.

This study breaks new ground by focusing attention on paid family child care assistants, a group not often included in discussions of the early care and education workforce. The finding that most providers do not work with a paid assistant may give the impression that family child care employees (in contrast to licensed providers themselves) play a small role in the delivery of early care and education. Yet our estimate of nearly 100 paid assistants in Marin County signals that this segment of the workforce deserves greater attention with respect to professional preparation and working conditions. Previous research (Whitebook & Sakai, 2004) has shown that the presence of a greater proportion of highly trained staff within a child care

setting contributes to the overall quality of a program and promotes staff retention. Efforts to target and encourage paid assistants, as well as providers, to learn more about early childhood development should be encouraged.

2) What are the characteristics of children served by Marin County’s licensed family child care providers?

In Marin County, nearly 300 licensed family child care providers and paid assistants care for more than 1,600 children, mostly in mixed-age groups. Nearly 90 percent of the children cared for by licensed providers are not yet in kindergarten, and more than one-half of them are age two or under. About one-third of licensed providers report caring for at least one child who receives public child care assistance. Twenty percent of licensed providers report caring for at least one child with special needs.

Policy makers and planners typically rely on data about *licensed capacity*, rather than *enrollment*, as a proxy for supply. Previous research has suggested that capacity typically overestimates enrollment, and our data replicated this pattern (Whitebook et al., 2002). Although our data do not permit us to assess why enrollment levels fall below licensed capacity, they nonetheless allow for better-informed calculations by those planning new initiatives or expanding current services. Further research could help clarify the reasons for lower enrollment rates, and could assess whether reaching licensed capacity is actually likely or even desirable. Many providers may wish to care for more children than they do, but others may feel, despite what licensing permits, that their business operates best with smaller numbers of children.

Our study provides a detailed picture of the children in licensed family child care in terms of age, special needs, and whether their families receive public subsidies to cover the cost of their care.

With respect to age, the standard practice among licensed providers statewide is to care for a mixed-age group of children, which almost always includes children between the ages of two and five. Typically, providers care for more

children in the two-to-five age range than under age two, largely because of differing staffing requirements for serving infants and toddlers. This mixed-age pattern has evolved as a good business practice, and it raises questions about the possible impact on the age composition and financial stability of family child care homes if more publicly funded preschool options become available for four-year-olds. Issues to be considered include: the impact of more four-year-olds currently enrolled in family child care attending centers for part of the day; the impact on the supply of infant/toddler care if providers choose to serve four-year-olds exclusively; the extent of career opportunities for family child care providers who meet publicly funded preschool standards and receive higher reimbursements; and the availability of educational and quality improvement pathways for providers who choose to upgrade their programs to become either public preschool sites or affiliated extended-day services. The data reported here do not address these scenarios directly, but provide a baseline description of the current landscape that can help frame additional research.

About one-third of all licensed providers in Marin County currently care for at least one child who receives a voucher to cover the cost of child care services. This is remarkable, considering

that little more than two decades ago, public dollars were not permitted to be spent in licensed family child care homes. This sea change has gone hand-in-hand with the increase of public vouchers flowing to other previously excluded types of care, including license-exempt home-based care and for-profit center care. In all such cases, the question arises whether public dollars are being used to provide high-quality services to young children, since voucher recipients are not required to meet any standards beyond basic licensing requirements, which are widely acknowledged as minimal at best. While an assessment of quality was beyond the scope of this study, our findings do point to the potential leverage for improving quality that could be linked to the voucher system, since it currently touches such a sizable proportion of licensed homes in the county. Given the documented benefits to young children from low-income families who attend a high-quality early childhood program (Helburn, 1995), it is fitting to explore how public dollars could be used to upgrade these settings as a way to narrow the achievement gap between children of low-income families and those from better-off families.

Further discussion of children with special needs can be found below, under question 5.

3) What is the level of educational attainment and early childhood development-related training among licensed family child care providers?

Compared to Marin County's overall female population, licensed family child care providers are more likely to have attended college and/or completed a two-year college degree. They are less likely, however, to have obtained a four-year or higher college degree.

About one-half of providers have obtained a two-year, four-year or graduate degree, typically not related to early childhood development. Nearly 90 percent of all providers report having completed at least one college credit related to early childhood development, and about 70 percent report participating in non-credit-bearing training related to that subject. Approximately two-thirds of providers report that their paid assistants have participated in some early childhood-related non-credit training or college courses.

