

# Statewide Participation in Parent Aware Among Early Care and Education Programs

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## Introduction

### Overview

Parent Aware, Minnesota's quality rating and improvement system (QRIS), is designed to rate the quality of care provided in the state's early care and education (ECE) programs,<sup>1</sup> to provide tools and resources for families to connect with high-quality care that meets their needs, and to support programs in improving their practices. Parent Aware defines quality in ECE settings by awarding programs a One- to Four-Star Rating. Program participation in Parent Aware is currently voluntary, meaning programs can choose whether to become Parent Aware Rated and which Star Level to pursue.

In March 2022, Minnesota's Department of Children, Youth and Families (DCYF) contracted Child Trends to conduct an evaluation of Parent Aware. As part of this evaluation, DCYF shared administrative data about licensed ECE providers in the state with Child Trends, which then conducted a series of analyses to summarize the data and identify any trends. The goal of these analyses was to understand patterns in which ECE programs participate in Parent Aware, as well as any program- or community-level factors that may be associated with participation trends. The findings from these analyses, which are outlined in this report, can inform future efforts to engage more providers in Parent Aware and expand families' access to high-quality care across the state.

### Background and importance

Although participation in Parent Aware is currently voluntary, the Minnesota Legislature recently passed a bill that will automatically assign all licensed child care programs a One-Star Rating unless the program opts out of Parent Aware.<sup>2</sup> While the legislation requires additional research on the impacts and costs of this policy change to inform a final process for implementing the change by July 2026, these upcoming policy shifts make it critical to understand patterns of Parent Aware participation among ECE programs, as well as the potential impacts of moving from voluntary participation to a system where all licensed child care programs are automatically assigned a Rating. As Minnesota explores the implications of implementing a One-Star Rating default in all licensed programs, understanding providers' perceptions of Parent Aware and reasons for non-participation may shed light on opportunities to better support providers through the Rating process and strengthen community buy-in for Parent Aware.

The processes by which different types of programs can become Rated may also shed light on patterns of participation. Parent Aware has four separate processes (or "pathways") for programs to earn a Rating (see

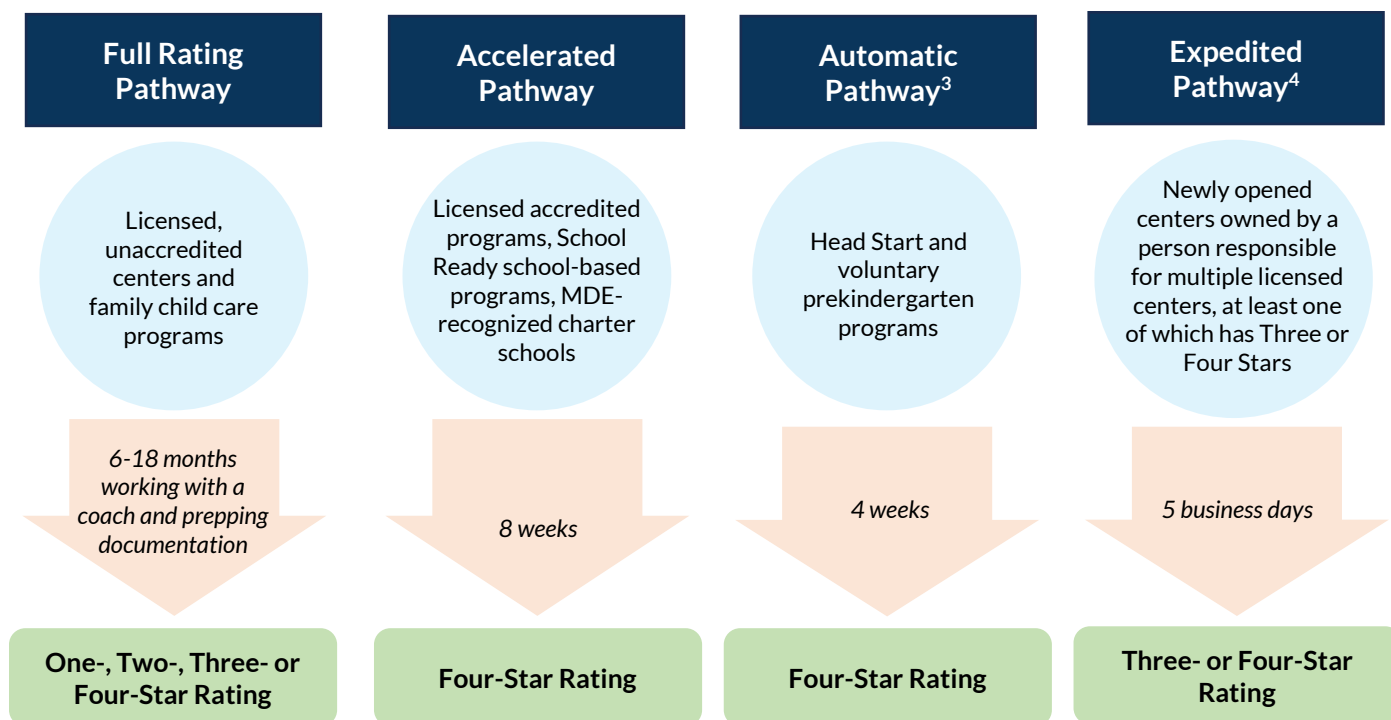
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<sup>1</sup> Parent Aware is available for family child care and center-based programs that are licensed through the Minnesota DCYF, certified child care programs, Head Start programs, and public school-based pre-K programs.

<sup>2</sup> Child Care Aware of Minnesota. (2023). *Final legislative update: May 25, 2023*. Child Care Aware of Minnesota. <https://www.childcareawaremn.org/wp-content/uploads/2023/05/Final-2023-Legislative-Update-FINAL.pdf>

Figure 1). Understanding how ECE programs experience these different pathways—and the unique benefits or challenges of being eligible or ineligible for each one—may therefore provide important context for examining variation in participation rates.

**Figure 1.** Parent Aware Rating Pathways<sup>3,4</sup>



To gain a deeper understanding of Parent Aware participation across Minnesota, it is also important to examine whether trends in participation or Ratings vary based on community characteristics, such as racial and ethnic diversity, poverty levels, and languages spoken. By examining access to Rated programs across different communities, we aim to create a more comprehensive picture of the participation landscape and identify areas where targeted support might be most effective.

## Administrative Data Analysis

### Methods

#### Research questions

Key research questions for the administrative data analysis include:

1. How do participation patterns vary by program type?
2. How do program-level characteristics vary for Rated versus unrated programs?
3. Which program-level characteristics are the factors that predict whether programs have a Rating?
4. How are community characteristics associated with whether programs have higher Ratings (3-4 Stars)?

<sup>3</sup> Parent Aware (2022). *Rating eligibility [webpage]*. Retrieved May 30, 2022 from: <https://www.parentaware.org/programs/rating-eligibility/>

<sup>4</sup> Parent Aware. (n.d.). *Parent Aware Rating Guide: Expedited Pathway Quality Documentation Portfolio*. Retrieved October 10, 2022 from: [https://www.parentaware.org/wp-content/uploads/2019/11/Expedited-Pathway-Rating-Guide\\_February2019.pdf](https://www.parentaware.org/wp-content/uploads/2019/11/Expedited-Pathway-Rating-Guide_February2019.pdf)

## Data sources and analytic approach

To understand the landscape of programs participating in Parent Aware, our team analyzed administrative data provided to our team by the Minnesota DCYF. We merged information from multiple datasets to examine associations between program participation and a number of program-level characteristics, including:

- Program type
- Program size
- Number of years a program has been licensed
- Location (region)
- Location (county)
- Whether the program is willing to accept Child Care Assistance Program (CCAP) subsidies
- Whether the program is Rated
- Whether the program serves infants and toddlers
- Race/ethnicity of family child care programs
- Languages spoken in the program
- Program hours of operation
- Whether the program offers full-time, part-time, or both types of care

To address Research Question 4, we merged the DCYF data with publicly available census data from the Integrated Public Use Microdata (IPUMS) National Historical Geographic Information System (NHGIS; 2018 - 2022).<sup>5</sup> This merge allowed us to explore the relationship between a program's Rating status and various community characteristics of providers, including:

- Number of children under age 5
- Percentages of children under age 5 in each racial and ethnic group
- Percentage of children under age 5 living in households below 100 percent of the federal poverty line (FPL)
- Percentage of children under age 6 living with at least one foreign-born parent
- Percentage of the population over age 5 who speak non-English languages at home

Details on how these program-level and community-level characteristics were defined in our analysis can be found in Table 1, and additional information about our data sources can be found in Appendix A, Table A1.

We took several steps to merge the census data with the DCYF data. Initially, we used the Google API to obtain latitude and longitude coordinates for child care centers and family child care programs based on their addresses in the DCYF data (a process known as "geocoding"). Using these coordinates, we assigned a census tract to each child care provider. Subsequently, by matching the census tract and county of each provider, we merged the community characteristics data from the census. As a result, we obtained

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<sup>5</sup> Steven Manson, Jonathan Schroeder, David Van Riper, Katherine Knowles, Tracy Kugler, Finn Roberts, and Steven Ruggles. *IPUMS National Historical Geographic Information System: Version 18.0 [dataset]*. Minneapolis, MN: IPUMS. 2022. <http://doi.org/10.18128/D050.V18.0>

community characteristics (e.g., number of children under five) for each provider based on their census tract.<sup>6</sup> We conducted descriptive and regression analyses using this merged data.

Descriptive analyses included child care centers, family child care programs, Head Start/Early Head Start programs, and public school pre-K programs. Inferential analyses exploring which factors are related to programs being Rated, focused only on centers and family child care programs, as Head Start/Early Head Start and pre-K programs go through a different Rating process and over 95 percent of these programs are Rated.

**Table 1.** Variable definitions

Variable	Definition
<b>Program-level characteristics</b>	
Program type	Public school-based pre-K, Head Start/Early Head Start, child care centers, and family child care
Program size	Maximum number of children a program is licensed to serve
Geographical location	We examined geography in three ways: (1) Whether program is in Greater Minnesota or in the Twin Cities Metro area <sup>7</sup> (2) Economic Development Regions <sup>8</sup> (3) Child Care Aware districts <sup>9</sup>
Willingness to accept CCAP subsidies	Programs were marked as willing to accept CCAP if they met one of the following three criteria: (1) Had a CCAP ID number (2) Were CCAP Registered showing a status of “Yes” (as reported in the Provider Business Update) (3) Reported currently caring for or being willing to care for children receiving subsidy (as reported in the Provider Business Update)
Non-standard hour care	Care provided either: (1) On the weekend (i.e., programs open for some period of time either Saturday or Sunday), (2) In the evening (i.e., care provided after 7 PM), and/or (3) Overnight (i.e., care provided between the hours of 11 PM and 6 AM)
<b>Community-level characteristics</b>	
Race	Tracts in which 40 percent or more of children under age 5 were the following races/ethnicities: Non-Hispanic White, Black, Hispanic, Asian and Native Hawaiian/other Pacific Islanders, and American Indian/Alaskan Native

<sup>6</sup> While we acknowledge that there are more family-centered approaches to measuring child care access, such as analyzing the exact locations of families and considering their commute times (Liz, insert full citation), we opted to use census tracts due to the availability of public data. We considered census tracts as a proxy for the locations where families access child care.

<sup>7</sup> The Twin Cities Metro area includes 7 counties: Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington. In future evaluation activities, our team will examine geographic variation in Parent Aware participation at a more detailed level (i.e., by county or Census tract).

