Report

Quality of Child Care Qualitative Study for: Child Care Choice Analysis Survey

DEEWR & The Social Research Centre

Final Report

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1. BACKGROUND TO THE STUDY

1.1 Purpose of the qualitative study

This qualitative study was carried out primarily as an input to the design of a second quantitative study planned for 2009.

The Department of Education, Employment and Workplace Relations has commissioned the Social Research Centre to undertake a research study. The study has two stages; one qualitative and a second quantitative.

The overall purpose of the research study is to develop a model that describes the influence of a range of criteria on child care choices. In particular the model is envisaged to be used to develop an understanding of the sensitivity of parents to fluctuations in child care affordability, accessibility and quality. Before developing the model a qualitative study was carried out in order to 'inform' a robust design for the model and a 'choice modelling questionnaire'. It also aimed to develop greater insight into the breadth of parent attitudes, perceptions and behaviours relating to some of the child care choices they make.

Perspective Research was asked to undertake this qualitative research study during December 2008, involving primary carers of young children (aged 7 years and under). All respondents had returned to work or were planning to return to work.

The qualitative study focussed on child care. In particular it looked at their attitudes towards and usage of, formal and informal child care, as a means to enable them to work.

1.2 Key topics of discussion during the research groups

The detailed discussion guide used by the researchers appears in the appendices of this document. The main topics of discussion and discussion flow were:

- 1) Respondent background (children, work background, use of child care etc)
- 2) Motivation to work
- 3) Planned future working hours/days
- 4) Typical child care choice decision making process
- 5) Key factors influencing choices made
- 6) Ideal child care options
- 7) Defining quality child care and key components
- 8) Exploring current choice model components for:
 - Comprehension
 - Relevance
 - Variations by child age / child care type
 - Pricing terminology
 - Affordability considerations approach and terminology
- 9) Balancing cost and quality
 - Perceptions of current quality
 - Willingness / ability to pay more for better quality
 - Role of cost in choices made
 - What willing to compromise for best quality
- 10) Factors inhibiting return to work and take up or extended use of formal child care
- 11) A choice modelling exercise
 - Exploring a draft question for comprehension, interpretation, relevance and ways to improve

2. EXECUTIVE SUMMARY

2.1 Research sample and methodology

This study took place in December 2008 and involved five qualitative two hour discussion groups held in New South Wales and Victoria.

Participants were parents of children under eight, who had returned to work or were planning to do so within 24 months. All were using or planning to use child care to enable them to return to working.

Discussions in the group centred on exploring their use of child care and attitudes towards it in particular: drivers to use it; their quality expectations and their approaches to assessing different care options available to them.

2.2 Key findings

The scope of and objectives for the study were multifaceted and since a key focus was to develop numerous quite detailed insights for the development of a quantitative research questionnaire, we only highlight a number of key findings here in this section.

We focus on three topics: quality; key questionnaire refinement recommendations; recommendations for future research considerations.

a) Quality

The factors planned to be included in the model are all relevant

The study found that the components or factors relating to quality that are currently planned to be included in the quantitative phase are all relevant components from a parent's perspective and that most form part of many parent's choice process.

Factors explored included: child/staff ratios; space; staff qualifications and education; group size; education programs. The factor with most resonance would appear to be the child/staff ratio.

Opportunity to increase quality as an issue in the minds of parents

The study found that most respondents in this sample were satisfied with the quality of child care they received.

Education programs were of more variable importance to different parents. Knowledge about regulations in general was also variable in particular those relating to staff qualifications and staff/child ratios.

The study concluded however that these factors offer a good opportunity for Government to raise their profile as determinants of quality and to use them to educate parents about their benefits for children. It also suggested increased communication to parents relating to the regulations surrounding these factors.

The study also concluded that there appears to be an opportunity for Government to develop accredited educational programs in child care centres and that this might increase the perceptions of quality at those centres that would participate.

Some quality factors missing from model

The study concluded that parents also included a number of other factors (such as carer experience, safety, hygiene, degree of attention and affection) in their quality assessment of different child care options. It was recommended that <u>carer experience</u> be considered for inclusion in some way and that if other components are not to be included in the model that they should be alluded to in a context setting section, so that the exercises or questions appear to be more realistic.

A further very important factor in the choice of a child care option was <u>convenient location</u>. This is not currently included in the model design. The study recommended either including this factor or alluding to it as above.

The role of quality in child care choices and return to work decision making is important but only part of the jigsaw

The study concluded that the quality of child care plays a part in parent decision making about child care options and also timing of returning to work and the amount of time spent working. However, it found that quality of child care is one part of a much bigger picture and set of factors impacting on parent choices. The other factors were found to include: financial situation; overall attitudes to paid child care and its impact on children; personal fulfilment desires; parenting values; employment and workplace flexibility and perceived opportunity.

The study concluded that at some future point, more in depth understanding of these other factors and their inclusion in future modelling design might be required.

b) Main recommendations as input to the quantitative choice modelling study

The study highlighted a number of useful insights to help inform the design of the questionnaire. The key ones included:

General

▶ That all choices in the modelling exercises (e.g. ratios and prices) need to be a sensible real life scenario in order to ensure respondents take the task seriously.

- ▶ That respondents will need be told to assume that the child care options offered are all equal in terms of other (excluded) factors that they might take into consideration.
- ▶ That consideration is given to including Occasional Care as a care type option.
- ▶ That consideration is given to some questions being centred on choices made between options within a single child care type, since this would seem often to be the real life scenario.

The factors

- ► That consideration is given to pricing being explored as a sessional rate rather than an hourly rate.
- ► That prices shown need to be defined in terms of whether they are full price or include reductions/benefits of any kind.
- ▶ To consider clarifying any minimum standards that are required by regulations for, staff/child ratios, staff qualifications and group size. This would be in order to highlight if options in the questionnaire exceed or meet minimum regulations. (Otherwise, some will assume that all options meet minimum regulations).
- ▶ Include a more detailed description / definition of each type of child care for clarity and to do the same for each model factor.
- Include more information and examples about what you intend to imply by 'Educational Programs' as a factor / feature.
- ▶ Clarify that 'before and after school care' is for school age children only.

Additional personal data to gather to better understand drivers of differences in responses

The study identified that a number of attitudinal and personal situation related factors might impact on the responses of respondents.

It recommended as a result that:

- ▶ Data is gathered about each respondent in terms of the key benefits they receive relating to child care costs or family tax benefits.
- ▶ Data is gathered about each respondent to identify if they wish / would like to work for longer hours than they currently do.
- Consideration is given to using a set of attitudinal questions that respondents are asked about their overall attitude to using child care.

3. OVERVIEW OF SAMPLE

Five 2-hour discussion groups were carried out with primary carers of children, during December 2008. Two took place in Sydney, two in Melbourne and one in Traralgon, Victoria. All the respondents were currently using informal or formal child care to enable them to work or were planning to use child care to enable them to work in the next 24 months.

Sample Structure

▶ The Sample Structure is shown below. The key sample variables used were: socio-economic status (SES); type of child care being used or planned to be used and the age of children. Quotas were set to try to ensure a good mix of: ages of children; number of children in a family; the type of child care currently being used.

	T	
GROUP	DATE	SPECIFICATION
1 Melbourne	Wednesday 10 th December	Receiving welfare/benefits
		SES: D, E
2 Melbourne	Weds 10 th December	Professionals & middle managers
		SES: A, B
3 Sydney	Wednesday 10 th December	Lower white and upper blue collar groups SES: C
4 Sydney	Wednesday 10 th December	Receiving welfare/benefits SES: D, E
5 Traralgon	Monday 15 th December	Lower white and upper blue collar groups SES: C

Summary of participant profiles

- Number of respondents: 33
- ► Gender: all female
- Respondents Job types included: retail staff; hospital manager; casual workers; nurses; teachers; customer service consultants; stay at home mums; pharmacy assistant; insurance consultant; administrative assistant; real estate property managers; accountant; students; personal shopper; make up artist; dietician; sales staff
- Most respondents were already working again, a small group were studying and another small group were planning to return to work in the next 24 months
- Number of children: A mix and they varied between 5 and 1 per family
- Age of children under 8: varied between and some informal: long day care; family day care; occasional care; after school care; family and friends

4. SUMMARY OF CONCLUSIONS & MAIN RECOMMENDATIONS

This section is intended as a stand alone section.

It aims to highlight the conclusions and insights believed to be of particular importance, given our understanding of your short and longer term objectives. It includes the main recommendations for consideration in refining the design of the choice modelling quantitative study. It also includes some broader more strategic ideas and recommendations.

4.1 Motivations for primary carer to return to work

It was evident that the desire to return to work while children were young was variable.

Key factors impacting desire:

It appeared to be dependent on a number of factors, (which in turn affected when they returned to work and for how many days / hours a week). In particular: the extent of their desire to spend time with their child and what they thought was most beneficial for the child; attitudes to paid child care and whether it was thought to be of benefit to a child or detrimental; their financial situation, and whether they had a choice of returning to work or not; the age of the child; the availability to them of acceptable child care and other family or community support; whether they had a positive attitude towards their previous job or career; the perceived degree of flexibility of attitudes of their likely employers.

Key motivators to return to work:

▶ The key reasons given here were: financial drivers; personal fulfilment drivers; to maintain or develop future employment prospects; and less frequently, to provide a child with a better developmental opportunity.

Recommendations / Implications for broader modelling or Quantitative Study:

- 1. 'Quality', 'affordability' and 'accessibility' of child care are three parts of a more complex jigsaw.
- 2. **Recommendation:** Consider the need for further studies to better understand how parents segment or vary across a number of the above factors and motivations. Develop a better picture or model of how they effect current child care choices and use it to predict potential changes in behaviour should government alter some factors.

4.2 The barriers to returning to work

The barriers to returning to work that related to child care (once a parent had decided that they wanted to return and were going to use child care), were thought to be: the expense or cost not being affordable or worthwhile; location of care not being convenient (i.e. close to home or transport); long wait lists for good centres; poor quality options in some geographical areas.

