Final Report

Parent/Guardian Evaluation of Quality Child Care

For Children with Special Needs

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Introduction

The purpose of this evaluation and needs assessment was to gather reliable and valid information about the child care needs of families with children who have special needs. The specific goals of this needs assessment were to 1) examine the experiences of parents/guardians of children with special needs in accessing quality child care, (b) help identify any barriers experienced in accessing quality child care, and (c) obtain parent/guardians' views of what child care providers need in order to provide quality services for their child with special needs. Information gathered will inform the Child Care Health Consultation (CCHC) work group of Together for Kids and Families, Nebraska Department of Health and Human Services, regarding support needs of families with special needs children related to obtaining quality child care. In addition, determining these needs will help state and community agencies to contribute to quality improvement for this population of children and their families, and provide data to design targeted training opportunities for child care providers.

High quality child care for young children improves health and promotes development (American Academy of Pediatrics, 2005). The negative effects from poor-quality programs are magnified for children with special needs. Families with children with special needs frequently have difficulty finding high quality child care (Neas & Mezey, 2003), are least likely to have access to quality child care (American Academy of Pediatrics, 2005), and often have difficulty enrolling their children in the few programs that will accept them (Tempfer, 2004). This may in part be due to the inability or unwillingness of child care providers to accept children with special needs because of inadequately educated or trained staff (Tempfer, 2004), fear of not being able to meet the child's needs, budgetary constraints and/or logistical problems (Markos-

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Capps & Godfrey, 1999). In addition, lack of health consultation to child care programs and inadequate coordination between early intervention services and child care programs adds to the challenges in obtaining quality child care by parents/guardians with special needs children (Neas & Mezey, 2003). Funding from the federal, state and local levels often do not provide sufficient resources to ensure adequate training and support for the early education workforce (American Academy of Pediatrics, 2005; Tempfer, 2004).

Quality child care challenges experienced by parents/guardians with special needs children can result in economic consequences for the family. Risk of work loss is high for parents/guardians of children with complex health care needs (Okumura, Van Cleave, Gnanasekaran, & Houtrow, 2009). Children with special health care needs with functional limitations require on average more arranging or giving of care than those without functional limitations (Tempfer, 2004). Children with developmental problems and autism spectrum disorder have been found to be associated with a higher probability that child care problems will greatly affect parental employment (Montes & Halterman, 2008). In a study by the Maryland Developmental Disabilities Council (2004), approximately three fourths of the families surveyed reported lost income due to care issues.

Special needs children can be defined as children with physical, developmental, mental, emotional, behavioral, or medical needs that requires different levels of care than other children their age (National Child Care Information and Technical Assistance Center, 2009). In Nebraska, children with special needs are slightly less likely to attend child care than children with no special needs. Approximately 51% of children with special needs age 5 or younger in Nebraska attend childcare (day care center, preschool, nanny, relatives, etc.) for 10 or more hours per week

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which is less than the 58% of children without special needs who attend childcare in Nebraska (Child and Adolescent Health Measurement Initiative, 2007).

Methods

Survey Development

The primary method chosen for the evaluation and needs assessment of Nebraska parents/guardians' with children with special needs was a survey. This method was chosen because of several factors including budgetary limitations, anticipated parent preference, and parental access by the evaluators. The survey was developed by the evaluators based on content from available literature.

The literature review was completed using the data bases Medline via EBSCO, Medline via PubMed, CINAHL via Ebsco, PyschInfo and ERIC. Mesh words used were *"Children with special needs, children with special health care needs, parents, family disabilities, child care, child care providers, day care, needs, diagnosis, work, in home, barriers, child care setting, availability, challenges, services, resources, availability and quality of childcare, inclusion, understanding, early intervention, learning disorders, social support, preschool, health knowledge, awareness, infant, toddler, school age, support, education, inclusion, exclusion, rural, urban"*. Fifteen articles were located and evidence tables were formulated (Appendix A). The findings of the literature review were used to develop the instrument. The survey was then reviewed and revised based on expert feedback from the CCHC work group of Together for Kids and Families. The final 29 item instrument includes multiple choice and open ended items and responses. The broad categories of items included within the instrument address challenges faced

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by parents/guardians in accessing quality child care for their children with special needs, knowledge of resources, and demographic information (Appendix B).