<sup>8</sup> Economic development regions: <https://apps.deed.state.mn.us/assets/lmi/areamap/edr.shtml>

<sup>9</sup> There are six Child Care Aware districts: Northeast District, Northwest District, West/Central District, Southern District, West Metro District, and East Metro District.

Variable	Definition
Poverty	Tracts in which 40 percent or more of children under age 5 lived in a household at or below the FPL
Immigrant status	Tracts in which 40 percent or more of children under age 5 lived in a household with at least one foreign-born parent
Language	Tracts in which 40 percent or more of the population age 6 and over spoke a language other than English
Number of children under age 5	The number of children under age 5
Total programs	The total number of centers and family child care programs across tracts
Total capacity	The total capacity of the programs across tracts
Slots per child	The number of available child care slots per child across tracts
Highly Rated programs	Programs that have a Three- or Four-Star Rating

Our team also conducted pairwise comparisons to examine program-level factors and how they differ by program type and Rating status. We used pairwise deletion to handle the missing data. These comparisons included:

- Rated accredited child care centers versus Rated non-accredited child care centers
- Rated accredited child care centers versus unrated accredited child care centers
- Rated child care centers versus unrated child care centers (regardless of accreditation status)
- Rated family child care versus unrated family child care

## Analysis of trends over time

We conducted these analyses yearly for the last three years and summarized the findings for DCYF’s internal use, and this final report focuses on the data captured in 2023. As part of our Year 3 analysis, we looked back to previous years of analysis to identify any significant changes or trends in the data. Overall, the results of this analysis were very similar to previous years, taking into account the substantial impacts the COVID-19 pandemic had on the child care industry, which was still recovering when this study started. To support the child care industry during this time, DCYF allowed for policy modifications. For example, for programs participating in Parent Aware, the use of CLASS® observations in the Rating process was temporarily suspended, and some programs were granted an extension on their Re-Ratings, which are typically required every two years. Because these factors related to the pandemic may have impacted the status of these programs as reported in DCYF’s administrative data, this report primarily focuses on the results from this year’s analysis. More information about the data sources we used for the analysis and their limitations can be found in Appendix A, Table A1.

## Findings

The analysis included 8,742 ECE programs<sup>10</sup> that are eligible to receive a rating in Parent Aware (regardless of their current participation status). The majority of these programs were licensed family child care homes (n=6,057, 69%), followed by licensed child care centers programs (n=1,629, 19%), public school-based pre-K programs (n=774, 9%), and Head Start and Early Head Start programs (n=279, 3%).

<sup>10</sup> Programs were excluded from analysis if they were listed as a certified center or a license-exempt provider or if their license status was “Closed.”

As of May 2024, 2,753 programs (31%) had a Parent Aware Rating. Nearly all Head Start/Early Head Start programs (100%) and public school-based pre-K programs (96%) had a Rating, while nearly half of child care centers (47%) and less than one fifth of family child care programs (18%) had a Rating (see Table 2).

## Overview

This section compares Rated and unrated programs across a variety of characteristics and ends by examining which factors may predict whether a program is Rated or not. To provide some context for these analyses, we start with an overview of Rated and unrated centers and family child care programs.

Nearly half of the **1,629 licensed centers eligible to participate in Parent Aware** were Rated (47%). The vast majority of centers, both Rated and unrated, were willing to serve children who receive CCAP (79%). While few centers provided nonstandard hour care, such as weekend care (4%), overnight care (5%), or evening care (6%), most offered both part-time and full-time care (68%). Most centers were licensed to serve infants (86%), with slightly fewer being licensed to serve toddlers (69%). Among those who reported the languages spoken at the program, nearly 100 percent reported speaking English.<sup>11</sup> Around one in three of those centers also reported speaking another language in addition to English (37%), including most commonly Spanish (21%). Nearly two thirds of centers were located in the Twin Cities Metro area (65%). The average capacity of these programs was 85.5 slots including school-age care and 69.0 slots excluding school-age care. The average number of years licensed was 17.4 years.

In comparison to centers, a smaller proportion of the **6,057 licensed family child care programs eligible to participate in Parent Aware** were Rated (18%). Just over half of family child care programs were willing to serve children who receive CCAP (57%). A small number of programs provided weekend care (2%), overnight care (7%), and/or evening care (2%), with about half of programs providing both full and part time care (51%). All family child care programs were licensed to serve toddlers, and nearly all were licensed to serve infants (91%). Among those who reported languages spoken at the program, nearly all programs reported speaking English, though three percent reported also speaking Spanish, and four percent reported speaking another language (other than Spanish). Over two thirds of family child care programs were located in Greater Minnesota.

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<sup>11</sup> Seven programs reported only speaking a non-English language.

Tables 2 and 3 provide additional details about the number of Rated programs across program types as well as key characteristics. Public pre-K programs were excluded from Table 4 due to missing data.

**Table 2.** Number of programs

	Head Start/ Early Head Start <sup>a</sup>		Public school-based pre-K <sup>b,12</sup>		Child care centers		Family child care	
	N	%	N	%	N	%	N	%
<b>Total</b>	279	100%	774	100%	1,629	100%	6,057	100%
<b>Parent Aware Rated</b>	279	100%	745	96%	769	47%	1,061	18%

Source: Administrative data provided by Minnesota’s DCYF.

Note: <sup>a</sup>Head Start/Early Head Start programs do not include Head Start grantees.

<sup>b</sup>Public school-based pre-K programs do not include public pre-K districts. A small number of certified centers can be Rated if they are affiliated with a public school pre-K program, but these programs were not included in our data analysis.

**Table 3.** Program characteristics

	Head Start/ Early Head Start		Child care centers		Family child care	
	N	%	N	%	N	%
<b>Willing to serve children receiving CCAP</b>	-	-	1,311	81%	3,485	57%
<b>Licensed to serve infants</b>	-	-	1,121	69%	5,520	91%
<b>Licensed to serve toddlers</b>	-	-	1,399	86%	6,057	100%
<b>Provides weekend care</b>	-	-	64	4%	100	2%
<b>Provides overnight care</b>	-	-	75	5%	427	7%
<b>Provides evening care</b>	-	-	96	6%	109	2%
<b>Reported providing both full- and part-time care</b>	136	49%	1,100	68%	3,069	51%
<b>Speaks Spanish (of those who reported languages)<sup>13</sup></b>	67	48%	268	21%	147	3%
<b>Speaks language other than Spanish (of those who reported languages)<sup>13</sup></b>	55	39%	205	16%	244	5%

Source: Administrative data provided by Minnesota’s DCYF.

<sup>12</sup> Upon examining the administrative data files, we found that the numbers differed slightly from those reported in the DCYF report. We decided to use the numbers reported by DCYF to maintain consistency.

<sup>13</sup> All but seven programs in our sample reported speaking English, so these languages were most often spoken in addition to English.

Table 4 shows the distribution of programs across the Economic Development Regions (see Figure 2). Region 11, which includes the seven counties surrounding the Twin Cities Metropolitan area,<sup>14</sup> has the highest concentration of programs, with 20 percent of Head Start programs, 49 percent of public pre-K programs, 65 percent of licensed centers, and 32 percent of family child care programs located in the region.

**Table 4.** Location of programs, by Economic Development Region

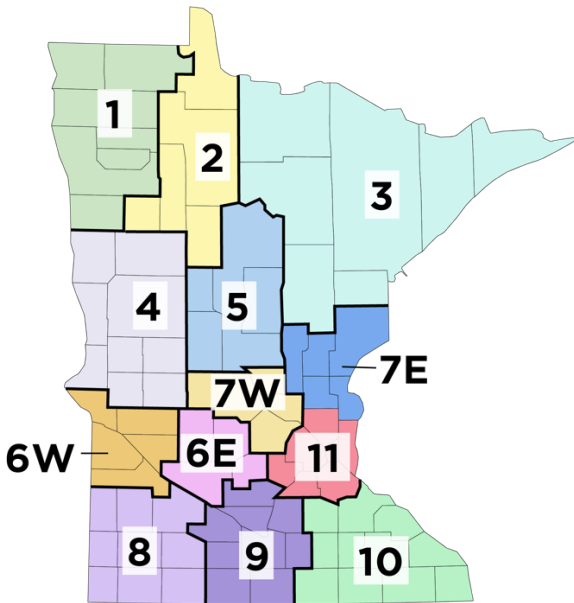
	Head Start/ Early Head Start		Public school-based pre-K		Child care centers		Family child care	
	N	%	N	%	N	%	N	%
<b>Total</b>	279	100%	745	100%	1,629	100%	6,057	100%
<b>Region 1</b>	<20	<7.2%	<20	<2.7%	<20	<1.2%	208	3.4%
<b>Region 2</b>	20	7.2%	<20	<2.7%	<20	<1.2%	172	2.8%
<b>Region 3</b>	42	15.1%	43	5.8%	74	4.5%	271	4.5%
<b>Region 4</b>	21	7.5%	42	5.6%	49	3.0%	493	8.1%
<b>Region 5</b>	25	9.0%	27	3.6%	33	2.0%	246	4.1%
<b>Region 6E</b>	<20	<7.2%	22	3.0%	27	1.7%	199	3.3%
<b>Region 6W</b>	<20	<7.2%	<20	<2.7%	<20	<1.2%	95	1.6%
<b>Region 7E</b>	<20	<7.2%	25	3.4%	35	2.2%	166	2.7%
<b>Region 7W</b>	<20	<7.2%	60	8.1%	101	6.2%	757	12.5%
<b>Region 8</b>	<20	<7.2%	36	4.8%	26	1.6%	284	4.7%
<b>Region 9</b>	<20	<7.2%	49	6.6%	67	4.1%	394	6.5%
<b>Region 10</b>	29	10.4%	61	8.2%	127	7.8%	807	13.3%
<b>Region 11</b>	55	19.7%	362	48.6%	1,055	64.8%	1,965	32.4%

Source: Administrative data provided by Minnesota's DCYF.

<sup>14</sup> The seven counties are: Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington.



Figure 2. Map of Minnesota's Economic Development Regions<sup>15</sup>



The final characteristics we examined were the average number of slots and years licensed across program types (see Table 5).

Table 5. Average number of slots and years licensed

	Child care centers	Family child care
	Mean	Mean
Average slots	85.5	11.8
Number of years licensed	17.3	14.1

Source: Administrative data provided by Minnesota's DCYF.

The next section presents comparisons of program characteristics across both Rating and accreditation status. We conducted the following comparisons: Rated accredited child care centers and Rated non-accredited child care centers, Rated child care centers and unrated child care centers, and Rated family child care programs and unrated family child care programs. We excluded Head Start/Early Head Start and public school-based pre-K programs from these comparisons due to the high rate of these program types that have a Rating. In Year 3, we also conducted an additional comparison between Rated accredited child care centers and unrated accredited child care centers; findings from those comparisons will be reported in-text. We examined the following program-level characteristics: program size, number of years a program has been licensed, geographic location, willingness to serve children receiving CCAP subsidies, whether the program is licensed to serve infants and toddlers, languages spoken at the program, and the availability of non-standard hour or part-time care.