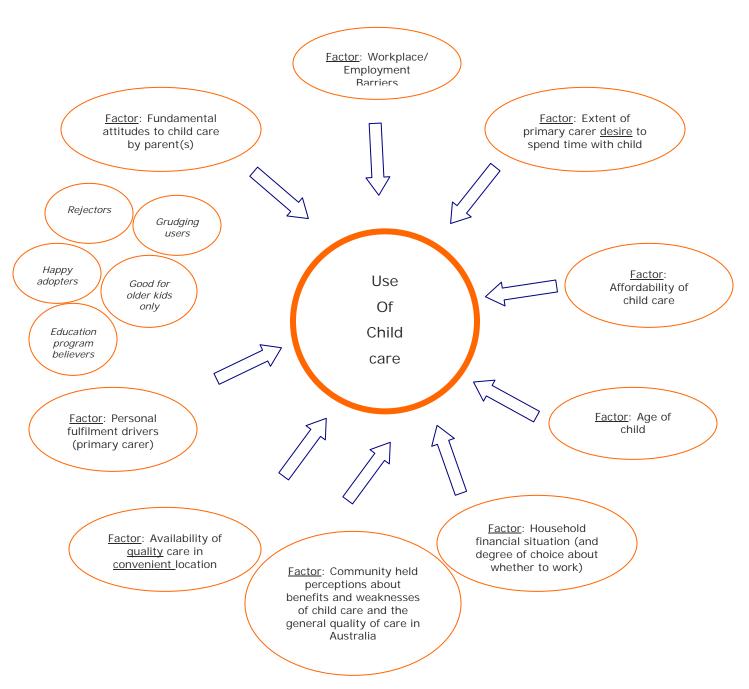
The other more fundamental barriers related to returning to work or using child care were thought to be: perceived negatives and fears associated with the use of paid child care in general (i.e. it is not beneficial and/or puts the children at risk of poorer care than they would receive from a parent); employment and workplace barriers (e.g. inflexible workplace hours or ways of working; employers who do not welcome parents as employees; lack of access to part time opportunities, lack of parent confidence); parenting values related barriers (e.g. a belief that a parent is the best option for care; guilt about using paid carers).

These factors and issues (and the fact that many respondents appeared to see part time care as optimal for children rather than full time care), acted as barriers to both using child care and using it more.

Recommendations / Implications for broader modelling or Quantitative Study:

3. The barriers to using (more) child care are multidimensional. Whilst quality concern related issues are relevant, so are broader issues, such as those surrounding workplace / employment flexibility, expectations and prospects, as well as parents' fundamental values about being a good parent.

Key emerging factors impacting on use of paid child care



Factors are many and interrelated.

4.3 Perceived likelihood of returning to working for similar hours as prechildren's arrival

Several respondents anticipated continuing to work part time for at least several years and this appeared to be the preference for many. A small group was working full time and anticipated this would continue.

Factors driving these different behaviours were related to: financial imperatives; the age of children; perceived work opportunities; perceived income earning ability; beliefs about what is best for children; personal lifestyle preferences.

Recommendations / Implications for broader modelling study or Quantitative Study:

- 4. Part time work appeared to be the personal desire for many and as such quality improvements in child care would seem unlikely to drive greater use by this group.
- 5. A group of parents exists that do not desire to move from part-time to full-time work in the short or medium term. There may be a need to identify them via attitudinal questions in the survey, in order to factor this desire into their responses.
- 6. You could include questions around the number of hours now worked / number of days and whether that is too much, too little or just right (or something along those lines).
- 7. You could then identify those that would like to work more and ask questions around what is inhibiting them and also analyse the choice modelling results by these different segments.
- 8. A group of parents does exist that <u>desires to work more hours than they currently do</u> (but do not do so currently for some reason). It may be valuable to identify them and factor this desire into the analysis of responses, in order to measure the impact of your chosen factors or options on their predicted behaviour. You could then profile them as a group.

4.4 Choosing a child care option: the factors driving choice and the relevance of the quality related factors currently being considered for the model

In order to explore the relevance of the quality factors in the proposed choice model that you are developing a number of different discussion approaches were used. The groups explored and discussed the key choice factors they had applied when making a decision about which child care offer option to use for their child, their ideal child care offer scenario, how they defined a 'quality' child care offer and how satisfied they were with the care they were currently provided with.

From these discussions, it was concluded that all the 'quality' factors that you are considering using are relevant, however they are not exhaustive and some factors important to parents would be missing. The key gaps would appear to be:

- Safety and security
- 'Soft' factors relating to: personal interactions between carers and children; degree of attention / affection; look and feel of centre; happiness / progress of children; the facilities / building.

Other less crucial but important quality factors were related to:

- Provision and quality of food
- Nappies (for babies)
- Convenient location was also a key choice factor, although not quality related.

Recommendations / Implications for broader modelling study or Quantitative Study:

- 9. The quality factors intended to be used in the quantitative study (i.e. child: staff ratio, group size, staff qualifications and training, education programs) would appear to be relevant but are not exhaustive.
- 10. The quality factors tested exclude some key 'soft' factors that may be difficult to measure but will need addressing in some way so that respondents believe the questionnaire is a real world scenario. For example you may need to tell respondents to "assume that you are happy with other aspects of the centre that are important to you..."
- 11. The importance of location to so many respondents would indicate that you may need to either include this as a factor or ask respondents to assume it is not an issue as in the above example.
- 12. The real way that parents would seem to assess performance of care once a choice is made is related to their own child's experience and the effect on the child. This suggests that any communications strategy that DEEWR might develop to promote quality related regulations should focus on the impact on a child directly e.g. focus on the benefits to the child of: higher carer child ratios; higher safety regulations; more qualified staff; smaller group sizes etc.

4.5 Current satisfaction levels with the quality of child care

Exploration of ideal child care scenarios and satisfaction with the current services and providers being used, suggested a high level of satisfaction amongst this sample with the care their children were receiving.

Recommendations / Implications for broader modelling study or Quantitative Study:

- 13. Amongst this sample of users the expressed level of satisfaction with the child care option chosen was high overall. Quality did not appear to be a top of the mind issue or problem.
- 14. If the department wishes to drive more use of child care, they may need to communicate with and educate child care using parents, so that they recognise the benefits of quality.
- 15. Additionally, non-users or limited users of child care may actually become a primary target for Government to drive an increase in child care users and more return to work. If this is the case there will be a need to educate and communicate with non-child care using parents (some of whom may well have quality concerns), about quality regulations and the benefits of quality improvements).
- 16. It also suggests it could be valuable to collect information about parents' attitudes towards child care during the next quantitative phase. This could take the form of a set of statements which respondents agree or disagree with. This could be used to profile which parents are most sensitive to quality changes and also to develop some hypotheses around parent typologies / segments as they relate to child care and working.

4.6 Perceptions about importance of the quality factors being considered for the quantitative study and how much they drive quality

Respondents were given a prompted list of potential factors they might consider and then discussed their interpretations of them and their thoughts about their relevance:

- 'Group size'
- 'Ratio of child to staff / carers'
- 'Staff qualifications and training'
- 'Space'
- 'Educational Programs' (e.g. literacy, preschool, etc)

All were thought to be important factors in choosing a child care option and to have an impact on quality.

The most highly prioritised factor appeared to be the ratio of children to staff.

As discussed in detail in the Key Insights section of the report (5.8), 'Educational programs' and 'Staff qualifications and training' were considered to have varying degrees of importance by different parents and this appeared to be related in part to the age of their child and the type of care they were using.

Other important factors were thought to be missing from the list such as: staff experience; provision of and quality of food; hygiene standards; safety; facilities and amenities.

Recommendations / Implications for broader modelling study or Quantitative Study:

- 17. As recommended elsewhere in the document, there may be a need to include some of the above missing factors, <u>or</u> to set a context for questions such that respondents assume that the options they are considering have adequate or equal standards in these other important areas / factors.
- 18. It would seem that an opportunity exists for government to improve general parent awareness of the value of carer qualifications and training, since the perceived value appeared variable amongst this sample.
- 19. Importantly, it would seem that there is also an opportunity for some form of government approved / accredited early childhood educational programs in child care centres. This could then be used to increase parent awareness of the potential options available and their benefits to children.

4.8 Choosing approach and terminology relating to cost and affordability

This was explored in order to aid vocabulary choice in the questionnaire and the approach to measuring sensitivity to price / affordability.

Recommendations / Implications for broader modelling study or Quantitative Study:

- 20. It would seem that an hourly rate is not the most typical way for many to compare prices and so if used in the questionnaire this may need additional clarification. For example the inclusion of the maximum daily or sessional charge as well might make it seem a more realistic choice exercise.
- 21. Alternatively, it may be worth considering using a cost per session instead of an hourly rate as that would appear to fit better across different types of care.
- 22. Additionally, it may be useful to explain if the price quoted is the full price (i.e. Does it excluding any benefits / rebates or is it out of pocket expenses only?). Otherwise, it may get too complicated for respondents and they may not fully attend to the exercise.

4.9 The impact of cost/price on choices they had made

It was found that price does have an impact on some parents' child care choices.

When asked, many respondents stated that hey would not compromise on the quality of care for their children, i.e. price had not been the main driver of their choice of care and they would not use a provider that delivered poor quality.

However it was evident from other discussions that some had made child care choices that were not their ideal, due to constraints of affordability or budget i.e. their preferred care option had been too expensive.

Typically however this choice compromise had usually been at the level of type of child care, for example some had preferred the idea of a nanny but could not afford it.

Once the type of child care had been chosen, most said that price had not been a main determinant of the choice of carer they had made amongst the options available to them. Quality related factors appeared to have been the primary drivers of choice.

At this level of decision making price did however appear to have had an impact for some on the number of days children were placed in child care and sometimes as a result, the number of days a parent worked.

The cost of multiple children in child care appeared to have a high impact on decisions and to be a potential barrier.

Recommendations / Implications for broader modelling study or Quantitative Study:

23. It may be valuable to consider exploring or measuring the perceived impact of affordability / price on the willingness to work for <u>longer hours</u> or the <u>timing of</u> the return to work.

