

PARTICIPANT INPUT REPORT:



EARLY CHILDCARE AND EDUCATION

2023
EXECUTIVE
SUMMARY





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PROJECT SUMMARY

The mission of The Children’s Trust (The Trust) is to partner with the community to plan, advocate for and fund strategic investments through community partnerships. This work strives to improve the lives of children and families in Florida’s Miami-Dade County. In 2021-22, The Trust invested more than \$49.4 million in a continuum of supports for early childhood development and school readiness, known as Thrive by 5. It does so because of the urgency and importance of early brain development and its impact on later life success. Strategies focus on improving the quality of early childhood education programs; increasing access to these programs for families with the greatest needs; and encouraging developmental screening, assessment, and when needed, early intervention.

The Children’s Trust Thrive by 5 Early Learning Quality Improvement System (QIS) is an integrated system of supports for children, teachers and provider agencies that are grounded in equity principles to drive access to high-quality services that promote healthy development for children living in poverty. Components include:

- High-Quality Tiered Payment Differentials
- Families Forward Child Care Scholarships
- A\$CEND Salary Supplement Program
- Career Advising, Professional Development & Scholarships
- Formative Child Assessments
- Mental Health Consultation

In addition to improving childcare quality, there is a great need in Miami-Dade to increase the number of available high-quality early learning slots. To support this goal, The Trust matches funding through community partners for the federal Early Head Start Child Care Partnership (EHS-CCP) and Florida's School Readiness Program Match. These childcare program slots are filled by children living within or near the federal poverty level, children with disabilities, children of farm workers, and children at risk of neglect and abuse. Programs also support labor force participation among parents. When families are financially secure, this improves childhood experiences at home and promotes school readiness.

Thrive by 5 Families Forward childcare scholarships are for families who exceed federal school readiness subsidy eligibility (which is up to 150 percent of federal poverty levels) but still cannot afford the high cost of quality childcare, for families up to 300 percent of federal poverty levels. Scholarships must be utilized at high-quality, tier four or five Thrive by 5 programs. In turn, these programs benefit from increased enrollment and are encouraged to sustain their higher levels of quality.

The Trust has partnered with Q-Q Research Consultants (QQR), a consulting firm located in Miami-Dade County, to conduct research and evaluation services that inform The Trust's ongoing work. The objectives of this research are



to 1) assess the needs and interests of potential program participants to inform planning for future investments and 2) incorporate input from current service recipients to support providers' continuous learning and quality improvement. The research activities described in this report focus on early childhood education, including childcare that may occur in the home, in another home, or in a childcare center.

This Executive Summary report highlights findings from a community parent survey. In addition to gauging on-average attitudes and experiences, this report draws comparisons across different populations (i.e., by race/ethnicity, income level, and neighborhood of residence) to explore whether different facets of the community have different experiences and needs. Details on the methods and samples are provided in the appendix.

FINDINGS

Access to Childcare

Do expecting parents know where to look for information on early childcare?

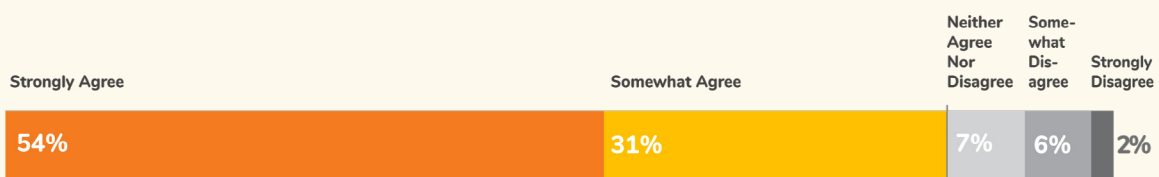
The parent survey asked expecting parents how strongly they agreed that they knew where to look for information on early childcare for their new infant in their community. A strong majority either *strongly* or *somewhat agreed* that they knew where to find childcare (see Figure 1 on next page). Just 1% *strongly disagreed*,

indicating that, as a whole, expecting parents knew where to find the care needed for their new infant. Participants' agreement that they knew where to find childcare was comparable across race/ethnic groups, income brackets, and neighborhood of residence.

Figure 1: Most expecting parents **strongly agreed or **somewhat agreed** that they knew where to look for information on early childcare.**



Figure 2: Most parents of young children **strongly agreed or **somewhat agreed** that they knew where to look for information on early childcare, although twice as many **somewhat** or **strongly disagreed** as compared to expecting parents.**



Do parents of young children know where to look for early childcare?

The survey also asked parents of infants and young children (i.e., from birth through age four) how strongly they agreed that they knew where to look for information on early childcare for their child in their community (see Figure 2). In this group, even more respondents selected

strongly agree. Despite this, the proportion selecting either *somewhat* or *strongly disagree* also increased. While just 8% expressed some degree of disagreement, this is double that of expecting parents.

How difficult is it for parents of young children to find childcare?

Another survey item asked how hard or easy it was for parents of young children to find childcare services meeting their needs. The most selected response was *somewhat easy to find*, with just over a third selecting this option (see Figure 3 on next page). However, just under a third indicated that childcare was *somewhat difficult to find*.