<sup>15</sup> Image Source: <https://mn.gov/deed/data/lmi-help/area-maps/>

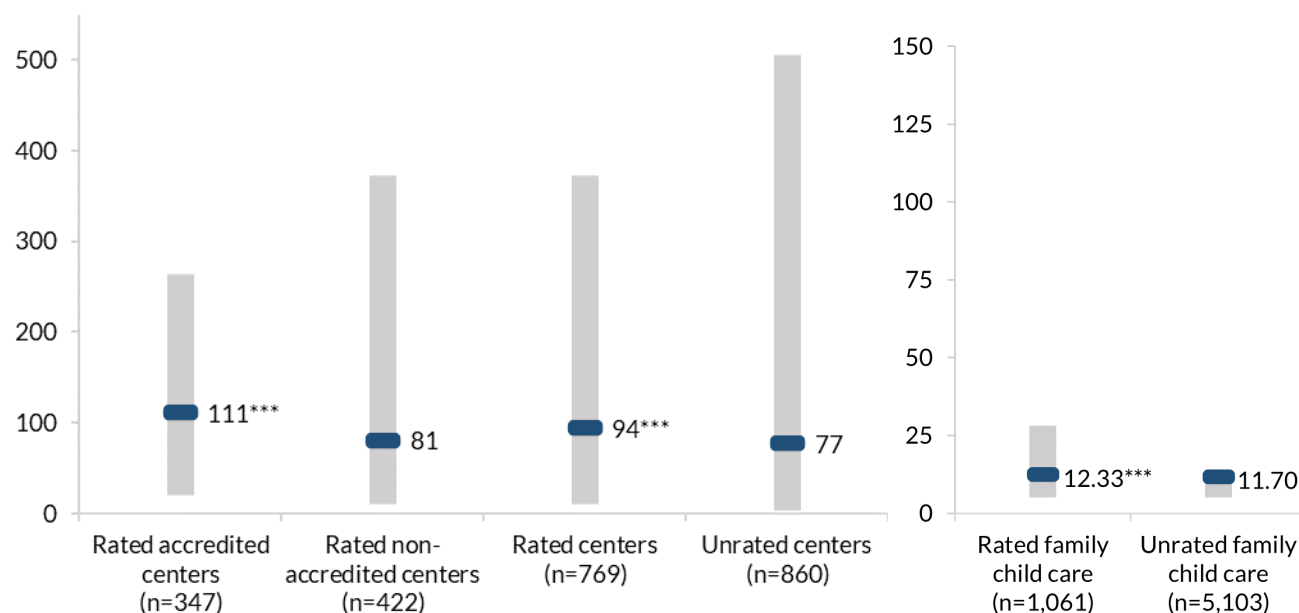
## Program-level characteristics

**On average, Rated accredited centers had more slots in their program than Rated non-accredited centers.**

Unrated accredited centers also had a significantly smaller average capacity (88,  $p < 0.001$ ) than Rated accredited centers (111). Rated family child care programs also had a larger average capacity than unrated family child care.

Figure 3 shows the average capacity size across program types, with the grey bars representing the range of capacities and the blue bar representing the mean number of slots.

**Figure 3.** Average slots, by program type



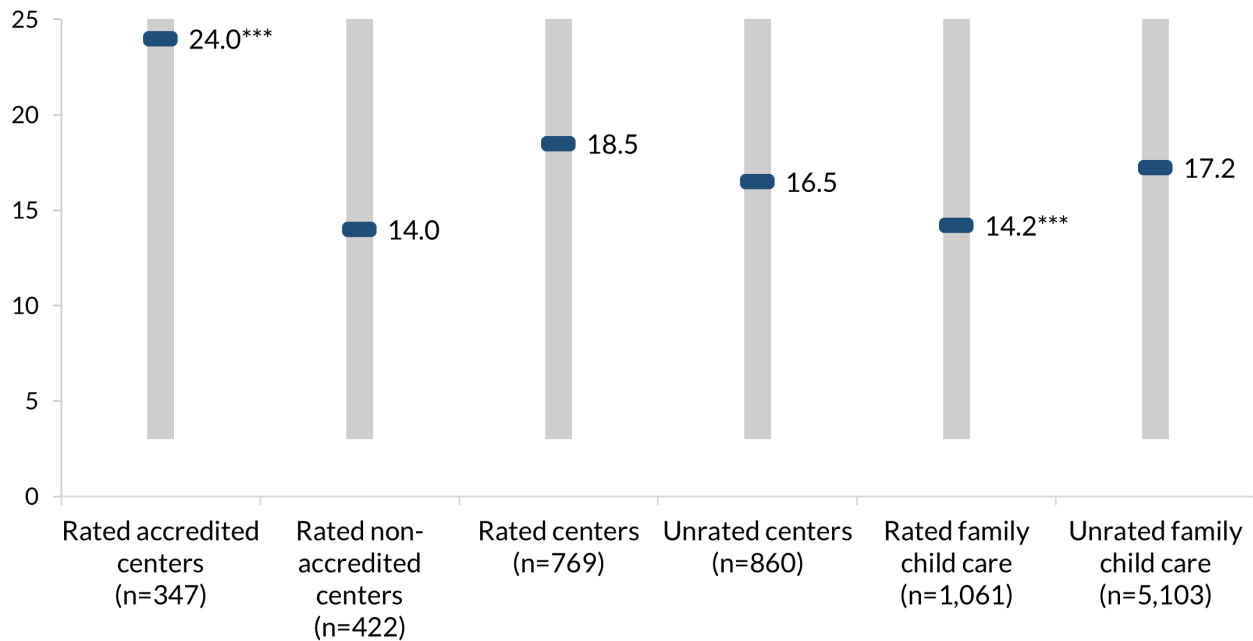
**Note:** Significance testing was conducted by program type: \*\*\* $p < 0.001$  \*\* $p < 0.01$  \* $p < 0.05$   
 Rated centers include Rated accredited and non-accredited child care centers.

**Source:** Administrative data provided by Minnesota's DCYF.

**Rated accredited centers were more likely to be licensed for a longer period of time than Rated non-accredited centers.**

Unrated family child care programs were more likely to be licensed for longer on average than Rated family child care programs (see Figure 4).

**Figure 4.** Average number of years licensed, by program type



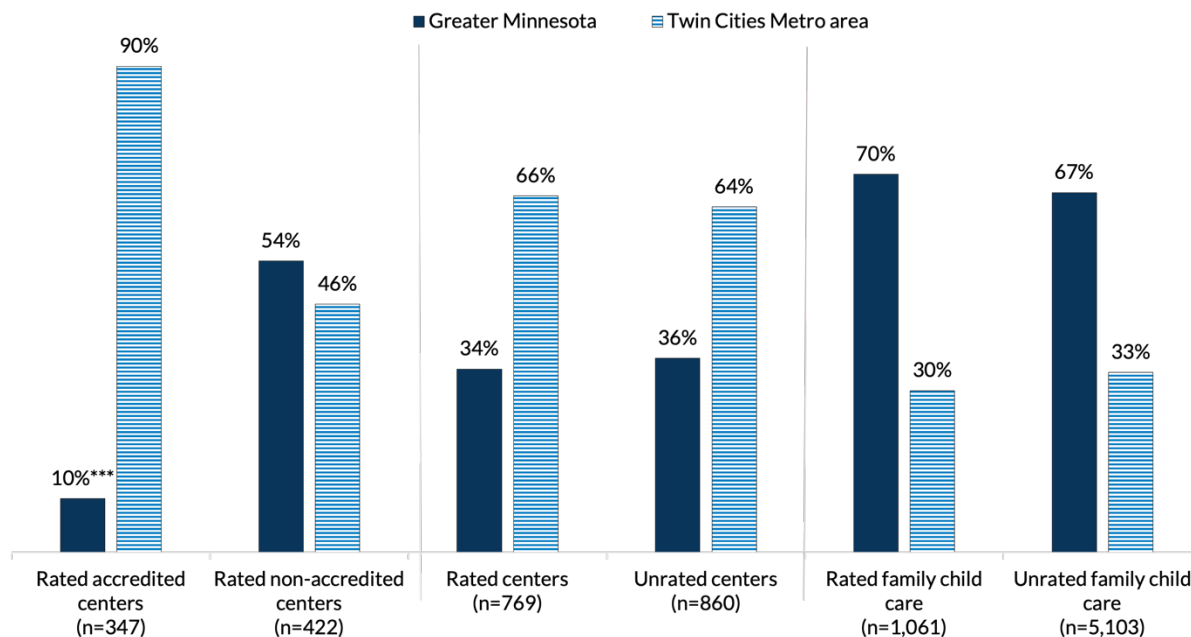
**Note:** Significance testing was conducted by program type: \*\*\* $p < 0.001$  \*\* $p < 0.01$  \* $p < 0.05$

Rated centers include Rated accredited and non-accredited child care centers.

**Source:** Administrative data provided by Minnesota's DCYF.

**Program types differed in where they were located geographically.** Rated centers were more likely to be located in the Twin Cities Metro area, whereas family child care programs, regardless of Rating status, were more likely to be located in Greater Minnesota (see Figure 5). Accredited centers, both Rated (91%) and unrated (72%) were also more likely to be located in the Metro area, while Rated non-accredited centers were slightly more likely to be located in Greater Minnesota (54%).

**Figure 5.** Percentage of programs located in Greater Minnesota and the Twin Cities Metro, by program type



**Note:** Significance testing was conducted by program type: \*\*\*  $p < 0.001$  \*\*  $p < 0.01$  \*  $p < 0.05$

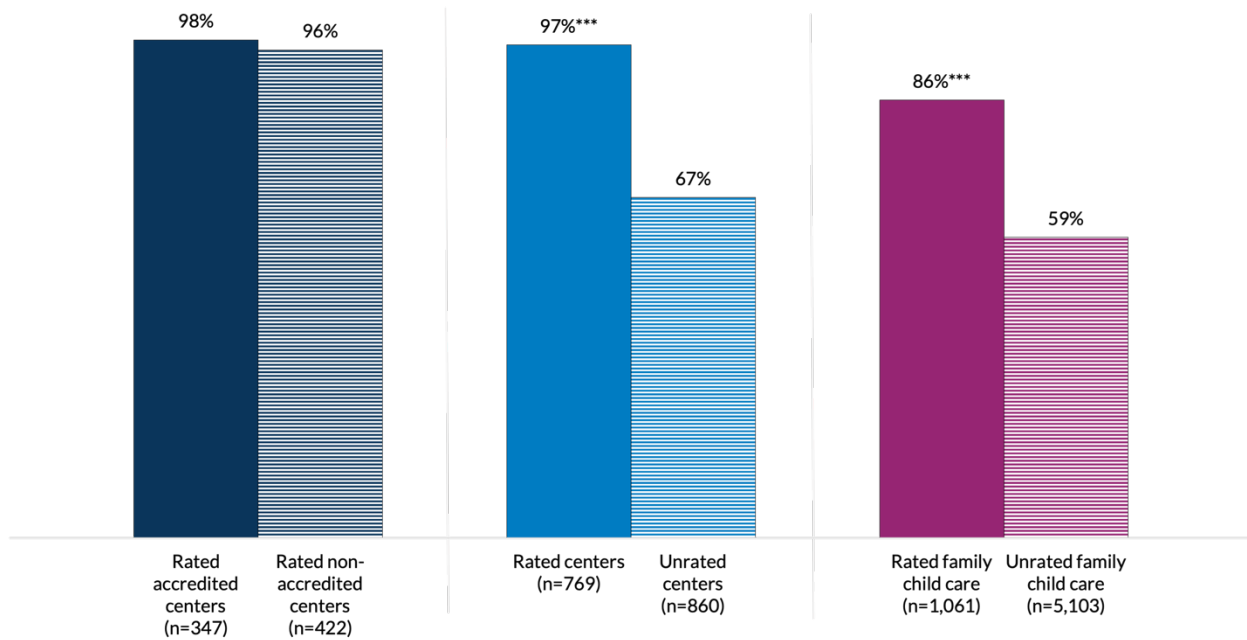
Rated centers include Rated accredited and non-accredited child care centers.