People hold conflicting images of the educational and professional preparation of the licensed family child care workforce. Some see family child care providers as a group without or limited college-level experience or training, and others point to the increasing numbers of providers with relatively high levels of educational attainment and involvement in early childhood-related training.

Our data suggest that both these images reflect the reality of the current workforce. About one-half of providers have earned college degrees, about one-third had completed some college credits, and the remainder reported high school as their highest level of education. With respect to proposed educational requirements for participating as a teacher in publicly funded preschool, it is difficult to speak of providers as a uniform group. For some, the proposed new requirements may be within reach or may have been already met, while others may not find it realistic to pursue this new opportunity.

It is important to note that many licensed providers have participated in non-credit training related to early childhood development than college courses. This form of training often provided by the Marin Child Care Council may be more accessible and relevant to offer providers. When providers accumulate non-credit training, however, their efforts often do not lead to professional opportunities that require college-based benchmarks, such as CARES. Currently, many community colleges are working to make their course offerings more useful and available to family child care providers, and this is a positive development. Additionally, efforts to provide some standards for non-credit training may help to improve articulation between the non-credit and credit worlds, and therefore expand the professional opportunities available to providers.

4) How do levels of overall educational attainment, and of training related to early childhood development, vary among licensed family child care providers?

Providers caring for children age three to five do not vary in their education or early childhood training from those who care exclusively for younger or older children, but those with BA degrees or higher care for more three-to-five-year-old children, on average, than those with less education. Providers caring for at least one subsidized child are not likely to have attained higher levels of education than providers who do not care for any subsidized children, but providers caring for at least one subsidized child are more likely to have participated in non-credit bearing training in the last 12 months related to early childhood development.

White, Non-Hispanic providers have completed BA or higher degrees at a higher rate than Latina providers. Providers who speak English and Spanish, or English and another language, have typically completed some college and often have completed an AA degree or higher. Those who speak Spanish only have not attended college.

Regardless of educational level, the average family child care provider is in her mid-to-late forties.

A well-trained, culturally diverse and competent workforce serving young children, wherever they live in the state and whatever their family income, is the stated goal of many who are involved in efforts to improve and expand early care and education services. By examining how the educational and professional preparation of the current workforce varies along several dimensions, these data point to the need for a differential strategy for targeting professional development resources for the current and emerging workforce if this goal is to be met.

Our findings confirm that almost all family child care providers serve children across the 0-5 age span, and thus they underscore how important it is for early childhood-related training to focus on infants and toddlers as well as preschoolers. At the same time – since many licensed providers, whether they choose to become publicly funded

preschool sites or not, are likely to continue caring for preschool children for much of the day – it is important that training opportunities be made available to all who work with children prior to kindergarten, not just those serving as teachers and instructional aides for four-year-olds in publicly funded preschool.

With regard to educational attainment by ethnicity, Latinas are under-represented among degree holders and over-represented among those for whom high school is the highest level of education. Local colleges and training institutions in Marin recognize this phenomenon and are engaged in efforts to make college more accessible to Latina providers, in part by providing entry-level early childhood courses in Spanish, and intentionally using early childhood-related content as a vehicle for helping Spanish speakers build the English skills necessary to complete college degrees.

Our finding that Spanish-speaking degree holders were likely to have completed a degree from a foreign institution, also points to the importance of providing resources for transcript translation and review. This may enable providers who seek certification to reduce the likelihood of having to repeat classes, which is now common for foreign degree holders.

5) How well prepared are licensed providers to care for and educate children who are dual language learners or have special needs?

Only a handful of providers have participated in non-credit training or have completed college coursework focused on dual language learning in young children, despite the growing numbers of young children in Marin County who speak a language other than English in their homes. More providers who have participated in training or courses related to dual language learning report completion of an AA or higher degree, but only one-quarter of those who report earning college credits or degrees have taken such training. Providers who speak Spanish are more likely to have participated in such training.

Many more providers are trained to work with children with special needs. Nearly one-half of all providers have participated in non-credit training, and one-quarter have completed college credits, related to children with special needs. Those caring for at least one such child, and those with some college, are more likely to be trained in this area.

Our data show that the vast majority of family child care providers in Marin County have not engaged in either non-credit or credit-bearing training related to dual language learning. This is largely because such training and coursework are not generally available, reflecting the need to update the courses of study at our training institutions, both college- and community-based, and to expand the pool of instructors who are knowledgeable about this subject (Whitebook, Bellm, Lee & Sakai, 2005).