It is worth noting that parents tended to know where to look for information on childcare, yet a substantial proportion (41%) also said that it

was difficult to find care meeting their needs. This may suggest that many parents find themselves settling for suboptimal childcare alternatives. Another explanation is that available programs may be in less convenient locations or may not fit with family schedules. It may also be the case that parents find the process of locating and selecting the best childcare option to be a challenge.

Figure 3: Parents of young children were split on difficulty finding childcare that meets their needs, with almost 40% saying it is **somewhat easy to find and over 30% saying it is **somewhat difficult to find**.**

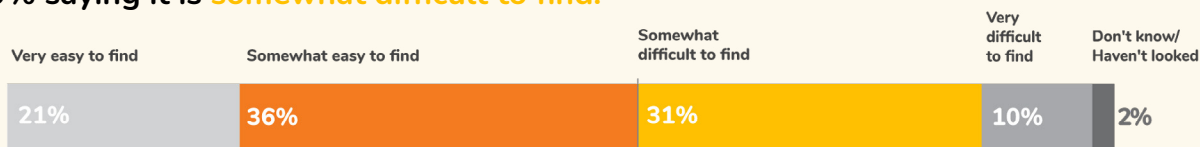
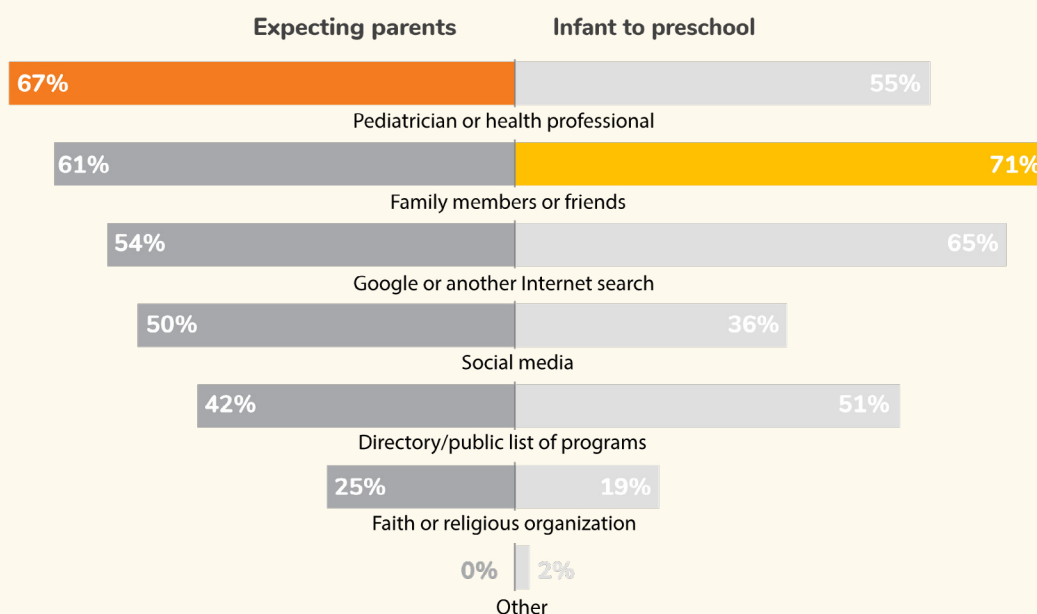


Figure 4: The most common source of information for expecting parents was **pediatricians or health professionals, while the most common source for parents of infant to preschool-aged children was **family members or friends**.**



Sources of Information on Childcare

Where are parents most likely to look for information on early childcare in their community?

The survey asked both expecting parents and parents of young children where they were most likely to seek information on childcare options in their community (Figure 4). For expecting parents, the most selected source of information was a pediatrician or other health professional, with just over two thirds selecting this source. Not far behind, a majority of expecting parents also said that they would get information from friends or family members, and just over half said that they would consult Google or another search engine.

The percentage of parents with young children (infants through age 4) reporting that they would consult a pediatrician or health professional was somewhat lower, yet this remains one of the more selected options. In this segment of respondents, the most selected information source was friends or family members, followed by Google or another search engine.

For both expecting parents and parents of young children, the least selected source of information was through a faith or religious organization, although even this option was selected by a quarter of expecting parents and nearly a fifth of those with young children.

Expecting parents:

- The lowest income group (<\$25,000) was substantially less likely to report that they would seek information through social media. Asian, Black/African American, and Hispanic/Latino respondents were also less likely to select this option.
- Hispanic/Latino and Haitian respondents were most likely to report that they would get information from Google or other search engine, as compared to other groups. Residents of the Far South, Beaches, and Kendall/Near South were also more likely to use a search engine than residents of the Northeast and Northwest.
- The lowest income group (<\$25,000) was more likely to say that they would get information through family and friends than those in higher income brackets.
- Black/African American respondents were more likely than other racial and ethnic groups to say that they would get information from a directory or public list of information. Hispanic/Latino and Haitians were least likely to select this option.
- Residents of the Northeast were most likely to say that they would get information from a pediatrician or other healthcare professional, whereas residents of the Far South and Kendall/Near South were least likely.
- Haitian and Asian respondents were most likely to say they would get information from a faith or religious organization, although Black/African American respondents were also more likely to select this than Whites or Hispanics/Latinos.