**Source:** Administrative data provided by Minnesota’s DCYF.

Additionally, we examined the Economic Development Regions of programs and compared the proportion of providers in Region 11 to the proportion in other regions. The proportion of Rated accredited centers was significantly lower in Regions 7 and 10 than in Region 11 ( $p < 0.001$ ). The proportion of Rated centers was significantly greater in Regions 1 ( $p < 0.001$ ) and 6 ( $p < 0.05$ ) and significantly smaller in Region 9 ( $p < 0.001$ ) compared to Region 11. The proportion of Rated family child care programs was significantly greater in Regions 1, 2, 3, and 4 ( $p < 0.001$ ) and significantly smaller in Regions 9 ( $p < 0.001$ ) and 10 ( $p < 0.01$ ) compared to Region 11.

**Rated programs, regardless of program type or accreditation status, were more likely to be willing to serve children receiving CCAP subsidies than unrated programs (see Figure 6).** There were no significant differences between Rated accredited centers and Rated non-accredited centers, but Rated accredited centers were more likely to be willing to accept CCAP than unrated accredited centers (98% versus 53%,  $p < 0.001$ ).

**Figure 6.** Percentage of programs willing to serve children receiving CCAP subsidies, by program type

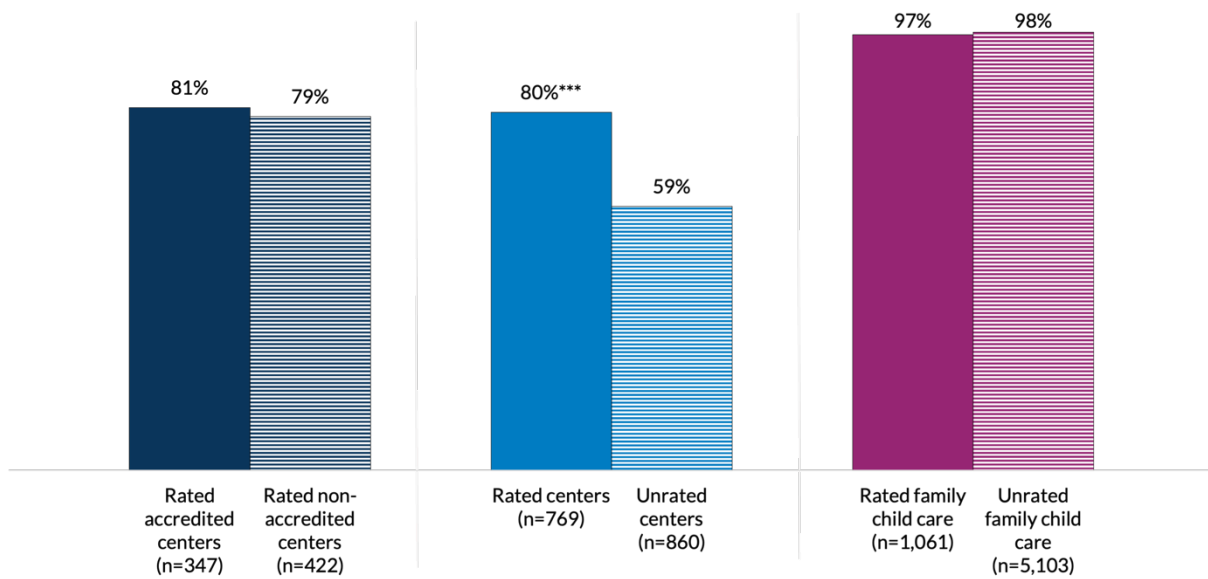


**Note:** Significance testing was conducted by program type: \*\*\*  $p < 0.001$  \*\*  $p < 0.01$  \*  $p < 0.05$   
 Rated centers include Rated accredited and non-accredited child care centers.

**Source:** Administrative data provided by Minnesota’s DCYF.

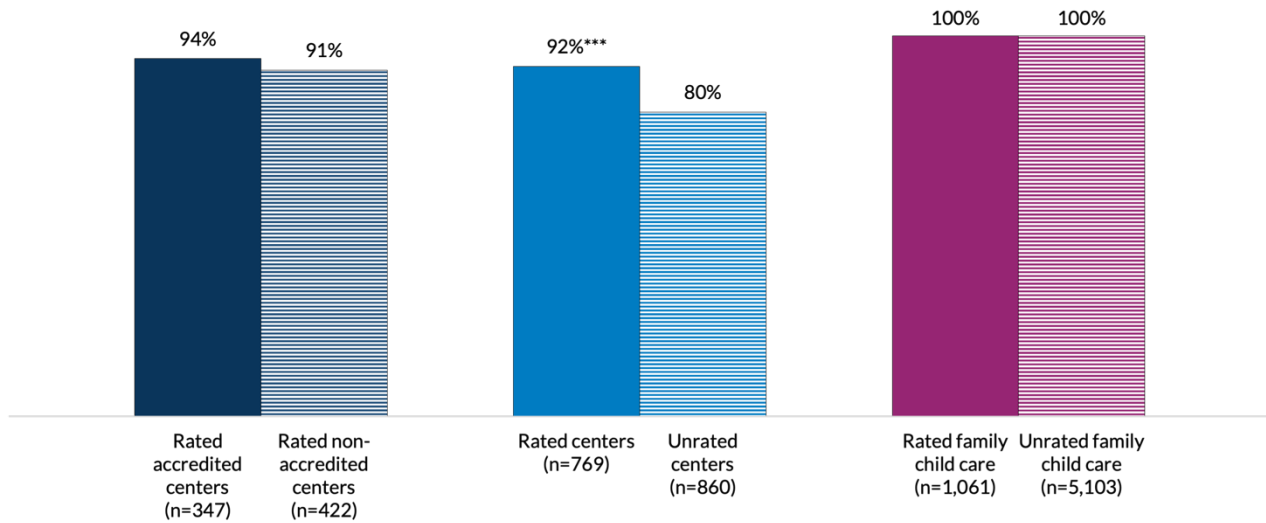
**Rated centers were more likely to serve both infants and toddlers than unrated centers, while nearly all family child care programs serve infants and toddlers.** Rated accredited centers were more likely than unrated accredited centers to serve infants (81% versus 41%,  $p < 0.001$ ) and toddlers (94% versus 75%,  $p < 0.001$ ). There were no significant differences between Rated accredited and Rated non-accredited centers (see Figures 7 and 8).

**Figure 7.** Percentage of programs licensed to serve infants, by program type



**Note:** Significance testing was conducted by program type: \*\*\* p < 0.001 \*\* p < 0.01 \* p < 0.05  
 Rated centers include Rated accredited and non-accredited child care centers.  
**Source:** Administrative data provided by Minnesota’s DCYF.

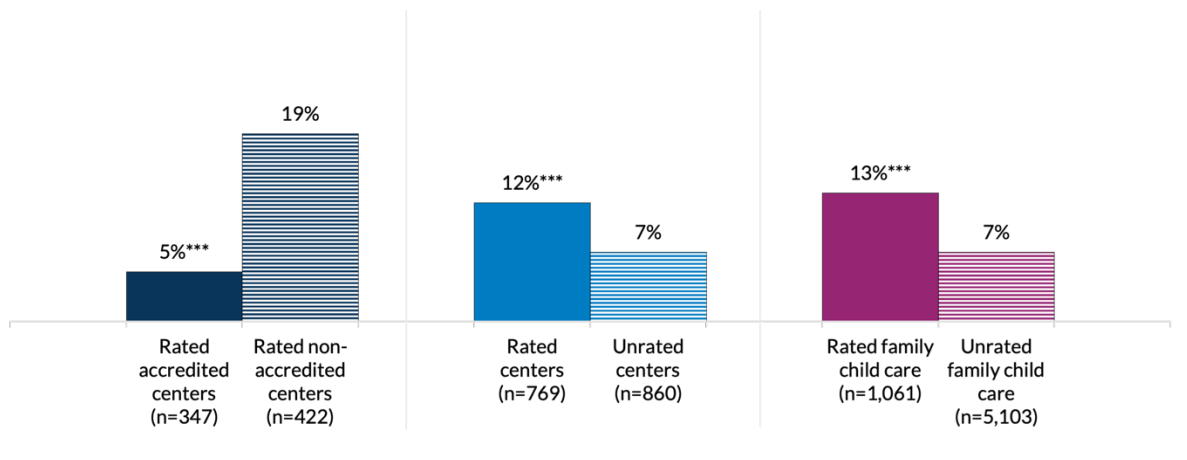
**Figure 8.** Percentage of programs licensed to serve toddlers, by program type



**Note:** Significance testing was conducted by program type: \*\*\* p < 0.001 \*\* p < 0.01 \* p < 0.05  
 Rated centers include Rated accredited and non-accredited child care centers.  
**Source:** Administrative data provided by Minnesota’s DCYF.

**Rated programs were more likely to offer non-standard hour care (i.e., weekend, evening, and overnight care) than unrated programs across both centers and family child care.** However, Rated accredited centers were less likely than Rated non-accredited centers to offer nonstandard care (see Figure 9).

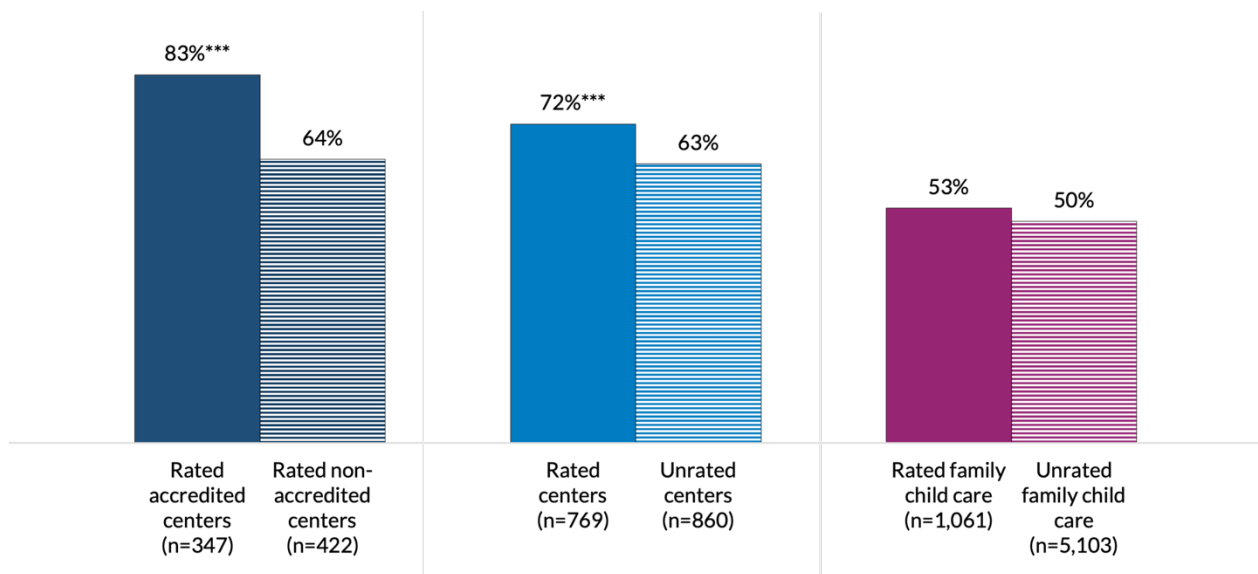
**Figure 9.** Percentage of programs offering non-standard hour care, by program type



**Note:** Significance testing was conducted by program type: \*\*\*  $p < 0.001$  \*\*  $p < 0.01$  \*  $p < 0.05$   
 Rated centers include Rated accredited and non-accredited child care centers.  
**Source:** Administrative data provided by Minnesota’s DCYF.