4.10 Additional learning from the choice model exercise undertaken in the groups

a) 'Type of child care'

Recommendations / Implications for choice model questions: "Type of child care"

- 24. There is likely to be a need for a simple description or definition of each type of child care to ensure clarity.
- 25. Consider adding Occasional Care as another type.
- 26. Consider an 'idiot proof' approach, for example such that no one can choose an inappropriate option (e.g. before / after school care if their child is a preschooler).
- 27. There is a need to make the ratios and prices for each type of care as realistic/close to real life options as possible.

b) 'Group size'

Recommendations / Implications for choice model questions: "Group size"

- 28. A need for a definition in the questionnaire to clarify what you mean and if this varies by type of care.
- 29. A need to make sure the numbers are all realistic options for all types of care, otherwise it won't be a credible scenario and serious attention to the question may be put at risk.

c) 'Child/staff ratio'

Recommendations / Implications for choice model questions: "Child / Staff Ratio"

- 30. The ratios need to be credible for the type of care being considered. A need to ensure there aren't really unrealistic options available e.g. high ratios for babies etc.
- 31. This factor is likely to have a high degree of importance in their real life quality assessment but will respondents really take this factor into account when completing a questionnaire if they think that all options in it probably meet minimum regulations? (This was debated by some respondents)
- 32. It may be worth considering highlighting the minimum regulations and stating if an offer in a question exceeds that.

d) 'Hourly rate'

Recommendations / Implications for choice model questions: "Hourly Rate / Pricing"

- 33. Hourly rates will probably be ok to use if required <u>but</u> there will be a need to give a maximum rate for a session too, in order to make it seem more realistic/credible.
- 34. An alternative could be to show a maximum cost per day.
- 35. There will be a need to clarify whether you wish respondents to consider the rate as the full price or one after benefits / rebates i.e. an out of pocket expense or not.

e) 'Educational programs'

Understanding of what this might mean and its scope was variable, as was its perceived relevance to choice.

Recommendations / Implications for choice model questions: "Educational programs"

36. Since understanding may not be clear for all respondents there will be a need for a description of the types of programs you are thinking of.

f) 'Staff qualifications and training'

This was thought to be of importance by all respondents. However, awareness of the details of qualifications currently available and the regulations surrounding any required qualifications was variable and appeared to be guite low.

Additionally there was considerable discussion about the importance of this factor compared to that of 'experience' i.e. the amount of experience a carer has looking after children.

Experience was thought by all be important and by some respondents, to be more important than qualifications, especially for babies and the very young.

Recommendations / Implications for choice model questions: "Staff qualifications and training"

- 37. It may be of value to clarify any current minimum qualifications regulations if they exist and to provide a more expansive definition of the factor.
- 38. It would seem that an opportunity exists for government to improve general parent awareness of the value of formal carer education / training, since the perceived value appeared variable amongst this sample.
- 39. Consider including "staff experience" as a quality factor

4.11 Choice model exercise: missing quality components

Some important choice or quality factors were thought to be missing from the quality factors list currently envisaged being used in the model.

Recommendations / Implications for choice model questions

- 40. 'Staff experience' was probably the most significant of the missing measures found to be important. Hence as mentioned elsewhere, there may be a need to consider including this as an additional factor in the quantitative study and if relevant in future refinement of any accreditation requirements for child care workers.
- 41. There is probably a need to get respondents to set aside other factors you aren't including in the choice model exercises. For example you could say "Assume you are satisfied with all other factors you might use to make choices". Or, "Assume that you can get a place, it's a good location, and they are equivalent to each other in the areas of: safety, food etc, staff style".

4.12 Choice model exercise: possible impact on respondent responses of any child care related subsidies received from the government

The researcher's belief is that these subsidies / rebates may have a bearing on the responses given to questions in the choice modelling element of any questionnaire.

Current subsidies received, may have an impact on which groups of the population might be motivated to use child care more by quality changes. Additionally, some groups may be more impacted than others by potential price increases.

These differences may be linked in part to the type and amount of subsidies or benefits currently received by a parent and so this benefits data should be collected as personal details from each respondent.

For example, those receiving high level of CCB may be less price sensitive than someone on a slightly higher family income but receiving little or no CCB.

We found in the recruitment process that there was some confusion by respondents as to which benefits they actually received and also that matching respondent terminology for benefits to official terminology, was an issue. You may need to factor this in to question terminology.

Recommendations / Implications for broader modelling study or Quantitative Study:

- 42. There is a need to understand each respondents' 'status' re benefits and rebates that they are entitled to that relate to child care costs and other child related benefits e.g. CCB and Family Tax Benefit A or B.
- 43. A need to use very clear and simple language and definitions to ensure people are able to identify which benefits they currently receive.

5. DETAILED INSIGHTS AND IMPLICATIONS FOR QUANTITATIVE STUDY AND FUTURE MODELLING

This section provides more detail about the findings of each the discussion group topics and also covers most of the recommendations made in Section 4. The recommendations here are more focussed on the detail of choice modelling stage.

5.1 Motivations for primary carer to return to work

Respondents discussed the main drivers for them and women to return to work after the birth of children. It was evident that the desire to return to work while children were still young (pre-school age or primary school age), was variable and apparently dependent upon a number of factors, including:

Extent of desire to stay/spend time with their child: some wanted to stay at home full time with their children until they were a certain age; others chose to limit the days or hours for which they returned to work. There were mixed levels of desire to stay at home.

A significant group appeared to prefer, while children were young (pre-school age), to stay at home full time or to work part time, with the primary driver being to spend time with their child. This was because they enjoyed being with them or thought it the best option for their child.

Impact on return to work / hours worked: this driver appeared to be a key determinant of the timing of the return to work and the number of hours or days for which they worked. However, there were some respondents who would have preferred to stay caring for children but were not able to because of financial imperatives.

Attitudes towards child care in general (i.e. is it beneficial?): There were mixed attitudes towards child care and how beneficial it is.

None of the respondents were 'rejectors' of child care and this sample was obviously skewed towards carers who were already using it or planning to, so is not representative of all the views that non-users or rejectors of child care might have.

A large majority of respondents appeared to see some form of child care as beneficial to a child once they (the child) reached an age of needing socialisation experiences or educational or developmental experiences. The age at which this started to be seen to be of benefit and the type of benefit did vary, for example some respondents thought it best for babies or toddlers to be at home, others thought Family Day Care was a better option for babies than Long Day Care (due to more one on one care being possible). Another group thought that Long Day Care offered less risk of safety and/or abuse risk and that this outweighed other potential benefits of Family Day Care.

Some Long Day Care users saw there being a significant benefit of structured educational or development programs of value once a child reached toddler age, others thought this beneficial once they approached school age only.

Impact on return to work / hours worked: The different attitudes held towards child care in general and the different attitudes towards each form of child care did appear to have had an impact for many on the timing of their return to work (for example, some who thought child care not ideal for babies or toddlers had not returned to work until their children were at preschool or school age. Others had returned to work anyway, due to for example, financial pressures or risk to future employment prospects).

The attitudes also impacted for many the number of hours or days per week that they worked or used paid child care. For example, some kept their working or studying days part time to minimise the use of care or used a grand parent or relative to provide a more preferred form of care for one or two days a week.

► Their financial situation or financial imperatives: This factor appeared to have had impact on both the timing of the return to work and the hours / week worked. A key factor here was whether personal finances allowed the carer the choice of not working.

For some there was or had been at times no choice but to work to cover household costs. For example, some respondents were single parents or main income earners and relied on their work income. Another respondent had planned to stay home but had returned when her child was six weeks old due to her husband's ill health.

For others, finances had allowed a choice or some degree of choice of when to return to work. For example, several respondents had partners or spouses who were working and some were single parents receiving welfare support payments.

For those with choice, the decision made had varied; some had chosen to care full time for the children until school age, others had chosen to start work or study sooner.

The choices made and their timing appeared to be related to a number of potential factors, such as:

- o The desire to generate more income
- o The general attitude as to the benefits or weaknesses of child care (i.e. a belief that parent is best option or care is not good enough)
- o The extent of desire to be with their child
- The attitude towards their career or job (i.e. the extent of desire to return to work);
- o The perceived attitude or actual flexibility of employers (e.g. whether an employer makes it easy to return to work part time or continues to provide career prospects)
- The availability of acceptable or convenient care (e.g. some wanted occasional care but found it difficult to find, others had to wait a long time for a place at a preferred Long Day Care centre);
- o The actual cost or affordability of child care.

Impact on timing of return to work / number of hours per week worked: The financial situation of the household would appear for some to have an impact on the timing of return to work and the start of use of child care.

However, the decision for many is not a simple one of finances; it is far more complex involving considerations around parenting values, personal fulfilment desires, employment opportunities and overall attitudes to child care.

Even when finances allow some to make a decision to delay the return to work or puts pressure on others to return to work, the decisions made by different groups of parents in similar situations appeared be different.

- ► The age of the child: Amongst this group the desire or motivation to return to work appeared to increase as children got older.
- The availability of acceptable child care and family/community support around them: Those who had found child care (formal or informal) easily accessible and of a quality they were happy with, appeared more comfortable with working again or increasing their hours.

Often this included some care time with another family member (grandparent, aunt or a trusted friend).