Parents of young children:

- Non-White groups were less likely than White respondents to consult social media for information on childcare options. The lowest income group (<\$25,000) was also less likely to consult social media than those earning more. Residents of the Far South were least likely to consult social media as compared to other neighborhoods.
- Black/African American, Haitian, and Hispanic/Latino respondents were more likely than Whites to use Google or another search engine to find childcare.
- The lowest (<\$25,000) and highest (>\$75,000) income groups were more likely to say that they would get information from family members or friends, as compared to those in the middle-income brackets. Residents of the Beaches were most likely to find programs through family or friends, followed by the Far South.
- Black/African American, Haitian, and Hispanic/Latino respondents were more likely to say that they would get information from a directory or public list of programs.



Childcare Preferences

What early childcare arrangements are parents either most interested in using or currently using?

The parent survey also inquired about preferred childcare arrangements. Expecting parents were asked which arrangements they were most likely to use, whereas parents of young children were asked which arrangements they were using at the time of completing the survey (see Figure 5). In each case, they were asked to select all that apply.

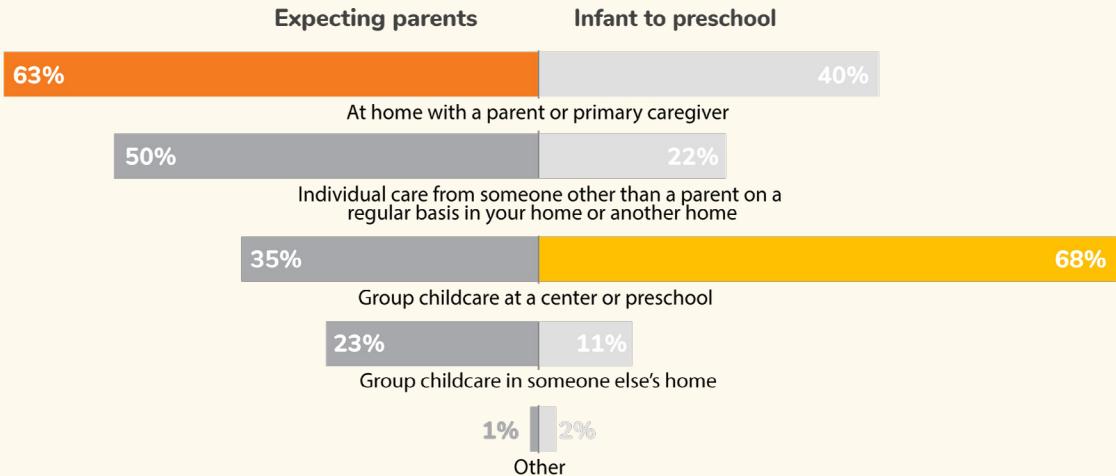
Expecting parents were most likely to say that they would use at-home care with a parent or primary caregiver, with nearly two thirds selecting this option. About half of expecting parents also said that they would use individual care from someone other than a parent on a regular basis in their home or at another home. Group childcare at a center or preschool was the next most selected arrangement by expecting parents, with just over a third selecting this option.

Worth noting is that the childcare arrangements actually used by parents of young children (birth to age 4) were somewhat different as compared to the preferences of expecting parents.

Parents of young children were almost twice as likely to report using group childcare at a center or preschool, while they were also less likely to report using at-home care with a parent of primary caregiver or individual care from someone other than the parent.



Figure 5: For expecting parents, the most common childcare arrangement was at home with a parent or primary caregiver, while parents of infant to preschool-aged children most commonly chose group childcare at a center or preschool.



Expecting parents:

- Hispanic/Latino and Black/African American respondents were somewhat more likely to say that they would use at-home care with a primary caregiver, although the difference between these and White respondents was only about six to eight percentage points.
- Respondents in the middle two income groups (\$25,000 - \$75,000) were more likely to say that they expected to use individual care with someone other than a primary caregiver, either at their own home or another home, whereas the lowest income group was least likely to select this option.

Parents of young children:

- Asian and White respondents were more likely to report using at-home care with a parent or primary caregiver as compared to other groups. The lowest income group was least likely to report using at-home care with a parent or primary caregiver, as were residents of the Far South.
- White respondents were substantially more likely than others to report using individual care, at home or another home, with an adult who is not a primary caregiver. The lowest income group (<\$25,000) was less likely to report using this arrangement, as compared to those earning more. Residents of the Far South were also less likely than other neighborhoods to report using this arrangement.
- White and Asian respondents were more likely to report that they used group childcare in someone else's home. The lowest income group (<\$25,000) was least likely to report that they used this childcare type. This option was also used less by residents of the Beaches and Far South areas.
- Hispanic/Latino, Black/African American, and Haitian respondents were more likely to report using group childcare at a center or preschool than White parents.