**Accredited and Rated centers were more likely to offer the option for part-time care.** There were no significant differences between Rated and unrated family child care programs (see Figure 10).

**Figure 10.** Percentage of programs offering part-time care, by program type

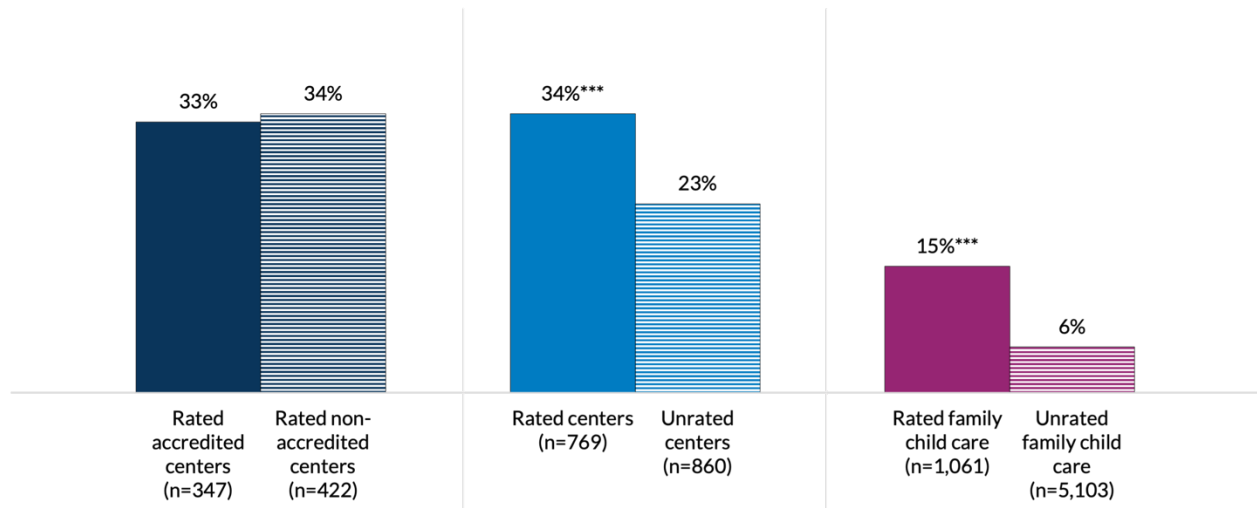


**Note:** Significance testing was conducted by program type: \*\*\*  $p < 0.001$  \*\*  $p < 0.01$  \*  $p < 0.05$   
 Rated centers include Rated accredited and non-accredited child care centers.  
**Source:** Administrative data provided by Minnesota’s DCYF.

Just as in the Year 2 analysis, the Year 3 data included information about languages spoken for 6,064 programs (69%). Among programs that reported language, eight percent reported speaking Spanish ( $n = 482$ ), four percent reported speaking American Sign Language (ASL;  $n = 222$ ), and two percent reported speaking Somali ( $n = 126$ ) in addition to English.

Figure 11 shows the percentage of programs speaking a language other than English out of the programs that had data for this field. **Rated programs, regardless of program type, were more likely to speak a language other than English.** There were no significant differences between Rated accredited and Rated non-accredited centers.

**Figure 11.** Percentage of programs speaking a language other than English, by program type



**Note:** Significance testing was conducted by program type: \*\*\*  $p < 0.001$  \*\*  $p < 0.01$  \*  $p < 0.05$

Rated centers include Rated accredited and non-accredited child care centers.

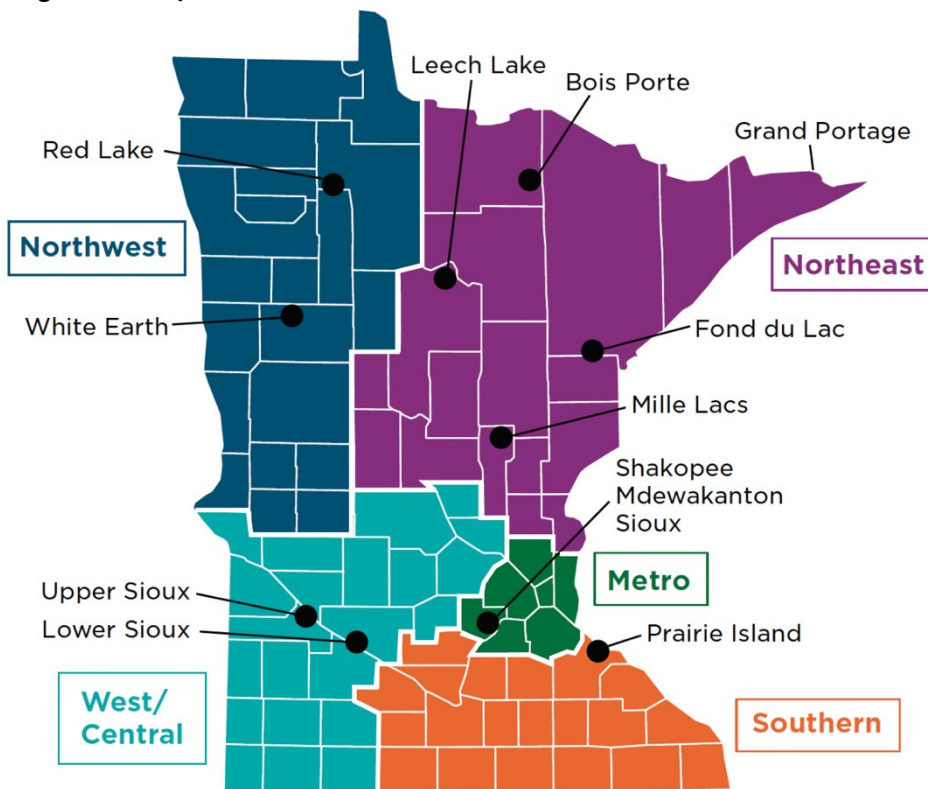
**Source:** Administrative data provided by Minnesota's DCYF.



## Program-level characteristics that predict whether programs are Rated

We also conducted logistic regressions to understand which program-level factors predicted whether or not a program was Rated. We conducted separate regressions for centers and family child care programs, but both regressions included the following characteristics: location, number of years licensed, licensed capacity, as well as whether the program is licensed to serve both infants and toddlers, willing to accept CCAP subsidies, offers nonstandard hour care, and offers part time care. For the location variable, we used the Child Care Aware districts (see Figure 12) and examined the East and West Metro Districts separately. We used the East Metro District as the reference district in analyses because the percentage of Rated programs in this district most closely aligns with the overall percentage of Rated programs.

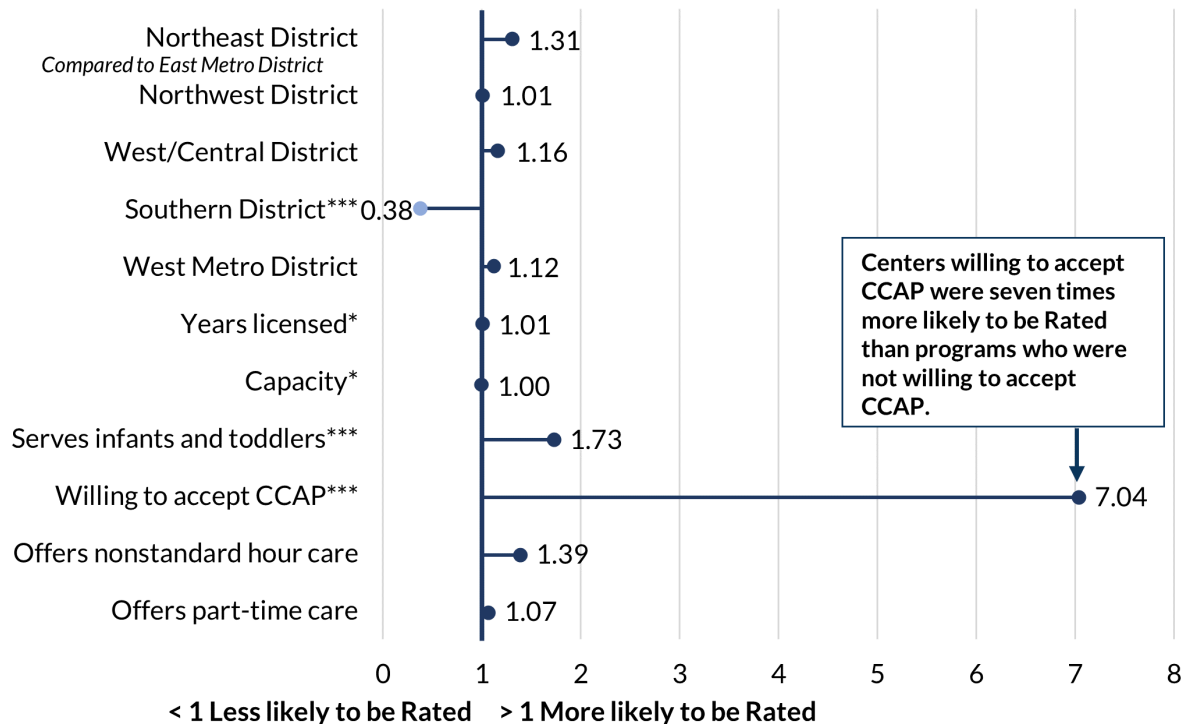
Figure 12. Map of Minnesota's Child Care Aware Districts



Source: <https://www.childcareawaremn.org/contact-us/>

Figure 13 shows the likelihood that a center is Rated based on the above program characteristics. Centers located in the Southern District were less likely than centers in the East Metro district to have a Rating ( $p < 0.001$ ). Additionally, centers that had been licensed for more years ( $p < 0.05$ ), had a higher capacity ( $p < 0.05$ ), and served both infants and toddlers ( $p < 0.001$ ) were more likely to be Rated. Centers that were willing to serve CCAP were 7.04 times more likely to have a Rating than centers that were not willing.