By contrast, many more providers in the county have received training or college coursework related to serving children with special needs. This is a reflection of an intentional strategy, supported by resources through SB 1703, to make such training available. The passage in 2005 of SB 640, extending this training program conducted by local resource and referral programs, has the potential to reach even more of the provider population with important information related to children with

special needs. A similar effort around dual language learning is much needed. Additionally, more advanced coursework and training in these subjects must be offered if we hope to build an early care and education workforce that is well prepared to meet the diverse needs of Marin County's young children.

* * * * *

In the last five years, with the availability of more resources for children ages 0 to 5 flowing through local and state First 5 Commissions and other sources, there has been a concerted effort to expand professional development opportunities for licensed family child care providers, and to make these offerings more relevant and accessible. In the process of expanding resources, however, many of the limitations of the current professional development infrastructure have become more visible.

Now, as Marin County and various counties embark on publicly funded preschool for four-year-olds, there is an opportunity to develop comprehensive state and local plans for professional development that are inclusive of teachers and providers in a variety of settings, whether they work primarily with four-year-olds or with younger and older children. As their foundation, such plans should reflect the latest information about what practitioners need to know and do in order to help children realize their potential.

This study has provided a snapshot of the licensed family child care provider workforce in 2005, capturing current strengths and areas in need of improvement. It is to be hoped that future assessments will document great strides toward creating an even more diverse, culturally competent workforce, well prepared to meet the needs of Marin County's young children.

Appendix A: Additional Tables

Table A1. Age Distribution of Licensed Providers Compared to Women in the Marin County Labor Force^a

	Percentage (SE)	
	Licensed providers	Women in the Marin County labor force
29 years or younger	3.2 (1.82)	11.5
30 to 54 years	73.4 (4.58)	69.1
55 years or older	23.4 (4.39)	19.4
<i>Total</i>	100.0	100.0
<i>Number of providers</i>	94	59,648

^a US Census Bureau (2000a).

Table A2. Age Distribution of Licensed Providers, Countywide and by Licensed Capacity

	Percentage (SE)		
	All homes	Small homes	Large homes
30 to 54 years	75.8 (4.91)	81.3 (9.34)	63.0 (4.51)
55 years or older	24.2 (4.91)	18.8 (9.34)	37.0 (4.51)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	91	64	27

Table A3. Ethnic Distribution of Licensed Providers Compared to the Marin County Female Adult Population,^a Public K-12 Teachers,^b and Children 0-5 Years^a

	Percentage (SE)			
	Licensed providers	Marin County female adult population	Public K-12 teachers	Children 0-5 years
White, Non-Hispanic	65.9 (4.99)	80.1	92.1	70.1
Latina	23.1 (4.44)	10.5	3.5	19.9
African American	2.2 (1.54)	1.8	0.5	1.6
Asian/Pacific Islander	5.5 (2.40)	5.8	2.3	3.5
American Indian or Alaskan Native	0.0 (0.00)	0.4	0.2	0.2
Multiethnic	3.3 (1.88)	1.5	1.4	4.7
<i>Total</i>	100.0	100.0	100.0	100.0
<i>Number of providers</i>	91	72,933	1,668	16,336

^a California Department of Finance (2004).

^b California Department of Education (2005b).

Table A4. Reported Language Fluency of Licensed Providers Compared to the Marin County Adult Population^a

	Percentage (SE)	
	Licensed providers	Marin County adult population
English	54.3 (5.17)	82.2
Spanish ^b	7.4 (2.72)	3.8
English and Spanish ^b	24.5 (4.46)	6.7
English, plus an additional language other than Spanish	13.8 (3.58)	7.3
<i>Total</i>	100.0	100.0
<i>Number of providers</i>	94	159,046

Note: Based on the self-assessment of a sample of 94 providers.

^a US Census Bureau (2000b).

^b Provider may speak an additional language other than English.

Table A5. Percentage of Licensed Providers with Paid Assistants, Countywide and by Licensed Capacity

	Percentage (SE)		
	All homes	Small homes	Large homes
No paid assistants*	63.8 (4.98)	82.1 (4.71)	18.5 (7.52)
1 paid assistant**	23.4 (4.39)	14.9 (4.38)	44.4 (9.61)
2 or more paid assistants**	12.8 (3.46)	3.0 (2.09)	37.0 (9.34)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	94	67	27

* $p < .001$, Small homes > large homes.