The main reasons given by respondents for returning to work were:

- Financial drivers: A significant number mentioned this as one of the main reasons. Typically, the drivers were to pay rent, mortgage or bills. For some the imperative was that they were the sole or significant contributor to the family income. For others their role was less significant, but they wished or needed to contribute to maintain the family lifestyle or support a partner.
- Personal fulfilment drivers: A significant number across all the SES groups gave these types of drivers as important motivation for returning to work. Specific examples included:
 - A desire for mental stimulation beyond just the children
 - A desire for social interaction with adults
 - A desire to progress in a career (this was more likely to be mentioned in AB + C SES groups)
 - To continue with an enjoyable job
 - To have time alone
 - To reclaim one's own life beyond that of solely being a parent
- ► <u>To maintain future employment prospects</u>: This was mentioned by a smaller but significant group across SES groups.
 - By studying (e.g. a number of unskilled respondents or part skilled were retraining or completing training)
 - By staying up to date with skills
 - By protecting long service rights/job rights

- ▶ <u>To provide a child with a better developmental opportunity</u>: This idea tended to be cited by parents of children beyond the toddler years. Examples were:
 - More social interaction (socialisation was seen as a benefit provided by Family Day Care and Long Day Care)
 - Development of pre-school /school readiness skills (This tended to be cited by Long Day Care users)
 - Help for children that are behind developmentally (e.g. language skills)

Implications for broader modelling or Quantitative Study:

- 44. Modelling carers likely behaviours as they relate to child care choices will be a multidimensional task.
- 45. Parents and carers differ in terms of the factors, attitudes, beliefs and circumstances affecting what they do and what they believe.
- 46. 'Quality', 'affordability' and 'accessibility' of child care are three parts of a more complex jigsaw.
- 47. **Recommendation:** Consider the need for further studies to better understand how parents segment or vary across a number of the above factors and motivations. Develop a better picture or model of how these impact on current child care choices and potential changes in behaviour should government alter some factors.

5.2 The barriers to returning to work

Respondents discussed what they saw as the key barriers to them returning to work, once a decision had been made to return and use some form of care. Once a parent was comfortable / had made a decision to try to return to work using child care, the perceived barriers for the mother's return to work were:

- For a few in this sample, the expense or cost. This tended to be more of an issue for the moderate or lower income earners who weighed up the cost of care versus the income they would earn.
- The location not being convenient (typically this was an issue for some using long day care)
- Lack of access: long wait lists for centres with good reputations (this was mentioned in the Melbourne and Sydney groups)
- A small group thought that long day care options were of poorer quality in lower SES areas.
- ▶ These 'barriers' had either delayed a return to work or had led to the use of a less preferred are option in the short term.

Other barriers to returning to work in general or to use child care for longer hours were discussed and these discussions highlighted issues that were related to: attitudes to child care in general; employer related barriers and parenting values; negatives or fears associated with child care in general. These could be described as quality related issues.

Other barriers in detail:

Negatives and fears associated with child care in general

- ▶ Safety fears about child care (some, although using care still worried that their children were at more risk of harm when not being cared for by their parents or relatives).
- Emotional feelings: attachment to child or guilt about abdicating responsibility to another person/ people who won't give the child such good care as a parent.
- A general belief that full-time care (i.e. five days a week) is not good for children. For many respondents, part-time formal care seemed to be the preferred option.
- ▶ Having a child who may not be suited as a person to formal care.

Parenting 'values' related barriers:

- ▶ Emotional feelings: attachment to child or guilt about abdicating responsibility to another person/ people who won't give them such good care.
- A belief that some one on one time with a significant family member or friend is always the best option.

Employment / Employer related barriers:

- A lack of self confidence regarding having adequate skills after being away from work for a time. (This was mentioned by those with older children.)
- Worry about the personal ability to cope with the demands as a parent as well as the expectations of employers.
- Lack of workplace flexibility around hours, work or the sick leave one may need to take for children.
- Fear of a child being sick and them having to be left in child care due to a parent's work pressure.
- Casual work not being suited to getting child care access on occasional basis.
- Expectations of being treated as of less value by employers once becoming a parent.

Implications for broader modelling or Quantitative Study:

- 48. The barriers to using (more) child care would appear to be multidimensional. Whilst quality related issues are relevant, so are broader issues surrounding workplace / employment flexibility and prospects; fundamental values about parenting and attitudes to child care.
- 49. It was perceived by several to be difficult to be an acceptable and welcomed employee, as well as a 'good' parent and healthy individual.

5.3 Perceived likelihood of returning to working for similar hours as prechildren's arrival

Respondents were asked what they thought they would be doing from a working hour's perspective over the next 5-10 years.

Some were already working full time and thought they probably would continue to do so. Most predicted they would be part-time for some years or always.

Views and desires relating to this were mixed and appeared to some degree to be related to the age of children (High school or primary school start ages in particular for the youngest child tended to be a time for review of work situations).

Overall the desires and expectations of many of this group of respondents appeared to be that they would remain working part-time for at least the next few years.

For some, this scenario appeared to be their preference and was related to a desire to have time for the children and to avoid excessive pressure or demands that working full-time was anticipated to bring to them and the family.

For others it was not their preference but they felt prevented by limited job opportunity or high cost of care, versus the income they could earn. (This tended to be low to moderate income earners or those who had been 'unskilled' when children were born).

Several anticipated they may return to full-time work once (youngest) children were at primary or secondary school.

A small group was working full-time. This appeared to have been driven by one of the following: A financial need (e.g. a husband's illness); a desire to pursue a career (higher income earners); inflexibility of work type / employer to support part-time work.

Implications for broader modelling study or Quantitative Study:

- 50. Part time work appeared to be the personal desire for many and hence quality improvements may not drive greater use of child care.
- 51. A group of parents exists that do not desire to move from part-time to full-time work in the short or medium term. There may be a need to identify them via attitudinal questions in the survey, in order to factor this desire into their responses.
- 52. For example if you wish to measure impact of higher quality standards on the willingness of women to work longer hours you may find some women are not affected solely because they already work as much as they want to.
- 53. You could have a question in the questionnaire around the number of hours now worked / number of days and whether that is too much, too little or just right (or something along those lines). You could then identify those that would like to work more and ask questions around what is inhibiting them and also analyse choice modelling results by these segments.
- 54. A group does exist that <u>desires to work more hours than currently</u> (but does not do so currently for some reason). It may be valuable to identify these respondents and factor this into the analysis of their responses, in order to measure the impact of your chosen factors or options on their predicted behaviour. You could then profile them as a group.

5.4 Choosing a child care option: the factors driving choice

Having made a decision to use some form of non-family or paid child care, a number of factors driving the choices made were found to be common across the sample.

The most important factors or criteria that respondents said they took into account when choosing the child care option for their child were:

Most commonly mentioned:

- ▶ The convenience of location (typically they wanted a place close to home or to transport for work for preschool children. For school children this ideally meant a location at the school or close by).
- ► The safety and security of the place of care. Most assessed this themselves as well as anticipating regulations being compulsory for formal care.
- ▶ Their impression of 'soft' or qualitative factors relating to: atmosphere; personal interactions between carers and children; degree of affection /attention and nurturing care given.
- The look and feel of the place (e.g. is it light and bright and roomy? Is there a good outdoor play area? Are there lots of stimulating things for kids to do?)
- ▶ Ratios of children to carers. The more carers to children the better, especially for preschool age children. Family Day Care users saw this as a benefit over Long Day Care centres.
- Availability and type of food provided. This was used in the assessment of quality of a centre and also to gauge value for money when comparing options.
- Programs offered (this tended to be specific to long day care centres whose users were more likely to mention these, although they were not usually described as 'educational' [see later]).
- ► The structure of the child's day (how well structured, how age appropriate, how engaging)
- ▶ Whether the children seem happy and most importantly once using a centre, whether one's own child likes going.
- Past experience with a centre, i.e. if have had other children in that centre and they have been happy.
- Recommendations by peers.

Measuring/Determining satisfaction

Additionally the main measures used (once using a particular child care option), to determine if the service was delivering on their hopes and needs, were usually child outcome based.

Typically the key measure was the happiness or progress of one's own child. The form of progress was dependent on needs for that child.

Other ways of determining satisfaction tended to relate strongly to the amount of one on one attention children received and the degree to which caring bonds or relationships developed between their children and carers.

Implications for broader modelling study or Quantitative Study:

- 55. The quality factors intended to be used in the quantitative study would appear to be relevant but are not exhaustive.
- 56. They exclude some key 'soft' factors that may be difficult to measure but will need addressing in some way so that respondents believe the questionnaire is a real world scenario.
- 57. For example you may need to say that they have to "assume that you are happy with other aspects of the centre that are important to you..."
- 58. The importance of location to so many respondents would indicate that you may need to either include this as a factor or ask respondents to assume it is not an issue as in the above example.
- 59. Since the real way that parents would seem to assess a choice once made is related to their own child's experience and the effect on them, this suggests that any communications strategy that DEEWR might develop to promote quality related regulations, should focus on the beneficial impact on a child directly e.g. focus on the benefits to the child, rather than the features of: higher carer child ratios; higher safety regulations; more qualified staff; smaller group sizes etc.
- 60. Consider if it is possible to measure or regulate in these 'soft' areas.

5.5 Defining good quality child care

Typically when asked how to define it, respondents defined good quality child care using the same criteria that they had used to choose their child care option.

In the main, the quality factors currently envisaged being used in the quantitative study were included, with the exception of "group size".

In summary, the key elements (using respondent terminology) were thought to be:

- 'Personalised care' 'one on one treatment'
- 'High degree of attention for my child'
- 'Qualified staff' or 'experienced staff'
- 'Great staff' (i.e. nurturing, motivated, with good working conditions)
- 'Good supervision of and engagement with children'
- 'Specialised age group structure' (long day care users)
- 'Published policies and values' (long day care users)
- 'Good educational and child development programs' (long day care users)
- 'Structured' or 'planned days'
- Mixture of child driven and structured activities
- 'Happy' environment
- 'Good communications': Effective / open / 2 way communication between parents and carers
- Nutritious and high quality food (if provided)

Variations in quality assessment criteria by age of child

0-12 months / babies

- Typically this age group was thought to need a higher level of personal attention and a higher ratio of carers to children.
- ► The type of care ideal was described in terms of 'nurturing' and 'protecting' and 'replicating' care at home.
- Carer qualifications were often thought to be less important than their experience with looking after babies.
- Flexibility around the child's needs were thought to be important (e.g. nap times, feeding)
- A quiet place to sleep was also important
- A need for more detailed reporting and communication regarding the baby's day (e.g. when they slept, ate, number of nappy changes etc.)
- A need for skills to avoid infant problems like nappy rash etc

1-3 years

- ▶ The type of care ideal here was described in terms of 'socialisation', 'personal attention', 'lots of activities', 'fun' and 'eating well'.
- ▶ Carer qualifications appeared to be becoming more important to some respondents.