**Figure 13. Likelihood of a center being Rated**



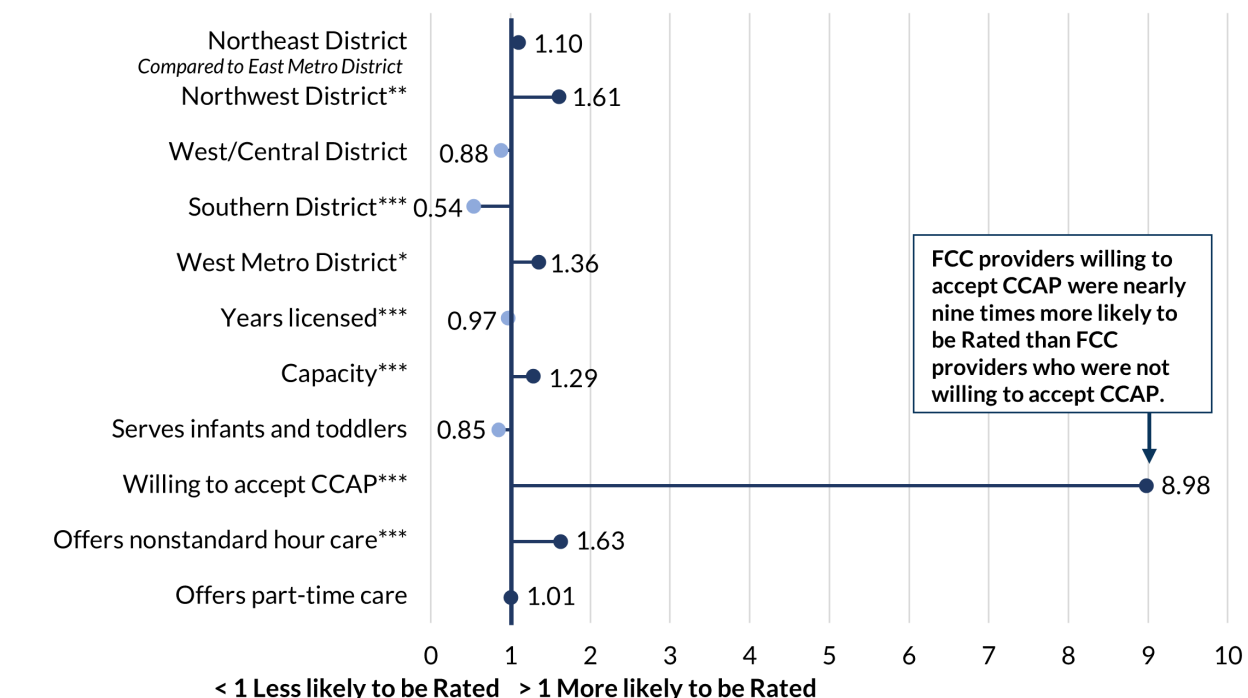
**Note:** Significance testing was conducted by program type: \*\*\*  $p < 0.001$  \*\*  $p < 0.01$  \*  $p < 0.05$

The circle and diamond shapes indicate the odds ratios, which measured the association between the variable and the outcome.

**Source:** Administrative data provided by Minnesota's DCYF.

Figure 14 shows the results of the regression for family child care programs. Programs located in the Southern District were less likely to be Rated ( $p < 0.001$ ) than programs in the East Metro district, while programs located in the Northwest District ( $p < 0.01$ ) and the West Metro district ( $p < 0.05$ ) were *more* likely to be Rated than those in the East Metro district. Unlike centers, family child care programs that had been licensed for more years were less likely to be Rated ( $p < 0.001$ ). Programs that had larger capacities ( $p < 0.001$ ) and offered nonstandard hour care ( $p < 0.001$ ) were more likely to have a Rating. Finally, similarly to the centers, family child care programs that were willing to accept CCAP were 8.98 times more likely to be Rated ( $p < 0.001$ ).

**Figure 14.** Likelihood of a family child care provider being Rated



**Note:** Significance testing was conducted by program type: \*\*\* p<0.001 \*\* p<0.01 \* p<0.05. The circle and diamond shapes indicate the odds ratios, which measured the association between the variable and the outcome.  
**Source:** Administrative data provided by Minnesota’s DCYF.

## Parent Aware participation and community-level characteristics

We also conducted descriptive analyses and additional logistic regressions to understand whether community-level characteristics, including racial and ethnic diversity, languages spoken, and the proportion of families with incomes below the poverty threshold<sup>16</sup> are associated with trends in Parent Aware participation. Table 6 presents the distribution of Rated programs across communities with various demographic characteristics. As described in the Methods section, we merged DCYF’s program data with demographic data from the census, based on the census tract where the programs were located. We categorized the 1,505 Minnesota census tracts based on whether 40 percent<sup>17</sup> or more of their population, often children under age 5, shared certain demographic characteristics.

For instance, in communities where more than 40 percent of children under age 5 identified as Hispanic (comprising 49 census tracts), 21 percent of programs were highly Rated. Conversely, in communities with over 40 percent of children under age 5 identified as Non-Hispanic White (encompassing 1,132 census tracts), highly Rated programs accounted for 15 percent of all programs. We encourage the use of this table to explore the pattern of access to Rated and highly Rated programs across Minnesota communities.

<sup>16</sup> Poverty is defined in this case as households with an income below 100 percent of the FPL.

<sup>17</sup> The selection of the 40 percent threshold aimed to minimize the number of overlapping census tracts across demographic categories while maximizing the number of census tracts represented in each demographic category. It is important to note that our approach is just one way to explore the data. Future research may employ different methods to understand the distribution of child care programs across communities.

**Table 6.** Distribution of Rated programs across communities with various demographic characteristics

Demographic categories	Number of census tracts <sup>a</sup>	Number of children under 5	Total programs	Total capacity of programs	Slots per child	% Rated programs	% Highly Rated programs <sup>b</sup>	% Highly Rated center	% Highly Rated family child care	% Accredited programs	% Highly Rated slots
Children under age 5, American Indian and Alaskan Native alone <sup>c</sup> ≥ 40%	10	2,405	47	1,048	0.44	62%	45%	45%	44%	9%	45%
Population over the age of 5 speaking non-English language at home ≥ 40%	44	16,709	155	5,967	0.36	50%	48%	72%	32%	15%	69%
Children under age 5 living below 100% of FPL ≥ 40%	92	21,990	360	12,646	0.58	38%	31%	54%	19%	8%	51%
Children under age 5, Black alone <sup>d</sup> ≥ 40%	98	28,284	336	15,024	0.53	37%	34%	58%	15%	13%	54%
Children under age 6 with at least one foreign-born parent ≥ 40%	214	61,728	895	39,165	0.63	35%	31%	55%	15%	13%	50%
Children under age 5, some other race alone ≥ 40%	8	1,449	27	1,603	1.11	33%	33%	43%	23%	11%	31%
Children under age 5, two or more races <sup>e</sup> ≥ 40%	52	12,454	217	7,648	0.61	32%	28%	54%	15%	13%	52%
Children under age 5, Asian and Native Hawaiian and Other Pacific Islander alone <sup>f</sup> ≥ 40%	46	13,367	155	4,692	0.35	30%	25%	56%	17%	9%	46%

Demographic categories	Number of census tracts <sup>a</sup>	Number of children under 5	Total programs	Total capacity of programs	Slots per child	% Rated programs	% Highly Rated programs <sup>b</sup>	% Highly Rated center	% Highly Rated family child care	% Accredited programs	% Highly Rated slots
Children under age 5, Hispanic ≥ 40%	49	12,883	247	8,346	0.65	24%	21%	44%	11%	8%	39%
Children under age 5, Non-Hispanic White alone ≥ 40%	1132	255,070	6,706	170,341	0.67	22%	15%	40%	9%	5%	33%

**Notes:** <sup>a</sup>These census tracts represent the tracts where the child care programs in DCYF’s dataset were located. They do not represent all of the census tracts in Minnesota. Tracts overlap across demographic categories, and therefore add up to be more than the total number of tracts in the dataset.

<sup>b</sup>Highly Rated programs refers to the programs with a Three- or Four-Star Rating.

<sup>c,d,e,f</sup>These groups include Hispanic children, as non-Hispanic racial categories were not available.

**Source:** Administrative data provided by Minnesota’s DCYF, IPUMNS NHGIS (2018 - 2022).

To understand which program or community characteristics were associated with higher program Ratings (i.e., Three- or Four-Star), we conducted logistic regression analyses using the merged data. Our models included the demographic characteristics in Table 6 along with program-level characteristics, namely whether programs were highly Rated, months licensed, program size, serving infants and toddlers, offering part-time care, whether the program is in Greater Minnesota or in the Twin Cities Metro area, willingness to accept CCAP, and operating during non-standard hours. We ran 16 regression models: eight focusing on centers and eight focusing on family child care programs, across eight different racial and ethnic groups (i.e., Non-Hispanic White alone, White alone [including Hispanic], Black alone [including Hispanic], Asian and Native Hawaiian and Other Pacific Islander alone [including Hispanic], American Indian and Alaskan Native alone [including Hispanic], one or more races [including Hispanic], some other race alone [including Hispanic], and Hispanic; Appendix B, Tables B5-B12).

Regarding community characteristics, we found that center and family child care programs located in census tracts with a higher percentage of the population over age 5 speaking a non-English language at home had higher odds of being highly Rated (Appendix B, Tables B5-B12). Conversely, family child care programs located in census tracts with a higher percentage of American Indian and Alaskan Native populations under age 5 had lower odds of being highly Rated (Appendix B, Table B8). We did not find any other differences in the odds of being highly Rated based on the percentages of different demographic characteristics in the census tracts where providers were located.

Turning our attention to program characteristics, our models indicated that family child care programs who were licensed longer or were willing to serve children with CCAP had higher odds of being highly Rated. Additionally, both center and family child care programs with higher capacity had higher odds of being highly Rated. We did not find any differences in the odds of being highly Rated based on other program characteristics, including serving infants and toddlers, offering part-time and non-standard hours care, and programs located in metropolitan areas.

## Key Findings

Our analysis of the administrative data revealed some important differences across Rating and accreditation status. Among Rated centers, our analyses showed that Rated accredited centers varied significantly from Rated non-accredited centers in several program-level characteristics:

- Rated accredited centers were *more* likely to be licensed for a longer period of time, to have a larger capacity, to be located in the Metro area, and to offer part-time care than Rated non-accredited centers.
- Rated accredited centers were *less* likely than Rated non-accredited centers to offer non-standard hour care.
- Rated accredited centers were *more* likely than unrated accredited centers to be willing to serve children receiving CCAP and to serve infants and toddlers.

When comparing Rated and unrated programs, we found several significant differences, including some variation based on program type:

- Rated programs, regardless of program type, were *more* likely to have a larger capacity, be willing to serve children who receive CCAP, offer nonstandard hour care, and speak a language other than English than unrated programs.
- Rated centers were *more* likely than unrated centers to offer part time care and to serve infants and toddlers.
- Rated family child care programs were *more* likely to be licensed for a shorter period of time than unrated family child care programs.

Our regression analyses pointed to several factors that predict whether programs are Parent Aware Rated:

- Centers that were licensed for longer, had a larger capacity, served infants and toddlers, and were willing to accept CCAP were *more* likely to be Rated.
- Family child care programs that were licensed for a shorter time period, had a larger capacity, were willing to accept CCAP, and offered nonstandard hours or part time care were *more* likely to be Rated.

Finally, the analyses of which community-level factors predict whether a program is Rated revealed several important insights:

- Programs, regardless of type, that were located in census tracts with a higher percentage of the population over age 5 speaking a non-English language were *more* likely to be highly Rated.
- Family child care programs located in census tracts with a higher percentage of American Indian and Alaskan Native populations under age 5 were *less* likely to be highly Rated.