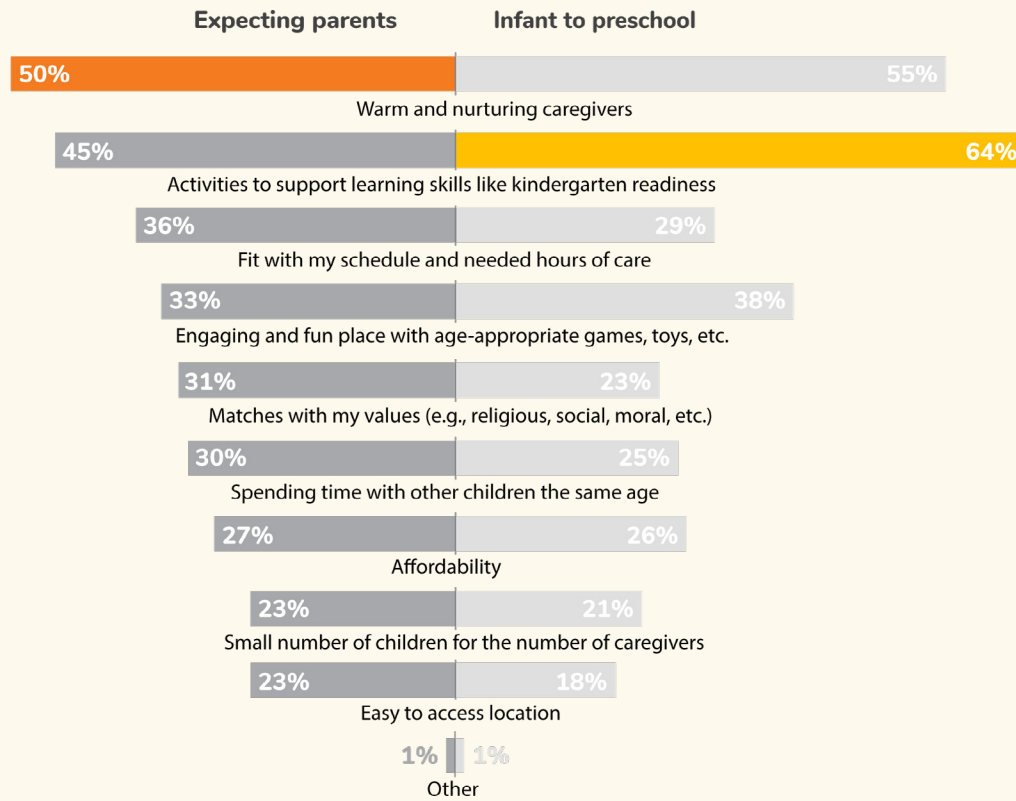
What early childcare features are most important to parents?

The parent survey asked respondents which features of childcare arrangements were most important to them (see Figure 6 on next page). They were provided with a list of features and asked to select the three that they found most important. For both expecting parents and parents with young children, the most selected options were 1) warm and nurturing caregivers; 2) activities to support learning skills such as kindergarten readiness; 3) fit with schedule and needed hours of care; and 4) an engaging and fun place with age-appropriate games, toys, etc. As compared to expecting parents, parents of young children were substantially more likely to prioritize activities to support learning. Overall, parents valued nurturing, quality and relationship factors somewhat more than practical factors such as cost and location for early childcare.

Expecting parents:

- The lowest income group (<\$25,000) was less likely to say that they prioritized learning new skills.
- Black/African American, Asian, and Hispanic/Latino respondents were more likely to say that they prioritized a warm and nurturing environment.
- Black/African American respondents were also more likely to emphasize affordability.

Figure 6: The most important childcare feature to expecting parents was **warm and nurturing caregivers, while parents of infant to preschool-aged children most valued **activities that support learning and kindergarten readiness**.**



Parents of young children:

- Black/African American, Haitian, and Hispanic/Latino respondents were more likely to prioritize learning new skills such as kindergarten readiness. The lowest income group (<\$25,000) was also more likely to prioritize the learning component than those earning more. Similarly, residents of the Far South were most likely to endorse this as a key feature.
- White and Asian respondents were more likely to prioritize an easy-to-access location, as were economically better off respondents (>\$50,000) and those living in Kendall/Near South, the Northwest, and the Beaches.
- The lowest income bracket was less likely to prioritize affordability as compared to other income brackets. This may indicate some level of availability of low cost and free programs already targeting the lowest income families. It may also suggest that other aspects, such as school readiness, take priority.
- White respondents were most likely to prioritize match with values, whereas Black/African American respondents were least likely to prioritize this feature.