** $p < .001$, Large homes > small homes.

Table A6. Percentage of Licensed Providers Serving Children with Special Needs, Countywide and by Licensed Capacity

	Percentage (SE)		
	All homes	Small homes	Large homes
No children with special needs	79.8 (4.16)	83.6 (4.55)	70.4 (8.83)
1 or more children with special needs	20.2 (4.16)	16.4 (4.55)	29.6 (8.83)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	94	67	27

Table A7. Educational Attainment of Licensed Providers Compared to the Marin County Female Adult Population^a

	Percentage (SE)	
	Licensed providers	Marin County female adult population
High school diploma or less	13.8 (3.58)	15.1
Some college	38.3 (5.04)	22.0
Associate degree	20.2 (4.16)	7.4
Bachelor's degree or higher	27.7 (4.64)	55.5
<i>Total</i>	100.0	100.0
<i>Number of providers</i>	94	75,378

^a US Census Bureau (2000a).

Table A8. Percentage of Licensed Providers, by Degree Attainment Related to Early Care and Education

	Percentage (SE)		
	All providers with an AA or higher degree	Associate degree	Bachelor's degree or higher
Degree related to ECE	66.7 (7.11)	57.9 (11.45)	73.1 (8.80)
Degree unrelated to ECE	33.3 (7.11)	42.1 (11.45)	26.9 (8.80)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	45	19	26

Table A10. Percentage of Licensed Providers Reporting Completion of Non-Credit Training Related to Early Care and Education, by Educational Level

	Percentage (SE)	
	Marin County	Number of providers
High school diploma or less	53.8 (13.90)	13
Some college	83.3 (6.24)	36
Associate degree	52.6 (11.52)	19
Bachelor's degree or higher	76.9 (8.31)	26
All providers	71.3 (4.69)	94

**p* < .05, Some college > high school diploma or less, Associate degree.

Table A9. Mean Number of Credits Among Licensed Providers Reporting Completion of College Credits Related to Early Care and Education, by Educational Level

	Estimated mean (SE)	
	Marin County	Number of providers
Some college	13.5 (2.33)	29
Associate degree	21.0 (5.02)	16
Bachelor's degree or higher	21.4 (4.26)	16

Table A11. Percentage of Licensed Providers who Employed At Least One Paid Assistant with College Credits, by Provider Education

	Percentage (SE)	
	Marin County	Number of providers
High school diploma or less	0.0	1
Some college	50.0 (12.69)	16
Associate degree	50.0 (20.73)	6
Bachelor's degree or higher	50.0 (16.06)	10
All providers who employed at least one paid assistant	48.5 (8.83)	33

Table A12. Educational Attainment of Licensed Providers, Countywide and by Licensed Capacity

	Percentage (SE)		
	All homes	Small homes	Large homes
High school diploma or less	13.8 (13.58)	17.9 (4.71)	3.7 (3.65)
Some college	38.3 (5.04)	35.8 (5.89)	44.4 (9.61)
Associate degree	20.2 (4.16)	22.4 (5.12)	14.8 (6.87)
Bachelor's degree or higher	27.7 (4.64)	23.9 (5.24)	37.0 (9.34)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	94	67	27

Table A13. Percentage of Licensed Providers Reporting Completion of Non-Credit Training in the Last Year Related to Early Care and Education, by Number of Publicly Subsidized Children Served

	Percentage of licensed providers, by number of publicly subsidized children (SE)		
	None	1 or more	All providers
No non-credit training	57.1 (6.27)	20.0 (7.34)	45.2 (5.19)
1 or more hours*	42.9 (6.27)	80.0 (7.34)	54.8 (5.19)
<i>Total</i>	100.0	100.0	100.0
<i>Number of providers</i>	63	30	93

*p < .01, 1 or more > none.

Table A14. *Ethnic Distribution of Licensed Providers, by Educational Level*

	Percentage (SE)				
	All providers	High school diploma or less	Some college	Associate degree	Bachelor's degree or higher
White, Non-Hispanic	74.1 (4.87)	75.0 (12.50)	54.8 (8.94)	92.3 (7.39)	88.0 (6.50)
Latina	25.9 (4.87)	25.0 (12.50)	45.2 (8.94)	7.7 (7.39)	12.0 (6.50)
<i>Total</i>	100.0	100.0	100.0	100.0	100.0
<i>Number of providers</i>	81	12	31	13	25

Tests of significance were only performed for White, Non-Hispanic and Latina provider groups.