## Discussion

As of May 2024, slightly less than one third of ECE programs (31%) had a Parent Aware Rating. Recent legislation mandates that by July 2026, all licensed ECE providers will automatically receive a One-Star Parent Aware Rating unless the provider opts out or chooses to apply for a higher Star Rating. Currently some ECE programs may experience barriers to participating or achieving a higher Star Rating Level due to a lack of capacity (e.g., lack of staff, lack of time) or financial support to go through the application and Rating process. Other programs may perceive that Parent Aware is incompatible with their program philosophy, or that Parent Aware is not welcoming or inclusive of their program due to the race, ethnicity, and/or linguistic characteristics of their workforce and/or the population they serve. Additionally, some programs may choose not to participate because they do not feel they need for the supports that Parent Aware offers, or some may feel that a Rating is not needed to market their program to families because their program is operating at full enrollment. The non-participation of these programs may result in systemic biases in Parent Aware such that quality improvement opportunities are provided for select programs, while non-participating programs cannot access these supports.

As DCYF explores how to best implement the new regulation, the findings from this administrative data analysis can guide their decision making. Programs that are currently unrated, in particular, may require targeted support to ensure a smooth integration into Parent Aware, and understanding the factors that may facilitate or inhibit programs' participation can help inform the nature of those targeted supports.

Overall, our analyses show that Rated centers and family child care programs offered a wider range of services, such as infant/toddler care, support for CCAP families, or non-standard hour care, and they had a larger capacity compared to unrated programs. We identified specific characteristics of unrated programs that could help DCYF better understand this group of programs. For example, centers that had been licensed for a longer period of time were more likely to be Rated, whereas family child care programs with shorter licensing periods tended to be Rated. Family child care programs also had shorter license durations on average compared to centers. This could be due to the fact that family child care programs typically close when the owner leaves the field or retires, whereas centers can cycle through multiple directors and other staff (who might help make decisions about their programs' participation in Parent Aware) during their licensure. These findings suggest different needs for engaging newly operating centers and experienced family child care programs. Additionally, the strongest predictor of programs' willingness to accept children receiving CCAP subsidies was whether the programs were Rated. Because Three- and Four-Star Rated programs receive a higher reimbursement rate for children receiving CCAP subsidies,<sup>18</sup> programs that accept CCAP may have a greater incentive to participate in Parent Aware. Future research should examine the reasons behind their reluctance or the barriers they face in serving children receiving CCAP.

<sup>18</sup> Parent Aware (2022). *Benefits for Rated programs [webpage]*. Retrieved May 7, 2024 from: <https://www.parentaware.org/programs/benefits-for-rated-programs/#:~:text=Programs%20with%20a%20Four%2DStar,up%20to%20%245%2C000%20per%20child>

Our analyses also reveal broader trends related to the extent to which families across the state can access care that meets their unique needs. For example, although Rated programs were more likely to offer non-standard hour care than unrated programs, only 12 percent of Rated centers and 13 percent of Rated family child care reported offering such care in 2024. Between 2015 and 2019, approximately 30 percent of children under age 6 in Minnesota had parents working non-standard hours, indicating a significant demand for non-standard hour care.<sup>19</sup> To increase the supply and quality of care offered during non-standard hours, DCYF could better understand the needs and experiences of providers who offer such care and explore the potential of supporting more programs to offer scheduling options that meet families' needs.

In addition, our analyses suggest potential disparities in families' access to quality ECE programs across different communities. For example, communities with a higher percentage of population over the age of 5 who speak a non-English language tend to have more highly Rated child care programs, while communities with a substantial proportion of American Indian and Alaskan Native populations ( $\geq 40\%$ ) under the age of 5 often lack access to highly Rated family child care programs. This difference highlights a gap in the quality of child care services available to specific demographic groups. To ensure equitable access to high-quality child care, it is important to increase both the availability and the quality of services in those areas.

Notably, our analyses had some limitations due to the limited data available. For example, we were not able to explore questions about the extent to which the languages spoken at programs reflect those spoken in their communities, nor were we able to examine the extent to which the racial/ethnic identities of program staff mirror those of the communities they serve. Because these data are only voluntarily reported by some family child care providers (and are not reported by center staff), the information was missing for a significant portion of the sample, making it difficult to draw conclusions from the analysis.

As DCYF continues to revise Parent Aware and systems for gathering information from providers, it may be beneficial to explore ways to more systematically gather information from providers as well as strategies for leveraging those data to understand the extent to which families can equitably access programs that meet their unique needs. For example, DCYF could, either internally or in collaboration with a research partner, consider using this analytical approach and explore different thresholds (e.g., 33%, 40%, 50%) for understanding community demographic characteristics. In doing so, DCYF may be better able to identify any gaps or specific communities where targeted efforts may be needed and gain a deeper understanding of the unique needs of those communities with different cultural and linguistic needs. Moreover, DCYF could use these data to identify communities where there may be a need for focused support for programs' quality improvement goals, ensuring that children in these communities have the opportunity to access and benefit from high-quality ECE programs.

## Acknowledgements

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<sup>19</sup> Diane Schilder, Peter Willenborg, Cary Lou, Sarah Knowles, and Kate Thomas (2021). *State snapshots of potential demand for and policies to support nontraditional-hour child care*. Washington, DC: Urban Institute.



## Appendix A: Year 3 Administrative Data Sources

Table A1. Data sources used in Year 3

Data source	Variables used	Where data originated
DCYF	Program type-combining data fields from Develop, years of licensure, capacity, geographic location (region, district, and county), CCAP ID number, willingness to serve CCAP, ethnicity, languages spoken at program, hours of operation, year schedule, Rating status	NDS2, which includes a nightly data feed from Develop adding in DCYF data sources. Data is also infused by Providers when they use the Provider update tool or Market Rate Survey tool data.
DCYF	CCAP Registered, ethnicity, languages spoken at program, Accreditation status, Rating status	Develop Data System, which has nightly feeds from DCYF Licensing, as well as ongoing updates by CCAP staff, Tribal affiliated programs, and stores the Parent Aware Rating Application data. This data is sent nightly to NDS2.
MN DCYF licensing look-up on CCC/FCC	Capacity, age restrictions, program type, location license ID (matching data)	Data was extracted from the DCYF Licensing Information Lookup updated live.
IPUMS NGHIS Census data (2018-2022)	Number of children under age 5, children under age 5 in each racial and ethnic group, children under age 5 living in households below 100 percent of FPL, children under age 6 living with at least one foreign-born parent, population over age 5 speaking non-English languages	N/A

## Appendix B: Administrative Data Analysis Tables

Table B1. Descriptive characteristics of Rated and unrated programs, by program type (N=7,686)

	Centers (n=1,629)				Family child care (n=6,057)			
	Rated		Unrated		Rated		Unrated	
	N	%	N	%	N	%	N	%
<b>Total</b>	769	47%	860	53%	1,061	18%	4,996	82%
<b>Willing to serve children receiving CCAP</b>	741	96%	570	66%	914	86%	2571	51%
<b>Licensed to serve infants</b>	614	80%	507	59%	955	90%	4565	91%
<b>Licensed to serve toddlers</b>	711	92%	688	80%	4996	471%	1061	21%
<b>Provides weekend care</b>	44	6%	20	2%	51	5%	49	1%
<b>Provides overnight care</b>	45	6%	30	3%	118	11%	309	6%
<b>Provides evening care</b>	62	8%	34	4%	54	5%	55	1%
<b>Speaks Spanish (of those who reported languages)</b>	162	24%	106	17%	40	5%	107	3%
<b>Speaks language other than English or Spanish (of those who reported languages)</b>	129	19%	76	12%	105	12%	139	4%
<b>Speaks ASL (of those who reported languages)</b>	46	7%	30	5%	46	5%	96	3%
<b>Speaks Somali (of those who reported languages)</b>	50	7%	<20	<3%	<20	<2%	<20	<0.5%
<b>Reported both full- and part-time care provided</b>	556	72%	544	63%	557	52%	2512	50%
<b>Region 1</b>	<20	<3%	<20	<2%	65	6%	143	3%
<b>Region 2</b>	<20	<3%	<20	<2%	93	9%	714	14%
<b>Region 3</b>	53	7%	21	2%	72	7%	100	2%
<b>Region 4</b>	25	3%	24	3%	67	6%	204	4%
<b>Region 5</b>	<20	<3%	<20	<2%	131	12%	362	7%
<b>Region 6E</b>	<20	<3%	<20	<2%	42	4%	204	4%
<b>Region 6W</b>	<20	<3%	<20	<2%	42	4%	157	3%
<b>Region 7E</b>	<20	<3%	<20	<2%	<20	<2%	88	2%
<b>Region 7W</b>	40	2%	61	7%	45	4%	121	2%
<b>Region 8</b>	<20	<3%	<20	<2%	100	9%	657	13%
<b>Region 9</b>	<20	<3%	59	7%	43	4%	241	5%
<b>Region 10</b>	54	2%	73	9%	36	3%	358	7%
<b>Region 11</b>	507	1%	548	64%	93	9%	714	14%

**Table B2.** Average slots and number of years licensed of Rated and unrated programs, by program type (N=7,686)

	Centers (n=1,629)		Family child care (n=6,057)	
	Mean		Mean	
	Rated	Unrated	Rated	Unrated
Average slots	94.42	77.43	12.34	11.70
Number of years licensed	18.53	16.41	12.75	14.35

**Table B3.** Results from the logistic regression (centers)

Rating status	Odds ratio	Std. err.	P	[95% Conf. interval]	
<b>District (compared to East Metro District)</b>					
Northeast District	1.31	0.25	0.14	0.91	1.89
Northwest District	1.01	0.29	0.97	0.58	1.77
West/Central District	1.16	0.25	0.49	0.76	1.76
Southern District	0.38	0.07	0.000***	0.26	0.56
West Metro District	1.12	0.18	0.48	0.82	1.53
Years licensed	1.01	0.004	0.01*	1.00	1.02
Capacity	1.003	0.001	0.02*	1.00	1.01
Serves infants and toddlers	1.73	0.27	0.000***	1.27	2.34
Willing to accept CCAP	7.04	1.75	0.00***	2.47	4.25
Offer nonstandard hour care	1.39	0.29	0.11	0.93	2.08
Offer part-time	1.07	0.16	0.62	0.81	1.43
Constant	0.03	0.01	0.000	0.02	0.06

Note: \*\*\* p<0.001 \*\*p <0.01 \*p <0.05.

**Table B4.** Results from the logistic regression (family child care programs)

Rating Status	Odds Ratio	Std. Err.	P	[95% Conf. Interval]	
<b>District (compared to East Metro District)</b>					
Northeast District	1.10	0.15	0.50	0.84	1.44
Northwest District	1.61	0.22	0.001**	1.23	2.11
West/Central District	0.88	0.12	0.35	0.67	1.15
Southern District	0.54	0.08	0.000***	0.41	0.73
West Metro District	1.36	0.20	0.04*	1.02	1.82
Years licensed	0.97	0.004	0.000***	0.96	0.98
Capacity	1.29	0.04	0.000***	1.22	1.36
Serves infants and toddlers	0.85	0.11	0.20	0.66	1.09
Willing to accept CCAP	8.98	1.13	0.000***	7.02	11.48
Offer nonstandard hour care	1.63	0.19	0.000***	1.29	2.06
Offer part-time	1.01	0.08	0.88	0.86	1.19
Constant	0.003	0.001	0.000	0.001	0.01

Note: \*\*\* p<0.001 \*\*p <0.01 \*p <0.05.