Prenatal and Early Childhood Health

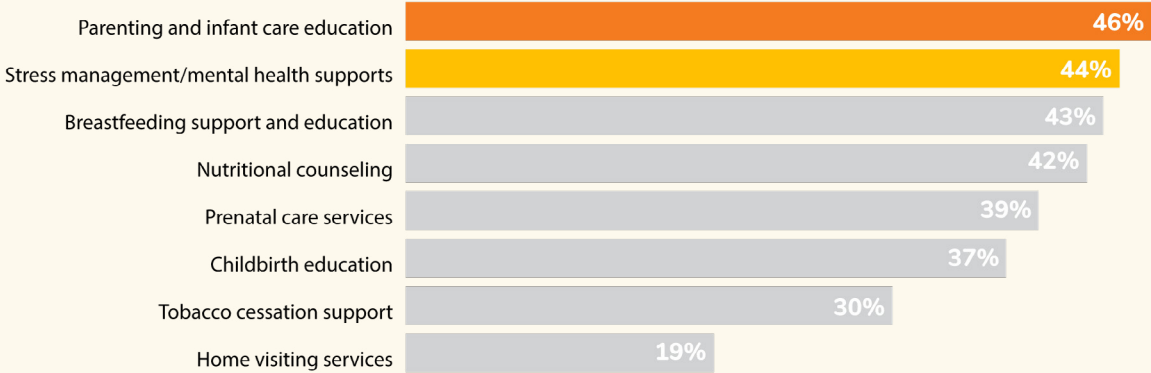
What prenatal and early childhood health information services did expecting parents feel were most important?

Through the parent survey, expecting parents were asked what prenatal and early childhood health information services they felt were most needed (see Figure 7). Respondents selected their top three options from a list of eight. More than 40% of parents selected the following options as one of their most important: 1) parenting and infant care education, 2) stress management and mental health supports, 3) breastfeeding support and education, and 4) nutritional counseling. The least prioritized health information service was home visitation, although even this option was selected by nearly one in five respondents as a priority area.

- Residents of the Far South were more likely to prioritize breastfeeding support and education.
- The lowest income bracket (<\$25,000 per year) as well as non-White groups were on-average more likely to prioritize stress management and mental health supports.



Figure 7: The most important prenatal and early childhood health information to expecting parents was parenting and infant care education followed by stress management/mental health supports.



Developmental Screenings and Early Intervention

Are preschool age children receiving regular developmental screenings? Who does these screenings?

Through the survey, parents of infants and young children through preschool age were asked whether their child received regular developmental screenings to check how they are growing and if they meet important milestones in how they play, learn, speak, behave, and move. Of these, 88% said that their child had received screenings, 7% said that they had not, and 5% reported that they were not sure.

Haitian respondents were more likely to be unsure as to whether their child was receiving developmental screenings.

Parents who reported that their child received developmental screenings were also asked who conducts them, with respondents allowed to select multiple options from a list. By a wide margin, the most common response was a pediatrician or health care provider (about 79%), followed by the child's early childcare provider (about 36%). Relatively few respondents selected other options.

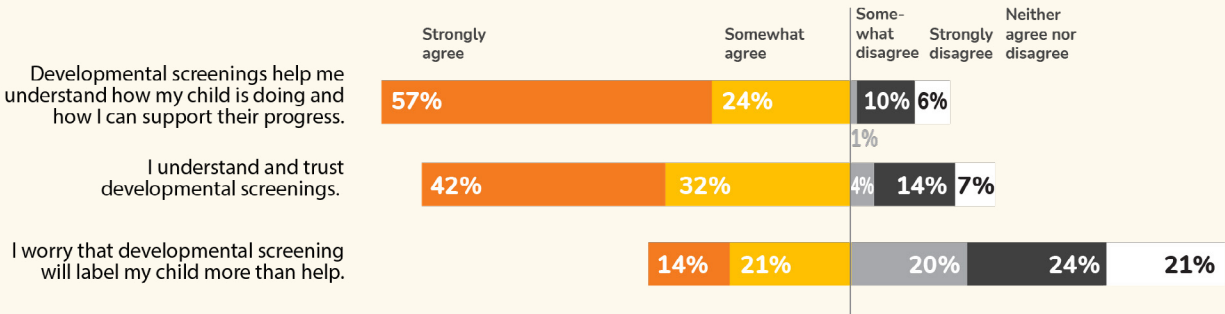


How do responding parents feel about the use of developmental screenings?

The parent survey also examined attitudes toward developmental screenings (see Figure 9). Responding parents of infants and young children were asked to what extent they

1) understood and trusted such screenings; 2) worried that screenings will label their child more than help; and 3) whether screenings helped them understand how their child is doing and support their progress.

Figure 8: Most parents strongly agreed that developmental screenings are useful and trustworthy, yet 35% still worry that screenings will label their child more than help.



Although most respondents agreed that they understood and trusted developmental screenings, about a quarter either disagreed or neither agreed nor disagreed, indicating room to improve public understanding and trust in this area. Importantly, over a third of respondents expressed concern that developmental screenings might label their child more than help. Such views may prevent parents from requesting screenings or may affect their willingness to use the resulting information or recommended early interventions. Despite this, a strong majority expressed that these services help them understand how their child is doing and how to support them.

- Non-White groups were generally more likely to disagree that they understood and trusted developmental screenings. They were not, however, more likely to worry that screenings would label rather than help their children.
- Respondents with a household income level below \$75,000 per year were more likely to worry that screenings would label rather than help their child.
- Hispanic/Latino respondents were more likely to strongly disagree that screenings help them understand how their child is doing and how to support them.