Pre-school age children

- ► Care ideals here included programs for preparation for school and for some respondents; literacy and numeracy programs.
- Qualifications held more importance for many respondents.

Before and after school care

- ► Care ideals here centred on: convenient location: nutritious snacks and fun time after school.
- Less staff was thought to be needed and qualifications seen as less important.
- ▶ Some were interested in extra-curricular activities e.g. sport or music lessons.

Implications for broader modelling study or Quantitative Study:

- 61. The respondent's definitions of a quality child care offer were broadly similar to the proposed model factors although some things were missing.
- 62. When respondents were asked to think about "quality", the 'hard'/measurable factors (e.g. staff ratios and education programs), were more to top of mind than in previous discussions
- 63. There would appear to be some variation in factor priorities connected to the age of children.

5.6 Ideal child care scenarios

Respondents were asked to describe how child care could be a more ideal scenario for them or their child.

Typically, several of the responses did relate in some way to the kinds of factors that are being considered for inclusion in the quantitative study (in particular; child: staff ratios and staff qualifications).

However, many in this sample were satisfied with the child care option they were using and it did not appear that they were dissatisfied with the degree of quality they were currently getting.

The typical factors going to a more ideal child care offer were: (in no order)

- ▶ One on one care (especially for a baby and a nanny was often cited as the ideal)
- ► Fewer children to each carer
- More qualified or experienced staff
- More affordable child care
- Easier access / more child care centres
- More occasional care for casual / self employed workers
- Extra programs or activities for child development
- More communication / interviews to review child's progress
- ▶ 52 week availability of care (i.e. no holiday closures)
- Better hygiene/cleanliness

Implications for broader modelling study or Quantitative Study:

- 64. Amongst this sample of users the expressed level of satisfaction with the child care option chosen was high overall. Quality did not appear to be a top of the mind issue or problem.
- 65. This may have implications for the broader modelling the quantitative stage and any DEEWR strategy. If this satisfaction is indicative of a large group of the population of child care users, users may not see improvements in the quality factors currently under consideration, as a motivation to use child care more or to pay higher prices.
- 66. If the department wishes at some point to use their regulatory control over these factors to drive more use of child care, they may need to: communicate with / educate child care using parents, so that they recognise the benefits of these quality factors.
- 67. Additionally, non-users or limited users of child care may actually become a primary target to drive increased child care use and more return to work. There would be a need to educate and communicate with them to allay concerns about quality and to demonstrate the benefits of regulations and quality improvements.
- 68. If this is a possible scenario then it suggests that the quantitative study and any other future modelling should aim to identify those who are non users of child care due to concerns about 'quality' factors. It will then be possible to model how their attitudes and behaviours might change should quality be 'improved'.
- 69. It also suggests it could be valuable to collect information about parents' attitudes towards child care during the next quantitative phase. This could take the form of a set of statements. Responses could be used to profile who is the most sensitive to quality changes and to develop some hypotheses around parent typologies / segments as they relate to child care and working.

5.7 Differences in needs between users of different types of child care

The primary desires relating to quality were similar across different types of care. A small number of differences and potential points of interest were emerging:

There was an apparent low awareness (by long day care users) of how family day care operates and is regulated:

- Several long day care users appeared to not have considered family day care as an option or to have dismissed it as a poor quality choice.
- Most appeared to know very little about how it operates and assumed there is little regulation. They often saw it as a more risky / less safe option.

Whilst a small group had used or investigated both family day care and long day care early on in the decision making process, typically they then went on to explore the local options available within that one type of care chosen.

Family day care users appeared to tend to want a more home-like care situation and hoped for close bonds between carer and child. They welcomed the at-home style activities and structure such as shopping and going to the park.

Long day care users tended to see some safety or risks to these elements of family day care. They preferred the idea of multiple adults and an enclosed, secure environment to deliver more perceived safety and less risk.

Long day care users tended to see long day care as better suited to provide programs / structure, which some sought, especially for toddlers and older children.

Implications for broader modelling study or Quantitative Study:

- 70. Is there a need to increase awareness of and education about the benefits of family day care and the way it is regulated?
- 71. Would this be a strategy to encourage more use of child care?

5.8 Perceived importance of quality factors being considered for quantitative study

Respondents explored a number of factors and descriptions planned to be used in the quantitative choice making study.

The following were discussed in detail:

'Group size'

'Staff: child ratios'

'Staff training & qualifications'

'Educational programs' (e.g., play based, literacy and numeracy, Pre School, kindergarten)

'Space'

Overall, these elements of quality were all thought to be important and relevant to parents and to be indicators of the quality of a child care option or service.

Looking at each in more detail:

'Group size'

This factor was thought of value in driving and determining quality but the meaning was unclear for some.

Typically in long day care this description was assumed to mean the number of children of a similar age group placed together in the same space, or in a room or class.

For family day care this was assumed to mean the total number of children in a home/setting.

However, it also suggested to some, the total number of children in a centre or a grouping of several age groups in a single space (room).

'Ratio of child to staff/carers'

This description was well understood and definitely seen as a key measure going to the likely quality of a centre and satisfaction with it. It tells you how much attention children are getting and how many staff there are to go around. It could be an indicator of staff stress. The link to quality was easily made. However, the assumption by most respondents was that all staff included would be carers i.e. all interact with the children, which may not be the case. If this ratio also includes administration and management this may need clarifying in the questionnaire.

'Staff qualifications and Training'

This was taken to mean: Staff specially trained in early childhood or Pre school programs. It was considered important to know, a contributor to quality care and to provide confidence in a child care choice.

However there was considerable discussion about the importance of this factor compared to that of 'experience' i.e. the amount of experience a carer has looking after children. Experience was thought by all be important and by some respondents, to be of much more importance than qualifications, especially for babies and the very young.

There were mixed views as to which was more important. Interestingly it appeared that some family day care users (tending to be those with babies), had chosen their carer in part because the carers were experienced mothers rather than young women who may have qualifications but limited experience.

Others thought staff education and qualifications were more important. Typically this was due to safety concerns (e.g. would a carer know what to do in a health emergency?), or a view that as a child becomes older they benefit from some carer expertise that is learned via education rather than via experience (e.g. trained carer having a better understanding of child developmental stages or how to develop an age appropriate program).

Respondents were looking for a mix of younger (more energy) and older carers (more wisdom / patience).

Additionally, there were very mixed awareness levels of the kinds of formal child carer training programs that exist and what the training qualifications for carers are.

Many using long day care appeared to have developed an understanding of these qualifications <u>after</u> their children first entered long day care. The understanding and awareness levels of required or possible qualifications appeared even more limited amongst family day care users.

Police checks were thought to be very important for all carers.

There was a general perception that not all carers need to be qualified, as long as some are.

'Space'

This was thought to be about space in rooms and size of outdoor play areas. It was considered important but not as important as ratio/group size. Some had taken this into account when choosing care.

'Educational Programs'

This was thought to include: developing fine motor skills; school readiness; reading; numeracy; child driven programs. Some were very interested in this area, others not. All wanted age appropriate activities or planned programs even if they were play based or child driven.

Perhaps this appeared of more importance to some than the staff education and training, because this is what they actually see delivered to their child.

It appeared that this was a category where there was variation in parent awareness and also in education levels around child benefits.

Family day care users appeared to know the least about formal programs.

5.9 What were the perceptions regarding to what degree these factors drive quality?

It was thought that all were important, relevant and went to quality outcomes for child care.

The child / carer ratio was probably the single factor most agreed upon in terms of being a high priority factor.

The "group size" term could be seen as vague in meaning and the "educational programs" were of less importance to some and will need clarification of what you mean in the questionnaire.

Other important factors in identifying good quality were thought to be missing. In particular:

Missing factors

- ► The amount of child care experience that staff have
- ▶ The degree to which staff are caring and attentive towards children.
- Whether food is provided and how nutritious it is.
- Adherence to safety and security standards.
- Good hygiene and cleanliness
- Facilities and amenities at the centre (e.g. size and layout of outdoor play areas, play equipment etc; including how well maintained it is).

Implications for broader modelling study or Quantitative Study:

- 72. All the currently planned quality factors for the model were found to be of importance.
- 73. However, 'staff experience' was probably the most significant of the missing measures found to be important (E.g. number of years worked with children / in child care). It appeared to be an important component of quality assessment in the minds of many. Hence may be a need to consider including this as an additional factor in the quantitative study and if relevant in future refinement of any accreditation requirements for child care workers.
- 74. For the other missing factors: there may be a need to consider including some of the above missing factors or if not, to set a context for the questions such that respondents assume that the options they are considering have adequate or equal standards in these other important areas.
- 75. It would seem that an opportunity exists for government to improve general parent awareness of the value of formal carer education / training, since the perceived value appeared variable amongst this sample.
- 76. It would seem that there is also an opportunity for government approved / accredited early childhood educational programs in order to increase parent awareness of the potential options available and their value to children.

5.10 Respondent definitions and vocabulary relating to cost and affordability

Describing 'Price' and 'Cost'

The ways in which respondents defined and described cost and price of child care were explored.

The respondents' terminology and approach did vary.

Many appeared to think of the price as a daily figure, i.e. \$50/day, particularly those using long day care.

Some of those using family day care tended to be more likely to talk about price as an hourly figure.

A smaller group thought about price as a weekly or monthly figure.

In summary, only a small group appeared to think unprompted of the price or cost from an hourly perspective.

Calculating the 'cost' and 'affordability'

The approach used to calculate the actual cost and affordability was explored.

Most, when asked how much they paid currently, tended to quote the full daily price paid to the provider (some quoted it after the Child Care Benefit had been deducted at source).

However, when asked how they had calculated whether an option was <u>affordable</u>, they tended to talk about considering weekly or monthly figures.

Only a small group appeared to factor in the out of pocket expenses tax rebate in any 'price' calculations, although it was relevant for affordability for some.

Those from SES groups CD + E, appeared to be more likely to describe the assessment of affordability of child care from the perspective of determining whether it was 'worth their while returning to work' i.e., whether the costs would cover their income and related expenses.