Sampling and Survey Dissemination Procedures

The sampling plan for the distribution of the special needs children family survey was influenced by several factors related to resources, policy and logistics. Accessing families with special needs children was dependent on working with local and statewide agencies that had relationships and contact with such families. The Nebraska Department of Health and Human Services (NDHHS), Together for Kids and Families, provided the contact information for the agencies involved with families with special needs children. These agencies could not provide internet or geographic addresses because of privacy policies, but did agree to distribute information at meetings and via their websites to solicit survey respondents. There were six major agencies involved in survey dissemination: Children's Respite, Boys Town, Parent Training and Information (PTI) Nebraska, Nebraska Early Development Network, Answers 4 Families, and Head Start. Each of the agencies provided an estimated potential number of contacts for dissemination (Table 1). These numbers most likely represent duplication of some of the estimated potential respondents because the families with special needs children are often networked with more than one agency; however determining duplicate potential was not realistic or even logistically feasible.

The survey was formatted electronically using Survey Monkey. Dissemination methods used were multiple. Fliers were distributed at face to face meetings by some of the agencies. Several of the agencies received a copy of the survey which they posted on their websites and

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Table 1. *Number of persons who had access to survey by agency.*

Agency	Number
Children's Respite	150
Boys Town	60
PTI Nebraska	1,000
Nebraska EDN	1,500
Answers 4 Families	*4,227
Headstart	972

**This number represents number of visits to this web site as number of families served or who had access to survey is not available.*

then followed up with an email notification. Others sent emails with survey attached. Some of the surveys were printed and distributed to members of the group. In this case, the survey data was manually entered into Survey Monkey by UNMC project staff.

While 172 persons accessed the survey, only 138 completed the online survey with no missing data. Of the 138 with complete data, 131 answered yes to the question "Do you have any children with special needs?" making the final convenience sample 131. Based on numbers accessed and numbers completed, there was an 80% response rate. Based on the total population estimated denominator the response rate was less than 1%.

Results

The qualitative and quantitative results of the survey (Appendix C and D respectively) are reported for urban metro, urban non-metro, rural, other, and the total sample. Urban metro included the zip codes for the Nebraska cities of Omaha, Papillion, LaVista and Bellevue. Urban

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non-metro included the zip codes of a city with greater than 50,000 population. Rural included all zip codes in cities or geographic regions with less than 50,000 population. Other included those who completed the survey but did not have a valid zip code. Qualitative data collected on the open ended questions is included by survey item (Appendix C). It should be noted that some results may not add up to 100% because of missing data (not included in the tables) and/or the question asked the child care provider to "select all that apply".

Sample Characteristics

Approximately two thirds of the families were from a metropolitan area, while one third were from rural areas (Table 2). The sample was primarily female and White-non Hispanic (Table 3). Over half of the parents/guardians had some college or a four year degree. The average age of the parents/guardians was 37 years. Age of the children with special needs ranged from infant to 20 years of age (Figure 1) with the average age being 6.8 years.

Table 2. *Residence of parents completing the survey (n=131)*

	Number	**Percent**
Urban (non-metro)	17	13%
Urban (metro)	67	51%
Rural	38	29%
Other undefined	9	7%
Total	131	

*****Key:***
Urban (non-metro) = city with >50,000 population (by zip code)
Urban (metro) = Omaha, Papillion, LaVista, Bellevue, Council Bluffs (by zip code)
Rural = city with <50,000 population (by zip code)
Other (undefined) = Not valid zip code but completed the survey

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Table 3. *Sample Demographics (n=131)*