Are children receiving early intervention supports? How satisfied are parents with these services?

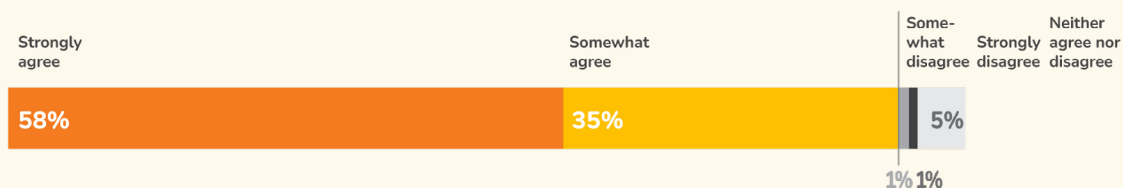
The parent survey asked whether preschool age or younger children had received any early intervention supports to address developmental delays or concerns, such as speech therapy, physical therapy, behavioral or other supports. Among parents of young children, 51% said that their child had received early intervention supports, 46% said they had not, and 3% were unsure.

- Residents of the Northeast, Beaches, and Far South were least likely to report receiving early intervention supports.
- Lower income brackets were somewhat less likely to report receiving early intervention supports.
- Black/African American, Haitian, and Hispanic/Latino respondents were less likely to report receiving early intervention services.



The survey also asked those who reported receiving early intervention services how satisfied they were with the services received (see Figure 9). Satisfaction was high, with over 90% either strongly or somewhat agreeing that they were satisfied with early intervention services.

Figure 9: Nearly all respondents whose children received early intervention services strongly agreed or agreed that they were satisfied with the services.



How do parents feel early intervention services can be improved?

The survey asked parents who reported feeling dissatisfied with early intervention services what improvements they would recommend. The most cited recommendations were to increase availability of services and enhance communication between practitioners and parents.

“Incredibly difficult to schedule services, lack of communication and follow up is challenging.” (Parent survey respondent)

“It is very difficult to find places with open availability. Most are in a wait list and those that aren’t have mediocre services.” (Parent survey respondent)



RECOMMENDATIONS

Strategizing General Outreach: Utilize outreach strategies aligned with parents’ most frequently used sources of information. The most selected sources of information about early childcare options for both expecting parents and parents of young children were pediatricians and healthcare workers, family or friends, and search engines. In addition, about half of expecting parents also named social media as an information source, while half of parents of young children mentioned using public listings or directories.

Programs should ensure they have excellent word-of-mouth among family or friends who are past participants. Furthermore, they should distribute information about their services at local pediatric and other healthcare offices, ensure the program appears in Google searches

through search engine optimization, and keep program information current in the 211 Helpline and other directory listings.

Increasing Access: 87% of expecting parents and 85% of parents with young children agreed that they knew where to find information about early childcare options. However, 41% of parents with young children expressed that it was very or somewhat difficult to find childcare. Thus, while most parents know where to find information on programs, a substantial proportion still find it challenging to find childcare that meets their needs.

The Trust should continue to support childcare access for high-need families that are less likely to be able to afford the high cost of care.



Opportunities include childcare and Head Start/ Early Head Start match funding to increase slots, as well as continuing to fund Thrive by 5 Families Forward childcare scholarships, as described earlier in this report. There is currently a waiting list for the Families Forward childcare scholarships, but The Trust is actively and ongoingly working to engage other public and private funders to support this need, as well as increase its own direct investments.

Supporting An Array of Care Options:

Expecting parents were most likely to use at-home childcare with a primary caregiver or one-to-one childcare with another adult. Parents of young children, however, were more likely to use group childcare at a center or preschool. There are a few possible explanations for this discrepancy. Expecting parents may prefer to stay at home with their child due to changing economic pressures. Another possibility is limited awareness of available options on the part of expecting parents. Alternately, there may be a disconnect between what parents prefer when expecting and what is actually feasible once a child is born. It is also likely that preferences for

the type of care are related to the age of young children and their evolving developmental needs. For example, parents of infants may be more likely to prefer at-home or one-on-one care but have an increased desire to seek group childcare as infants and toddlers grow into more social and active preschoolers.

Emphasizing Childcare Quality: For both groups, the most sought-after features of childcare arrangements were 1) warm and nurturing caregivers, 2) learning new skills such as school readiness, 3) fit with scheduling needs, and 4) availability of engaging and fun activities. Parents of young children were substantially more likely to prioritize the learning and school readiness aspect of childcare. Overall, parents valued these quality and relationship factors somewhat more than practical factors such as cost and location for early childcare.

As The Trust endeavors to increase access to early childcare, it should simultaneously continue to focus on the critical importance of childcare quality in achieving developmental benefits for children. The Thrive by 5 integrated system of supports for children, teachers, and provider agencies is anchored on reinforcing nurturing teacher-child relationships and interactions. This includes financial incentives to teachers and childcare owners for observed positive interactions. Ongoing access to formative child assessments inform individualized care and parent feedback, and early childhood mental health consultation is available at the child, teacher, classroom and program levels to promote quality care.