The out of pocket expenses tax rebate did effect the affordability assessment of child care for several across all SES groups i.e., it had impacted on whether they returned to work or for how many days or hours they returned.

Implications for broader modelling study or Quantitative Study:

- 77. It would seem that an hourly rate is not the most typical way for many to compare prices and so if used this it may need additional clarification / information in the questionnaire. For example, clarifying the maximum daily or sessional charge might make it a more realistic choice exercise.
- 78. Alternatively, it may be worth considering using a cost per session as that fits better across different types of care.
- 79. Additionally, it may be useful to clarify the price quoted is the full price (i.e. excluding any benefits / rebates or whether it is out of pocket expenses only). Otherwise, it may get too complicated for respondents.

5.11 The impact of cost/price on choices they had made

Some respondents admitted to having made choices based primarily on cost. For example one respondent had opted for family day care because it was cheaper; several respondents admitted to the preferred option of a nanny as being too expensive and another did not consider certain long day care centres due to price.

Most said they placed their child's happiness or the quality of the choices open to them as the primary determinant of the care choice they had made. However, in reality this usually meant a choice made between options available within an already pre-chosen type of child care.

For example most had made a decision about a type of child care they preferred and then had compared the provider options and prices within that type.

It would seem that the price does play a role in some decision making.

Once a type of care and some kind of budget had been decided on, cost and price in the mindset of many respondents appeared to have had more of an impact on the number of days they put a child into paid care, rather than the provider chosen.

It appeared less likely to be the primary driver of carer or day care centre choice. For example, grandparents might be used as an alternative for one or more days, if the cost was too high, or a parent might work less hours or from home more.

However, it was apparent that the care costs of multiple children could be a significant burden. The researchers would hypothesise that there might be even greater impact of price on decision making (about choice of care type, the number of hours or the timing of return to work), for parents with more than one child.

Would access to better quality care increase the use of child care?

As discussed earlier, this question although explored briefly in some groups appeared irrelevant to most that tended to say they were happy with the care provided.

Some, in the AB SES group thought that they would pay more if they could really access significantly better quality child care. For some it had similarities to the reasons why some parents pay more to send a child to a private school.

Implications for broader modelling study or Quantitative Study:

- 80. It may be valuable to consider exploring or measuring the perceived impact of cost/price on the willingness to work for longer hours or the timing of the return to work.
- 81. It will be important to gather data on number of children and measure how affordability / price impacts on decisions when the number of children varies.

5.12 Selection of Quotes

Motivation to return to work or to use child care..... and assessing if worthwhile financially

- "I didn't have a choice; my husband had an accident when my child was six weeks old"
- "I have to go back to pay the mortgage"
- "To keep my foot in the door ... keep up my qualifications"
- "It's not enough to just clean the house, there's some other drive inside me ... I want to achieve something in my life ..."
- "When my two year old goes to school I want to be able to work as a nurse"
- "It's been my career for 15 years, it's part of who I am"
- "There are a lot of benefits for kids socially"
- "I add the rent, the car repayment and child care costs and see if it's worth working, with what's left"
- "I felt isolated in a rural area ... there aren't neighbours for them to play with"
- "I got free child care so it was really worth it"
- "I was going to pay half of my wages in child care and Centrelink said that I'd be better off not working"
- "I couldn't stand being at home all day by myself and it was good for the kids socially"

Impact of Quality/ Price on choices

- "When we dropped him off \dots no one received him \dots they were just talking \dots eventually I took him out" (long day care user)
- "There is one just a walk away from me that is cleaner, the food is good, it's more expensive but there just aren't enough carers" (long day care user)
- "No, it was the quality, the atmosphere and the safety. I did not ask the price because I assumed they were all the same" (long day care user)
- "If he wasn't happy I'd move him" (long day care user)
- "I'm willing to pay more, but for the people ... the atmosphere" (long day care user)
- "I have compromised because I'd prefer a Nanny but I don't use one" (after school care user)
- "It wasn't my main consideration ... it came into the decision, but it was more the atmosphere ... the more expensive place was less friendly" (long day care user)
- "You hope that they'll treat your kids like their own, but at the end of the day they are running a business. As parents we just want the best, I still don't think that they'll get the best as they would at home"
- "My carer does lots of training and has all the programs....I looked at day care centres but they were very expensive" (Family day care user)
- "It's just like having a special Auntie....she won't leave until she has given her a kiss..." (Family day care user)

5.13 Overall learning from the choice model exercise undertaken in the groups

Reactions to quality components as current defined / scoped

Respondents were given an example of choice model question to answer (see Appendices) in order to explore the comprehension of the task and terminology and to see if any aspect could be improved in any way.

a) 'Type of child care'

("Long Day Care Centre", "Family Day Care", "Before / After School Care")

Comprehension / Interpretation:

Overall the descriptions used worked well and were clear. However, a very small group did not attend to the different descriptions and assumed they were comparing a set of similar care types.

A small group (of those who had very young children or had not wanted after school care) did ask for clarification about the meaning of "Before / After School Care".

Relevance to choice process:

Most already had a preferred form of day care in mind for a particular child – so multiple child care types were not very relevant in a single question. However some were choosing between two types, typically long day care or family day care.

Implications for broader modelling study or Quantitative Study:

- 82. There is likely to be a need for a simple description or definition of each type of child care to ensure clarity.
- 83. Possibly worth using a summary / definition set early in questionnaire to explain the different child care types.
- 84. Consider having some questions that only focus on decision making once a preferred type of care has been chosen.
- 85. For example:

Since many seemed to be choosing between providers of a similar type of child care, it may be better to identify those who have made a type of choice (or allow them to define the combination they are considering between) and then offer them choices for that type in isolation to other care types. (This appears particularly relevant for after school care which is not an option for pre-school children).

For example: Typical after school / pre-school option might be between:

- Out of hours provider at school and a Private Nanny.
- 86. Having a long day care centre as an option may make the scenario seem unrealistic.
- 87. Consider adding occasional care as another option type.
- 88. Consider an 'idiot proof' approach for example such that no one can choose an inappropriate option (e.g. before / after school care if their child is a preschooler).
- 89. There is a need to make the price and number scenarios as realistic/close to real life options as possible.

b) 'Group size'

<u>Comprehension / Interpretation:</u>

As found earlier in discussions, this was slightly variable but typically this was thought to mean the number of children grouped in an age group together in a day care centre or the total number of children at a family day care centre. Some thought they might want to know numbers for the whole centre, i.e., for "50 kids and 5 carers".

Some wanted to know in addition how many carers there would be in the group.

Relevance to choice process:

Yes, as before this was agreed as being relevant to decision making.

Implications for broader modelling study or Quantitative Study:

- 90. A need for a definition in the questionnaire to clarify what you mean and if this varies by type of care.
- 91. A need to make sure the group size numbers are all realistic options for all types of care, otherwise it won't be a credible scenario and serious attention to the question may be put at risk.

c) 'Child/Staff Ratio'

<u>Comprehension / Interpretation:</u>

This was a clear idea and well understood. It was thought to mean the 'maximum' number of children to each staff member. It appeared that the assumption made by most was that these staff members included would just be actual carers rather than administration or management staff.

Relevance to choice process:

This factor was thought to be very relevant but its priority to vary by child's age. Additionally, in family day care the typical ratio was anticipated to be lower. For before and after school care the ratio was expected to be higher. It will be important that the ratios are not unrealistic for the child care types other wise, respondents won't attend or take the task seriously. There was also some discussion and lack of clarity around whether parents would really need to consider these themselves as ratios was thought by many to be regulated for already.

Implications for broader modelling study or Quantitative Study:

- 92. The actual ratios need to be credible for the type of child care types being considered.
- 93. A need to ensure there aren't really unrealistic options available e.g. high ratios for babies etc.
- 94. This factor is more likely to have a high degree of importance in relation to their real life quality assessment but will respondents really take this factor into account when completing a questionnaire if they think that all the options offered in the question meet minimum regulations?
- 95. It may be worth considering highlighting the minimum regulations and stating if an offer exceeds that.
- 96. Alternatively, you may need to clarify if there are regulations that cover this or confirm that all meet minimum regulations.

d) 'Hourly rate'

There were mixed views about the relevance of an hourly rate dependent upon the type of child care. Family day care was thought to be most likely to be charged at an hourly rate. Long day care tended to be paid for as a sessional or daily charge. Before and after school care tended to be paid as either hourly or sessional.

Relevance to choice process:

This factor was thought to be relevant in a child care choice decision making process.

Implications for broader modelling study or Quantitative Study:

- 97. Hourly rates will probably be ok to use if required <u>but</u> there will be a need to give a maximum rate for a session too, in order to make it seem more realistic/credible.
- 98. An alternative could be to show a maximum cost per day.
- 99. There will be a need to clarify if you wish respondents to consider the rate as the full price or after benefits / rebates i.e. is it an out of pocket expense or not?

e) 'Educational Programs'

<u>Comprehension / Interpretation:</u>

This was fine during the exercise in the group (however it had been prompted and discussed earlier in the group). This had already highlighted that there are likely to be varying levels of awareness of the different programs that you will be referring to. This may mean that overall comprehension is lower in the quantitative study.

Relevance to choice process:

This was variable and tended to seem more relevant as children's age increased. There appeared to be more relevance for long day care users.

After school users appeared less interested in this factor, although the sample of parents was very small. There were mixed views as to whether after school carers have to be qualified.

Implications for broader modelling study or Quantitative Study:

100. Since understanding may not be clear for all respondents there will be a need for a more detailed description of the types of programs that you are thinking of.

f) 'Staff qualifications and Training'

Comprehension / Interpretation:

The comprehension and understanding of this factor was good. Although as discussed earlier, awareness was variable of the details of the actual qualifications available to staff and/or required by regulations.

Relevance

As discussed earlier this factor was considered of value but variable in terms of importance to different respondents. Some respondents placed higher value on other aspects related to staff such as their experience levels.

Implications for broader modelling study or Quantitative Study:

101. It may be of value to clarify any current minimum regulations if they exist and to provide a more expansive definition of this factor.