**Table B5.** Results from the logistic regression for community-level characteristics, non-Hispanic White

	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Children under age 5	0.998	0.001	0.061	0.996	1.000	0.999	0.000	0.122	0.998	1.000
Children under age 6 with at least one foreign-born parent	1.005	0.010	0.592	0.986	1.026	0.997	0.007	0.683	0.983	1.011
Population over age 5 speaking non-English language at home	1.066	0.024	0.005	1.019	1.115	1.029	0.015	0.044	1.001	1.059
Children under age 5 living below 100% of FPL	0.991	0.011	0.418	0.969	1.013	1.001	0.007	0.865	0.988	1.014
Months licensed	1.000	0.001	0.906	0.998	1.002	1.003	0.001	0.000	1.001	1.004
Capacity	1.015	0.005	0.001	1.006	1.025	1.215	0.066	0.000	1.092	1.352
Serves infants and toddlers	0.456	0.233	0.125	0.167	1.244	0.629	0.164	0.076	0.377	1.050
Offers part-time	0.846	0.310	0.648	0.412	1.735	0.969	0.145	0.832	0.723	1.298
Located in metro area	1.310	0.486	0.466	0.633	2.710	0.733	0.151	0.133	0.489	1.099
Willing to accept CCAP	1.786	1.111	0.352	0.527	6.047	1.983	0.375	0.000	1.368	2.874
Offer non-standard hour care	0.571	0.242	0.186	0.249	1.311	1.016	0.209	0.939	0.678	1.522

**Table B6.** Results from the logistic regression for community-level characteristics, White

	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Children under age 5	0.998	0.001	0.062	0.996	1.000	0.999	0.000	0.127	0.998	1.000
Children under age 6 with at least one foreign-born parent	1.005	0.010	0.654	0.985	1.025	0.996	0.007	0.606	0.982	1.011
Population over age 5 speaking non-English language at home	1.066	0.024	0.005	1.020	1.114	1.027	0.014	0.057	0.999	1.056
Children under age 5 living below 100% of FPL	0.991	0.011	0.404	0.969	1.013	1.001	0.007	0.929	0.988	1.013
Months licensed	1.000	0.001	0.925	0.998	1.002	1.003	0.001	0.000	1.001	1.004
Capacity	1.015	0.005	0.001	1.006	1.025	1.214	0.066	0.000	1.091	1.352
Serves infants and toddlers	0.459	0.234	0.126	0.169	1.245	0.630	0.165	0.077	0.377	1.052

	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Offers part-time	0.851	0.312	0.661	0.415	1.747	0.970	0.145	0.838	0.724	1.300
Located in metro area	1.293	0.481	0.489	0.624	2.683	0.722	0.150	0.117	0.480	1.085
Willing to accept CCAP	1.775	1.104	0.356	0.524	6.004	1.973	0.374	0.000	1.361	2.861
Offer non-standard hour care	0.585	0.251	0.212	0.252	1.358	1.019	0.210	0.929	0.680	1.526

Table B7. Results from the logistic regression for community-level characteristics, Hispanic

	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Children under age 5	0.998	0.001	0.066	0.996	1.000	0.999	0.000	0.110	0.998	1.000
Children under age 6 with at least one foreign-born parent	1.009	0.010	0.368	0.990	1.028	0.999	0.007	0.893	0.986	1.012
Population over age 5 speaking non-English language at home	1.085	0.026	0.001	1.035	1.137	1.035	0.014	0.011	1.008	1.063
Children under age 5 living below 100% of FPL	0.994	0.010	0.573	0.974	1.015	1.003	0.006	0.652	0.991	1.015
Months licensed	1.000	0.001	0.934	0.998	1.002	1.003	0.001	0.000	1.001	1.004
Capacity	1.015	0.005	0.001	1.006	1.025	1.215	0.066	0.000	1.092	1.351
Serves infants and toddlers	0.476	0.242	0.144	0.176	1.288	0.645	0.168	0.093	0.386	1.076
Offers part-time	0.901	0.334	0.779	0.436	1.863	0.975	0.146	0.864	0.727	1.307
Located in metro area	1.300	0.475	0.472	0.635	2.662	0.725	0.149	0.118	0.484	1.085
Willing to accept CCAP	1.752	1.100	0.372	0.512	5.995	1.973	0.370	0.000	1.366	2.850
Offer non-standard hour care	0.596	0.257	0.230	0.256	1.387	1.011	0.208	0.959	0.675	1.514

**Table B8.** Results from the logistic regression for community-level characteristics, American Indian and Alaskan Indian

	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Children under age 5	0.998	0.001	0.058	0.996	1.000	0.999	0.000	0.082	0.998	1.000
Children under age 6 with at least one foreign-born parent	1.008	0.010	0.408	0.989	1.027	0.996	0.006	0.490	0.983	1.008
Population over age 5 speaking non-English language at home	1.073	0.025	0.002	1.026	1.123	1.038	0.013	0.004	1.012	1.064
Children under age 5 living below 100% of FPL	0.996	0.011	0.737	0.975	1.018	1.007	0.007	0.316	0.994	1.020
Months licensed	1.000	0.001	0.940	0.998	1.002	1.003	0.001	0.000	1.001	1.004
Capacity	1.016	0.005	0.001	1.006	1.025	1.219	0.067	0.000	1.095	1.356
Serves infants and toddlers	0.461	0.235	0.128	0.170	1.251	0.633	0.162	0.074	0.383	1.045
Offers part-time	0.839	0.307	0.632	0.410	1.717	0.978	0.147	0.883	0.729	1.312
Located in metro area	1.347	0.494	0.417	0.656	2.765	0.708	0.146	0.094	0.473	1.061
Willing to accept CCAP	1.771	1.096	0.356	0.526	5.960	1.955	0.366	0.000	1.355	2.823
Offer non-standard hour care	0.582	0.243	0.195	0.257	1.320	0.982	0.205	0.930	0.652	1.479

**Table B9.** Results from the logistic regression for community-level characteristics, Asian and Native Hawaiian and Pacific Islander

	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Children under age 5	0.998	0.001	0.055	0.996	1.000	0.999	0.000	0.118	0.998	1.000
Children under age 6 with at least one foreign-born parent	1.005	0.009	0.559	0.987	1.024	0.998	0.007	0.822	0.985	1.012
Population over age 5 speaking non-English language at home	1.065	0.024	0.006	1.018	1.113	1.033	0.013	0.012	1.007	1.060
Children under age 5 living below 100% of FPL	0.994	0.010	0.545	0.974	1.014	1.002	0.006	0.698	0.990	1.015
Months licensed	1.000	0.001	0.989	0.998	1.002	1.003	0.001	0.000	1.001	1.004
Capacity	1.015	0.005	0.001	1.006	1.025	1.215	0.066	0.000	1.092	1.352
Serves infants and toddlers	0.481	0.238	0.139	0.182	1.269	0.634	0.165	0.080	0.380	1.056
Offers part-time	0.839	0.306	0.630	0.411	1.715	0.970	0.145	0.839	0.724	1.300

	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Located in metro area	1.264	0.462	0.522	0.617	2.586	0.743	0.155	0.155	0.493	1.119
Willing to accept CCAP	1.629	1.012	0.432	0.482	5.502	1.986	0.375	0.000	1.372	2.874
Offer non-standard hour care	0.606	0.264	0.249	0.258	1.421	1.015	0.209	0.942	0.678	1.520

Table B10. Results from the logistic regression for community-level characteristics, Black

	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Children under age 5	0.998	0.001	0.065	0.996	1.000	0.999	0.000	0.129	0.998	1.000
Children under age 6 with at least one foreign-born parent	1.008	0.011	0.469	0.987	1.029	0.996	0.006	0.514	0.984	1.008
Population over age 5 speaking non-English language at home	1.072	0.025	0.003	1.024	1.122	1.031	0.014	0.024	1.004	1.058
Children under age 5 living below 100% of FPL	0.993	0.011	0.506	0.972	1.014	1.001	0.006	0.821	0.989	1.014
Months licensed	1.000	0.001	0.909	0.998	1.002	1.003	0.001	0.000	1.001	1.004
Capacity	1.016	0.005	0.001	1.006	1.025	1.219	0.067	0.000	1.095	1.356
Serves infants and toddlers	0.457	0.232	0.124	0.169	1.238	0.638	0.166	0.084	0.383	1.063
Offers part-time	0.856	0.314	0.672	0.418	1.757	0.973	0.145	0.855	0.726	1.304
Located in metro area	1.337	0.491	0.429	0.651	2.748	0.728	0.149	0.122	0.487	1.089
Willing to accept CCAP	1.798	1.116	0.345	0.533	6.070	1.990	0.375	0.000	1.376	2.878
Offer non-standard hour care	0.572	0.241	0.185	0.250	1.308	0.999	0.207	0.996	0.665	1.500

**Table B11.** Results from the logistic regression for community-level characteristics, two or more races

	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Children under age 5	0.998	0.001	0.061	0.996	1.000	0.999	0.000	0.125	0.998	1.000
Children under age 6 with at least one foreign-born parent	1.009	0.009	0.334	0.991	1.028	0.999	0.006	0.894	0.987	1.012
Population over age 5 speaking non-English language at home	1.070	0.024	0.003	1.024	1.118	1.030	0.014	0.027	1.003	1.057
Children under age 5 living below 100% of FPL	0.993	0.010	0.469	0.973	1.013	1.002	0.006	0.732	0.990	1.014
Months licensed	1.000	0.001	0.938	0.998	1.002	1.003	0.001	0.000	1.001	1.004
Capacity	1.015	0.005	0.001	1.006	1.025	1.214	0.066	0.000	1.091	1.351
Serves infants and toddlers	0.458	0.236	0.129	0.167	1.255	0.626	0.163	0.073	0.375	1.044
Offers part-time	0.851	0.311	0.659	0.417	1.741	0.971	0.145	0.846	0.725	1.302
Located in metro area	1.298	0.475	0.476	0.634	2.659	0.723	0.149	0.116	0.483	1.083
Willing to accept CCAP	1.768	1.109	0.364	0.517	6.044	1.956	0.372	0.000	1.348	2.839
Offer non-standard hour care	0.589	0.252	0.215	0.255	1.360	1.035	0.216	0.868	0.688	1.557

**Table B12.** Results from the logistic regression for community-level characteristics, another race

	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Children under age 5	0.998	0.001	0.068	0.996	1.000	0.999	0.000	0.115	0.998	1.000
Children under age 6 with at least one foreign-born parent	1.011	0.010	0.283	0.991	1.030	0.998	0.007	0.763	0.985	1.011
Population over age 5 speaking non-English language at home	1.080	0.026	0.001	1.030	1.133	1.033	0.014	0.015	1.006	1.060
Children under age 5 living below 100% of FPL	0.994	0.011	0.584	0.973	1.015	1.002	0.006	0.713	0.990	1.015
Months licensed	1.000	0.001	0.874	0.998	1.002	1.003	0.001	0.000	1.001	1.004
Capacity	1.015	0.005	0.002	1.005	1.025	1.215	0.066	0.000	1.092	1.351
Serves infants and toddlers	0.467	0.238	0.135	0.172	1.268	0.633	0.165	0.078	0.380	1.053
Offers part-time	0.870	0.321	0.705	0.422	1.792	0.970	0.145	0.837	0.724	1.300



	Centers					Family child care				
	Odds ratio	Std. err.	P	[95% Conf. interval]		Odds ratio	Std. err.	P	[95% Conf. interval]	
Located in metro area	1.305	0.472	0.461	0.642	2.653	0.747	0.154	0.156	0.499	1.118
Willing to accept CCAP	1.753	1.124	0.381	0.499	6.160	1.987	0.375	0.000	1.373	2.876
Offer non-standard hour care	0.573	0.246	0.194	0.247	1.328	1.017	0.210	0.936	0.678	1.524