Engaging Prenatal Parents' Interests: Expecting parents were interested in prenatal and early childhood health information and services related to 1) parenting and infant care, 2) stress management/mental health, 3) breastfeeding, and 4) nutritional counseling. To address these needs, The Trust can leverage its available parenting and family strengthening services throughout the community, including The Children's Trust Parent Club. Funded programs include numerous choices for evidence-based group, individual, and home visitation services that center around parenting skills, child development, and parenting stress management. In the most recent awards beginning in October 2023, programming for prenatal and early childhood was expanded in response to this community need, so there should be increased outreach to expecting parents. The Parent Club offers short-term educational workshops in English, Spanish and Haitian Creole, and topics should be expanded to address the parent interests noted in the survey, such as child development, school readiness, social-emotional learning, breastfeeding and nutrition.

Another opportunity to engage parents' interests is through The Children's Trust Book Club, one of its most well-known and well-loved programs. By offering free books in English and Spanish with parent-child activity guides every month for children up to the age of five, this program is rich with early child developmental guidance for caregivers. This could be expanded in new and innovative ways to increase access to information and create learning opportunities. For example, The Trust should continue its Haitian Creole Engagement Project for the Book Club expansion and outreach to support underserved populations and prioritize school readiness. This project, underway since early 2023, provides families at Haitian American-focused events with several children's books in Haitian Creole, family reading guides, and other helpful materials.

Encouraging Regular Developmental Screenings and Early Intervention Supports:

All infants and young children benefit from regular developmental screenings to check how they are growing and if they meet important milestones in how they play, learn, speak, behave, and move. This can allow for early detection of concerns that can be addressed and often ameliorated through early intervention supports. Although 88% of parents reported their child received regular screenings, mostly from their child's healthcare or early childcare provider, that leaves a significant portion without this critical preventive service. Parents should be encouraged to seek out regular screenings and to follow-up on any potential concerns noted. In the current survey, 35% of parents strongly or somewhat agreed that they worry that developmental screenings will label their child more than help, and 18% strongly or somewhat disagreed that they understand and trust developmental screenings.

The Trust's Book Club monthly parent activity guides that accompany books include developmental milestones to be expected, as well as information about how to seek screening and ideas for activities to support child development. In addition, The Trust's Parent Club has workshop topics related to screening and early intervention that can be promoted more widely.



APPENDIX: METHODOLOGY

QQRc took a mixed-method approach to meet the key evaluation objectives regarding Trust-funded early childcare and education programming. Quantitative data were captured from a community survey across 3,477 respondents.

SURVEY DESIGN

The survey was designed through a collaboration between QQRc and staff from The Trust. Together, the team developed the survey to focus on experiences, attitudes, needs, and preferences in four priority areas:

- **Early Childcare and Education:** Childcare arrangements and preschool programs for infants and young children before starting kindergarten.
- **Parenting:** Classes, programs, and support services geared toward helping parents and caregivers to better meet the needs of children in their care.
- **School Health:** School-based health services, including nursing and auxiliary services such as mental health and dental check-ups.
- **Youth Development:** Summer and after-school activities to support learning, well-being, and healthy development for children and youth.



The needs of families and children vary according to the child’s age. For example, the health needs of adolescents differ from those of young children. For this reason, the survey was designed to offer modified questions depending on the age of the respondent’s child(ren). At the start of the survey, respondents were asked to indicate whether they had any children 1) from birth to age four, 2) from age 5 to 10 years old, 3) from 11 to 13 years old, or 4) from 14 to 18 years old. Throughout the report, we refer to these groups as preschool, elementary, middle, and high school ages. Respondents were also asked whether they or their partner were expecting a child at the time of taking the survey.

- All survey respondents who said they or a partner were expecting a child when completing the survey were shown a survey block containing items specific to the experience of expecting parents, such as parenting needs, plans, and preferences for early childcare.
- Those who indicated having a child or children in just one of the age groups were shown a set of survey items designed for that age group (i.e., preschool, elementary, middle, or high school).
- For those who indicated that they had children in multiple age groups, the survey randomly assigned them to a set of survey items corresponding to one of the age groups selected. Instructions asked them to consider their experiences with the child in that particular age group.

The survey was developed and hosted on the Qualtrics platform. It was available in English, Spanish, and Haitian Creole.

Survey Sampling Procedure

The research team used a stratified convenience sampling approach with quotas by Miami-Dade County ZIP codes in order to approximate a representative sample. Quotas were calculated by ZIP code based on data from the United States Census to ensure that the final sample would be geographically representative of the county. The Trust collaborated with community

partners to conduct outreach, and fliers with QR codes were posted in community locations. Research partners at QQRC conducted biweekly analyses of sample demographics to guide survey recruitment efforts and ensure that the final sample was as representative as possible.