5.14 Choice model exercise: missing quality components

Some important quality components were missing and this appeared to reduce the 'real-life' feel of the task.

The key components missing were the 'soft' measures as discussed earlier in the groups (i.e. caring style, attention levels given to each child, centre atmosphere etc).

Other missing components were:

- The food provided (if provided and if not)
- Nappies (if provided and what type)
- Safety (does it meet regulations, is it safe, secure, hygienic?)

Implications for broader modelling study or Quantitative Study:

- 102. There is probably a need to get respondents to set aside other factors you aren't including in choice model exercises
- 103. For example you could say "Assume you are satisfied with all other factors you might use to make choices". Or, "Assume that you can get a place, it's a good location, and they are equivalent to each other in the areas of: safety, food etc, staff style".

6. APPENDICES

Appendix 6.1 "Choice Model Exercise Sheet"

Example Questions

1		P	lease	deta	il	:
---	--	---	-------	------	----	---

The age of child you are considering when answering the questions below: -	
The number of hours they are/will be in care per week:	
The type of care:	
How much you are currently paying (if applicable):	

2.

If these were your only child care options, which would you choose?

Each option is shown in a column. Choose by ticking one of the circles at the bottom.

You may choose 'I would not choose any of these' if you would not want to use child care for your child if these were the only options available.

Type of child care	Child Care Centre (Long day care)	Child Care Centre (Long day care)	Before / after school hours care	Family day care		
Child Care Costs	\$15.00 per hour	\$12.50 per hour	\$3.75 per hour	\$7.50 per hour		
Group Size: (Regulated maximum number of children in a group)	24	16	16	8		
Children:staff ratio (Regulated minimum number of children per staff member)	8 children for each staff member	12 children for each staff member	12 children for each staff member	8 children for each staff member	I would not choose to	
Qualifications of staff (Minimum regulated qualifications for staff)	A four year qualified teacher in each centre	A four year qualified teacher in each centre	Unqualified - experienced staff	A four year qualified teacher in centre, plus • Half of staff have diplomas • All others have certificates	place my child in any of these.	
Education program	Programs available: Play based programs (child: under 2 yrs) Literacy and numeracy programs(child: 2+ yrs) Formal Preschool program (child: 3+ yrs)	Programs available: Play based programs (child: under 2 yrs) Literacy and numeracy programs(child: 2+ yrs) Formal Preschool program (child: 3+ yrs)	No education program available	No education program available		
	0	0	0	0	0	

Appendix 6.2 "Group Discussion Guide"

DEEWR - Child Care Choice Group Discussion Guide VIII (9/12/08)

Topic	Time
Introduction to research	5 mins
Explain topic (child care choices and returning to the workforce after having children)	
Explain confidentiality and group processes	
Seek permission to tape group	

1. Respondent introductions / warm up

15 mins

(Aim of this section is to encourage participants to feel comfortable in discussion with each other and to enable us to develop typologies around parents).

Split group into pairs and ask them to introduce themselves to each other covering the following points. At the end of the session, each pair will introduce the other person to the group based on information gleaned.

(Get respondents to fill out sheet to cover below whilst interviewing each other)

First name

Number and age of children

Current participation in workforce (whether working; number of days worked; role / type of work undertaken and planning to undertake)

Age of child(ren) when returned to paid work

Type of childcare using (if appropriate)

Cost of current child care set up

Best and worst thing about working after having children – either real (if working) or imagined (if not yet working) - what really like, what really dislike or find difficult

Partner's participation in workforce if applicable (whether working; number of days worked, role / type of work undertaken)

Current child care arrangements when in paid work outside the home (if applicable (whether different forms used; main form used)

Level of satisfaction with main form of child care used (overall; best and worst thing about it)

Time check:

20 mins

2. Motivations to work

7 mins

(Aim: Goes to context and parent typologies)

Explore briefly reasons for working after having children and degree to which they split into 'have to' versus 'want to'). After identifying range of reasons for returning to workforce, encourage each respondent to nominate the one main reason for returning to work.

Do they think they will ever return to work for the same amount of hours that they used to pre children? Why/ why not? Would they like to?

What do they think their hours of work will be for next 5-10 years?

3. Choosing child care

25 mins

(Aim: To describe decision process involved in choosing child care in participants' own words and to identify all the factors that drive and influence choice). This is a key section of the discussion and starts in a broad, unstructured way (by allowing participants to tell the story of how they chose child care), followed by funnelling of discussion / probing in key areas including quality and price.

(Moderator to get respondents to focus rest of discussions on one of their children (aged 7 or under) in the main, via assigning the focus child to them such that the group has a spread of focus children in terms of child age and type of care)

Encourage three to four participants to tell the story of how they went about choosing child care for their focus child (ren) so they could go to work. Start with unprompted discussion and note any reference to issues that relate to quality or price. Ensure the following points are covered.

Trigger: When started looking at child care options; why at that point in time?

Options /facilities considered (what, how many, why those types?)

How went about deciding which options / facilities to consider (information sources, role of recommendation / endorsement etc.)

What types were not considered? Why not? What types were considered, but rejected? Why?

Factors influencing choice (What were you looking for? What was essential? What was important? What was a nice to have?)

Drivers of choice (Why did you choose that particular option? Any other reason?)

Once a couple of participants have told their child care story, encourage other participants to contribute in terms of similarities or differences re own child care selection processes.

Encourage group to summarise key factors that impact on child care selection (using participants own words) and write these factors on white board.

Explore what their ideal childcare option would be if they could have best of all worlds (expand beyond just a price discussion if necessary)

Time check: 50- 55 mins

4. Drilling down into key factors of interest – quality considerations

10-15 mins

(Aim: To ensure we describe and understand all factors and considerations that go to quality of child care).

Explain that one area we want to focus more on is something we have labelled 'quality' of childcare. We want to make sure we think of this in ways that are meaningful to parents.

Unprompted thoughts on the components of quality:

Encourage each group participant to spend a few moments thinking about what quality means to them in the context of child care and to then write down their thoughts. In other words, what does a child care option need to deliver for the parent to think it is of good quality?

Whiteboard and discuss responses, probing to ensure clarity and full understanding around each element. E.g.

What does this mean? What other words could we use to describe it? What does it deliver to us (i.e. the benefits)? How would we feel if it wasn't delivered? How important is it?

Now explore how this might vary by age of child and why

Discuss how this quality evaluation might vary by type of childcare and why

Now discuss how well different forms of child care deliver on these needs

Exploration of model components:

Once full list has been developed and explored, introduce choice model factors: as required and to include: "group size"; "staff: child ratios"; "staff training & qualifications"; **"educational programs offered" (e.g. play based programs, literacy and numeracy programs, pre school programs, kindergarten), "space".

Discussion points for above to include:

Comprehension (What does this mean to you? What do you understand by it? What do you think it encompasses?)

Relevance (How important is it to you? How relevant compared to other factors? Do you take it into consideration currently? Why/Why not? Is it connected to quality of care? Does it vary in importance by age of child?)

What types of child care perform better on that factor? Why? Which perform worse? Why?

5. Drilling down into key factors of interest - price / affordability considerations

10-15 mins

(Aim: To ensure we describe and understand all factors and considerations that go to cost / affordability of child care).

Explain that we now what to focus more on the cost of formal childcare, to make sure we think of this and describe in ways that are meaningful to parents.

Encourage spontaneous discussion around this point to ascertain degree to which it focuses on affordability etc. Probe as required to ascertain:

How participants define cost of childcare. E.g. Do they think of it more as out of pocket cost (or gap) after benefits such as CCB or tax rebates or is it an hourly, daily, weekly or monthly cost or do they think of it in other terms?

How participants define affordability? What is this based on? What makes a childcare choice affordable? What are the key things they take into account?

Try to get some examples from 2/3 respondents of the life and child care choices made when a preferred option was not affordable

Does the definition of cost vary by types of childcare i.e. long day care, family day care and out of school hour's care?

Does the way that affordability is defined vary by types of childcare i.e. long day care, family day care and out of school hour's care?

If a child care provider quoted you \$75 per day per child how would you establish whether your family could afford it? Would that be a good price? Why?

If an out of hours child care provider quoted you \$15 per day how would you establish whether your family could afford it? Would that be a good price? Why?

5.1 Balancing cost and quality

-Briefly Endeavour to gain understanding of willingness to pay more for better quality.

Time check: 80 mins

When thinking about the choice of type of childcare or carer that you made...

(Cover the following briefly)

-How important was the price in determining the decision between different options? Ask for some real examples and probe for role of quality related comparisons in decision

10mins

- "I'm interested in understanding if parents set a budget for what they will spend and then work within that to choose a child care option or if they decide on a type of care they prefer and then find out what that would cost before determining a budget". Explore a few examples
- -Did anyone have an option they preferred but they didn't go with it because of the cost? Explore.
- -Is it about finding the best quality option and finding a way to pay for it or do parents have to make compromises?
- -Every one is different but what things are we willing to not spend on in order to afford our preferred child care option?
- -What things aren't we willing to forgo in order to pay for a higher cost child care option?

6. Factors that inhibit take up or extended use of formal child care (so parents can work)

10 mins

(Aim: To understand factors that inhibit parents that want to work from participating in the workforce after having children. This will enable you to understand more fully what the brakes and inhibitors are.

Drawing more from group participants that are yet to return to the workforce and also asking other participants to think about their own circumstances (e.g. may not have returned to work as quickly as desired or may know peers that are in this situation), explore factors that stop parents returning to the workforce. After unprompted discussion, probe as required on the following:

To what degree is it to do with lack of availability of child care? (I.e. accessibility issues).

To what degree is it about lack of suitable child care options? If so, what does this mean?

To what degree is it to do with the cost of child care? If so, what does this mean? What is deemed to be affordable?

7. Choice modelling task

15 - 20 mins

Explain that one of the aims of the groups is to develop a task what will be given to lots of parents to complete, the aim of which is to really understand what the key factors are in child care selection. Designing this task can be quite complex, so we want the group's help in assessing an early prototype of what the task might look like.

Instructions...

Now I'd like to try a little task. This is the type of survey question we might ask parents with children currently in child care.