Appendix B:

Methodology for Estimating the Number of Children Served in Licensed Family Child Care and the Size of the Family Child Care Workforce in Marin County

Overview

In Marin County, because of the relatively small size of the licensed family child provider population, we attempted to interview all providers. As anticipated, we were unable to do so, since some providers were out of business and others could not or chose not to complete an interview. Our sample of interviewed providers gives us sound information about the percentages of the provider population with specific characteristics. To obtain actual numbers, however, such as the number of children served in licensed family child care and the size of the county's family child care workforce, it was necessary to compute estimates from the sample of interviewed providers, taking into account various factors related to the entire provider population.

In the normal course of events, providers go out of business and new providers replace them, and a description of the "universe" (or total provider population), if continually updated, will adjust for these changes. Because there was a gap of several months between the last point at which we updated the survey universe and the time at which we began interviews, however, our universe included providers who were out of business, but did not include the newest providers who had started their businesses in the interim.

The total universe of providers in Marin County was 195, and we interviewed 94 providers. During the interviewing process, approximately 23 percent of the providers contacted were out of business, but were not replaced with new providers. Our estimates for the total number of children served and the size of the family child care workforce

take both of these factors (sample size and percentage out of business) into account.

We calculated the estimate of the total number of children served and the size of the provider workforce in two ways, a high and low calculation. The high estimate treated all providers alike. The low estimate assumed that the new providers who would have replaced the out-of-business providers in the universe would have characteristics similar to the providers in the sample who had been in business for one year or less. These newer providers typically operated homes with smaller licensed capacity and with fewer paid assistants. There were four providers in the Marin County sample who had been in business for one year or less.

Methodology: High Estimate

1. Calculate a ratio to create a multiplier for the sample to the universe: $195/94 = 2.07$.
2. Multiply the sum of children in the sample by the multiplier (2.07) to calculate the estimated total number of children served.
3. Multiply the sum of paid assistants in the sample by the multiplier (2.07) to calculate the estimated total number of paid assistants.
4. Add the estimated number of paid assistants to the total number of family child care providers in the survey universe (195) to calculate the size of the county's licensed family child care workforce.

Methodology: Low Estimate

1. Estimate the number of new providers in the universe. As stated above, 23 percent of providers in the universe were out of business, and, in the

- normal course of events, would have been replaced with new providers. Multiply the universe (195) by the percentage out of business (23%). This would be the number of new providers in the universe: $195 \times .23 = 45$.
2. Estimate the number of more tenured providers in the universe. Seventy-seven percent of the providers in our sample were in business. Multiply the universe (195) by the percentage in business (77%). This would be the number of more tenured providers in the universe: $195 \times .77 = 150$.
 3. Create a ratio of the new providers in the universe to the new providers in the sample (providers in business one year or less, $N=4$) to create a multiplier for the sample to the universe for new providers: $45/4 = 11.2$.
 4. Create a ratio of the more tenured providers in the universe to the more tenured providers in the sample (providers in business more than one year, $N=89$) to create a multiplier for the sample to the universe for more tenured providers: $150/89 = 1.7$.
 5. Multiply the sum of children served by new providers (in business one year or less) in the sample by the “new provider” multiplier (11.2) to calculate an estimated total of children served by providers in business one year or less.
 6. Multiply the sum of children served by providers in business more than one year in the sample by the “more tenured provider” multiplier (1.7) to calculate an estimated total of children served by providers in business more than one year.
 7. Add the two estimates together to estimate the total number of children served.
 8. Multiply the sum of paid assistants employed by providers in business one year or less in the sample by the “new provider” multiplier (11.2) to calculate an estimated total of paid assistants employed by providers in business for one year or less.
 9. Multiply the sum of paid assistants employed by providers in business for more than one year in the sample by the “more tenured provider” multiplier (1.7) to calculate an estimated total of paid assistants employed by providers in business for more than one year.
 10. Add the two estimates together for an estimated total of paid assistants.
 11. Add the estimated total of paid assistants (Step 10) to the total number of family child care providers in the survey universe (195) to estimate the size of the county’s licensed family child care workforce.

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