Survey Analytic Sample

The final analytic sample (n = 3,477) drops responses from those who completed less than half the survey. Also dropped were 1) anyone who started the survey but indicated that they did not live in Miami-Dade County for at least half the year, and 2) those that started the survey but indicated that they either did not have a child or were not expecting at the time of participating. The final sample drops cases that Qualtrics flagged as possible bots as determined by a ReCaptcha score below 0.5.

As noted above, survey respondents were assigned to blocks of items according to the ages of children in their household. The following table shows the number and percentage of respondents who completed each block. Respondents who were both expecting and already had one or more children completed two survey blocks. For this reason, total numbers sum to more than the final sample size. It is worth noting that there were fewer respondents for the middle and high school age groups.

Table 1: Number of Survey Respondents for Each Age Bracket

Survey block	Number of responses	Percentage
Expecting parents	579	17%
Preschool age (from birth to about 4 years old)	1,294	37%
Elementary school age (about 5 to 10 years old)	1,325	38%
Middle school age (about 11 to 13 years old)	414	12%
High school age (about 14 to 18 years old)	340	10%

The final sample was well-aligned with targets set by ZIP code and also roughly matched the demographic composition of Miami-Dade County, with one notable exception. Hispanic and Latino/a groups were underrepresented. To address this, a survey sample weight was generated to increase the relative importance of Hispanic and Latino/a participants in analyses.

This survey weight was created with a raking procedure using the *anesrake* package¹ in the R statistical program.

The following table provides information on the demographic composition of the final sample.

Table 2: Final Survey Demographics

Variable	Category	Number	Percent
Gender	Female	2,453	71%
	Male	847	24%
	Prefer not to say	40	1%
	Non-binary or third gender	9	<1%
	Self-describe	3	<1%
	Not answered	125	4%
Race/Ethnicity	White (non-Hispanic, non-Haitian)	1,333	38%
	Hispanic/Latino-a-x	1,212	35%
	Black/African American (non-Hispanic, non-Haitian)	505	15%
	Haitian	134	4%
	Asian	58	2%
	Prefer not to say	77	2%
	Other	32	1%
	Not answered	126	4%
Parent Age	18-29	651	19%
	30-39	1,723	50%
	40-49	822	24%
	50-64	146	4%
	65+	14	<1%
	Not answered	121	3%
Parent Educational Attainment	Less than high school	88	3%
	High school diploma or GED	498	14%
	Some college	1,016	29%
	Associate degree	577	17%
	Bachelor's degree	788	23%
	Graduate degree	382	11%
	Not answered	128	4%

1 Pasek, J. (2022). Package 'anesrake'. *Compr. R Arch. Netw.* Retrieved from: <https://cran.r-project.org/web/packages/anesrake/anesrake.pdf>

Variable	Category	Number	Percent
Household Income	Less than \$25,000	531	15%
	\$25,000 to less than \$50,000	1,035	30%
	\$50,000 to less than \$75,000	929	27%
	\$75,000 or more	566	16%
	Prefer not to say	279	8%
	Not answered	137	4%
Caregiver role	Mother	2,511	72%
	Father	768	23%
	Grandmother	42	1%
	Grandfather	5	<1%
	Stepmother	15	<1%
	Stepfather	13	<1%
	Foster mother	11	<1%
	Foster father	3	<1%

Survey Analytic Approach

All analyses were conducted using the R Program for Statistical Computing.² Descriptive statistics were calculated for all categorical and ordinal items. The percentage of respondents selecting each response option was adjusted using the survey weight described above. This survey weight was included when generating frequency tables using the questionr package³ for R.

Statistical tests were conducted to determine whether item responses varied significantly by 1) income category, 2) race/ethnicity, and 3) neighborhood of residence. A neighborhood variable was created based on ZIP codes. In the case that the respondents reported a ZIP code associated with a post office box, the location of the post office was used. The neighborhoods were Far South, Kendall/Near South, Beaches, Northeast, and Northwest. Statistical significance was determined using a more conservative threshold of $\alpha = 0.001$.

Given the large sample size, it is possible for group differences to be statistically significant but small in magnitude. This report includes only those findings that are 1) statistically significant, 2) practically significant in that differences are large enough in magnitude to be meaningful, and 3) actionable in that The Trusts' activities can potentially use this information to inform their future work. Analyses used Chi-square and Fishers exact tests as implemented in the finalfit package⁴ for R.

Open-ended, qualitative survey items were analyzed using an inductive coding approach. The research team reviewed responses to identify key themes and calculated the frequency of responses according to those themes. The most cited themes are described in this report.

2 R Core Team (2018). R: A language and environment for statistical computing. R Foundation for Statistical Computing, Vienna, Austria. URL: <https://www.R-project.org/>

3 Barnier, J., Briatte, F., & Larmarange, J. (2023). Package 'questionr'. Compr. R Arch. Netw. Retrieved from: <https://cran.r-project.org/web/packages/questionr/questionr.pdf>

4 Harrison, E., Drake, T., & Ots, R. (2023). Package 'finalfit'. Compr. R Arch. Netw. Retrieved from: <https://cran.uni-muenster.de/web/packages/finalfit/finalfit.pdf>



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