First think about **one** of your children that is in child care or who you are planning to put in child care. You need to just think about that one child. Write the child's age and answer the other questions about that child at the top of the page please. (wait for this to be done)

Now please read the question and answer it in relation to that specific child.

Reviewing the task: Once participants have completed the task, lead a discussion into assessing the task covering the following points:

- 104. What did you choose and why?
- 105. Did you have any difficulties understanding the question? What?
- 106. Any unnecessary attributes? Any that has been included that you don't see as relevant to the decision process? Why so? Do others agree?
- 107. What information wasn't included there that you felt should been? (Refer back to earlier whiteboard task if required).
- 108. How did you interpret "Type of child care"
- 109. How did you interpret "Child Care Costs"
- 110. How did you interpret "Child : Staff ratio"
- 111. How did you interpret "Group Size"
- How did you interpret "Qualification"

8. Summarising

5 mins

Prior to finishing the group, lead a brief discussion encouraging group participants to draw some conclusions around:

What are the key things that parents returning to work are looking for in child care?

What are the key things that stop parents with children that want to work (or to work more) from doing so?

What areas require improvement in child care? Where should the focus be?

When we say quality child care; what do we mean by this? What are the key elements?

Appendix 6.3 "Respondent Introductions Exercise Sheet"

Introductions

1. First Name:
2. Number of children
3. Ages of children
4. Are you working?
5. What kind of work do you do now or are you planning to do?
6. How many days or hours a week do you work or plan to work?
7. What kind of work did you do before having children?
8. How old were your children when you first returned to work after having each of them?
9. What kind of childcare do you currently use to enable you to work?
10. How much do you pay for each type of child care?

CLIENT: Perspective Research

JOB: Child care choice

DATE: Wednesday 10th December 2008 & Monday 15th December

TIME: 6pm and 8.15 pm 10th December and 6pm 15th December

VENUES: TBC Melbourne: Social Research Centre, Level 1, Victoria St, Nth Melbourne,

03 9326 4460. Sydney: City Group Rooms West. Traralgon: TBC

INCENTIVE: All \$70 except for \$80 Sydney 8pm group

DURATION: 2 hours

MODERATOR: Christina Branagan & Annette Tamblyn

Version 5 3rd December

Background to project

The project is about child care choices and how people make choices about child care when they return to work after having children.

The person we are looking to involve must be the primary carer of the child (or children) and is likely to be the person who took parental leave when the child was born. They must be the person who is the main or joint decision maker concerning the choice of childcare.

They are very likely to be female (i.e. the mother) but we can include men, for example if they are a single parent with main custody of a child.

We want to involve people who are the primary carers of at least one child aged 0-7 years. They may have more than one child and some who are older than 7 years.

We want to involve people who have either returned to paid work and are currently using informal or formal child care (see definitions later), or those who are seriously planning to return to work within the next 24 months and plan to use informal or formal child care to help them.

We do not want to include people who are undecided about returning to work again or who are anti the idea of others taking care of their children.

Ideally we want people who have chosen a child care type option or are currently actively looking at options.

The main sample variables are socio economic groupings and there are quotas for: age of children; whether currently in paid employment or not; type of childcare using or considering using.

	1	
GROUP	DATE	SPECIFICATION
1 Melbourne	Wednesday 10 th December 6pm	Receiving welfare/benefits SES: D,E
2 Melbourne	Weds 10 th December 8.15pm	Professionals & middle managers SES: A,B
3 Sydney	Wednesday 10 th December 6pm	Lower white and upper blue collar groups SES:C
4 Sydney	Wednesday 10 th December 8.15pm	Receiving on welfare/benefits SES: D,E
5 Traralgon	Monday 15 th December 6pm	Lower white and upper blue collar groups SES: C

SPECIFICATIONS/DEFINITIONS:

1. SES GROUPS:

For the purposes of this study we are defining SES classes in the following way:

A/B: higher and intermediate levels of: management or administrative or professional occupations

C: junior levels of: management or administrative or professional occupations (eg. clerical) AND supervisors AND Skilled manual workers (eg. tradesmen)

D: semi-skilled / unskilled manual workers

E: welfare / benefits:

Main source of income is a government benefit or allowance AND As per questionnaire later

2. Quotas for informal care versus formal care and working versus non working

We want a spread of different types of care being used or considered across the sample.

We do not want to include those using casual baby sitting as their main care option but only those with a regular/planned program in place or in mind. They may use one of, or a combination of the following:

Informal care: Private Nanny; Family member; Friend

Formal care: Long Day Care (in a registered child care centre); Family day care (provided by a council registered child minder); before or after school care (provided by a registered child care organisation)

Aim for a mix of informal and formal care users but we are particularly interested in paid child care users so they should form the majority of the sample.

Aim for 2 of each group non-users of formal or informal child care and be planning to return to paid work in the next 2 years

Aim for 3 of each group users of formal care (at least once a week when not on holidays) AND doing paid work

Aim for 3 of each group users of informal care (at least once a week when not on holidays) AND doing paid work

3. Age of children quotas

We want a spread of ages.

0-12 months: at least 2/ group

18 months to 36 months: at least 2/group

3+ to 5 years: 1-2 /group 5+ to 7 years: up to 2/group

4. Other children in family

No quotas but:

Aim for a spread of family size i.e. some with 1, 2 and more children.

Aim for some families with other children over 7 years

QUESTIONNAIRE: (PLEASE SUPPLY ANSWERS TO ALL QUESTIONS)

NAME: Marital status: AGE: DATE OF BIRTH:

SUBURB: TELEPHONE:

AGES OF KIDS living at home with them at least 50% of time:

OCCUPATION/PREV OCCUPATION IF HOME DUTIES: INDUSTRY TYPE:

999. (Refused) Exclude

• •				
SPOUSE'S OCC: INDUSTRY TYPE: Self employed?				
WORK SITU	IATION			
And are you	currently	working, looking for work, or something else?		
	1.	In paid work (including both full and part time)		
	2.	Not employed BUT looking for work		
	3.	Neither employed NOR looking for work		
	4.	(Stay at home parent)		
	5.	(Not in the labour force / studying / disability pension)		
	6.	(Don't know/can't say)		
	7.	(Refused)		
What is your	househo	old's MAIN source of income?		
	1.	Wage or Salary		
	2.	Self employed earnings or proceeds of business		
	3.	Government benefit/allowance (including Parenting Payment) CONSIDER FOR WELFARE GROUPS		
	4.	Other (Specify)		
Which IF AN' Benefit)?	y govern	ment pension, benefit or allowance does your household currently receive (excluding Family Tax		
	INTERV	TIEWER NOTE: DO <u>NOT</u> READ		
	1.	Newstart allowance (or Unemployment Benefit)		
	2.	Disability Support Pension Exclude		
	3.	Parenting Payment (Single)		
	4.	Parenting Payment (Partnered)		
	5.	Age Pension Exclude		
	6.	Carer Payment		
	7.	Youth Allowance		
	8.	Service Pension – Veteran Affairs Exclude		
	9.	Other (eg Austudy, Widow Allowance etc) (Specify) Exclude		
	888.	(Don't know/can't say) Exclude		

1.	eve	Do you or any member of your immediate circle of family or friends currently work for or have ever worked or ever been involved in market research, advertising, public relations, marketing, Journalism, media, (newspaper, magazine, TV or radio), child care or within the child care industry						
	a) `	Yes	b) no <i>disco</i>	ontinue if yes				
2.		Have yo	ou participate	ed in Market Resear	ch?	YES/NO		
		When?	Topics?					
		How ma	any groups h	ave you attended?	If more than 4 grps	terminate		
		If in the	e last six mor	iths. (Interview or	groups)	terminate		
		If on c	hild care or	retuning to work	after children EVER to	erminate		
3.	Hov	w long ha	ave you been	a resident of Melbo	ourne/Sydney/Traralgon?	(must be at least 12 months)		
4.	Do	you cons	sider yourself	the primary carer	of your children?			
	a)	Yes						
	b)	No terr	minate					
	c)	Joint wi	ith partner/sp	oouse				
5.	Are	you cur	rently in paid	work?				
	a)	Yes (Go	ot to Q9)					
	b)	No						
6.	lf n	ot in pai	d work what	are your plans rela	ted to work in the next 2	4 months (2 years)?		
	a)	probabl				to return to work in next 24 months c) unsure whether retuning to work in next 24		
				ork how likely are I to return to work	you to use some form of	f child care other than your partner or spouse		
a) '	Very	likely		b) quite likely	terminate	c) unlikely terminate d) unsure terminate		
	And rmal		the following	type(s) of child ca	are arrangements are you	planning to use (can be a combination)?		
a)	Long	g day car	e at a child c	are centre b) Famil	y day care with a registe	red carer c) before or after school care		
(In	form	al):						
d)	Priva	te Nanny	/ e) Family m	ember (not includi	ng partner, spouse or the	other parent) f) friend		
g)	Othe	r termin	ate					
Go	to Q	11						

,	use some form of child care arrangement at least once a week with a third party other than your rtner in order to enable you to work?					
a) N	No terminate					
b) y	yes					
10. And w	which if any of the following type(s) of child care arrangements do you use currently?					
(Formal): school care	a) Long day care at a child care centre b) Family day care with a registered carer c) before or after e					
(Informal)	: d) Private Nanny e) Family member (not including partner, spouse or the other parent)					
f) Friend						
g) Other to	erminate					
11. Who v	was or will be the main decision maker about the child care arrangements chosen for your child/children?					
a) S	elf					
b) Jo	pint with partner					
c) M	lainly Partner/spouse terminate					

LATECOMERS WILL NOT BE ADMITTED. IT IS VITAL THAT YOU COMMIT TO ATTENDING AS WE REQUIRE 100% ATTENDANCE ON THE NIGHT!

Please understand that your non attendance may cause the group not to go ahead.

If for some reason an emergency crops up and you need to schedule that time please call me on.....or my supervisor (Lisa/Lyn on 9533 0522) (Or appropriate)

If you require reading glasses, please ensure you bring these along with you to the group.