	Urban (metro)	**Urban (non-metro)**	**Urban (total)**	**Rural**	**Other**	**Total sample**
Gender						
Female	54(41%)	16(12%)	70(53%)	29(22%)	6(5%)	105(80%)
Male	10(8%)	1(1%)	11(8%)	4(3%)	------	15(11%)
Race/ethnicity						
White, non-Hispanic	60(46%)	13(10%)	73(56%)	29(22%)	5(4%)	107(82%)
African American	1(1%)	1(1%)	2(2%)	3(2%(	-----	5(4%)
Hispanic	-----	1(1%)	1(1%)	1(1%)	1(1%)	3(2%)
Asian/ Pacific Islander	1(1%)	-----	1(1%)	-----	-----	1(1%)
Native American	1(1%)	-----	1(1%)	-----	-----	1(1%)
Education						
High school/ GED	7(5%)	2(2%)	9(7%)	5(4%)	-----	14(11%)
Some college	13(10%)	4(3%)	17(13%)	4(3%)	2(2%)	23(18%)
Two year degree	11(8%)	3(2%)	14(11%)	8(6%)	1(1%)	23(18%)
Four year degree	19(15%)	3(2%)	22(17%)	9(7%)	1(1%)	32(24%)
Some graduate work	3(2%)	2(2%)	5(4%)	4(3%)	1(1%)	10(8%)
Completed masters orprofessional degree	8(6%)	1(1%)	9(7%)	2(2%)	-----	11(8%)
Advanced graduate work or PhD	-----	1(1%)	1(1%)	-----	-----	1(1%)

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Table 3. *Sample Demographics (n=131) (continued)*

Income	**Urban (metro)**	**Urban (non-metro)**	**Urban (total)**	**Rural**	**Other**	**Total sample**
Less than $10,000	-----	2(2%)	2(2%)	-----	1(1%)	3(2%)
$10,000-$29,999	7(5%)	3(2%)	10(8%)	5(4%)	-----	15(11%)
$30,000-$49,999	9(7%)	3(2%)	12(9%)	6(5%)	2(2%)	20(15%)
$50,000-$69,999	14(11%)	3(2%)	17(13%)	9(7%)	1(1%)	27(21%)
$70,000-$89,999	7(5%)	1(1%)	8(6%)	4(3%)	-----	12(9%)
$90,000-$99,000	5(4%)	2(2%)	7(5%)	3(2%)	-----	10(8%)
$100,00 or greater	9(7%)	-----	9(7%)	1(1%)	-----	10(8%)
Prefer not to answer	11(8%)	2(2%)	13(10%)	3(2%)	1(1%)	17(13%)

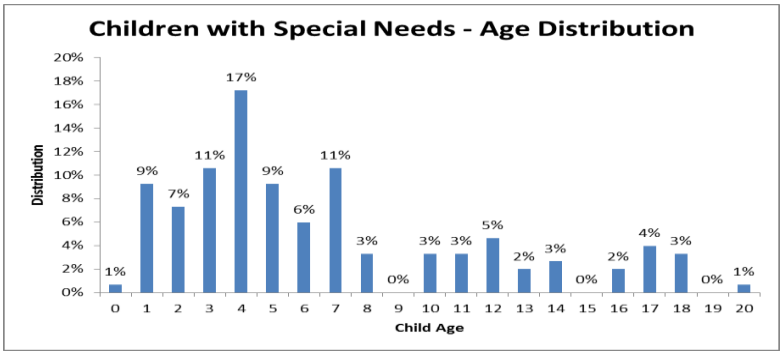

Figure 1. Age distribution of children with special needs (n=131)

Approximately 13% of the sample was at or below the poverty level (using a family of 4 as reference). Over half of the total urban sample and one fourth of the rural sample with an annual income of less than $29,000 had difficulties accessing quality child care (Figure 2). A small percent (5%) of the parents/guardians reported speaking another language in addition to English

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in their homes. Only 11 persons identified themselves as other than the parents of the child with special needs (Figure 3).

	Annual Income of <$10,000 and $10,000 to $29,000.									
	Urban (Non-Metro)		Rural		Urban (Metro)		Other		Overall Total	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Difficulties encountered in obtaining quality child care?	3	3	1	4	2	6	0	0	6	13

Figure 2. Low income families that encountered difficulty in obtaining

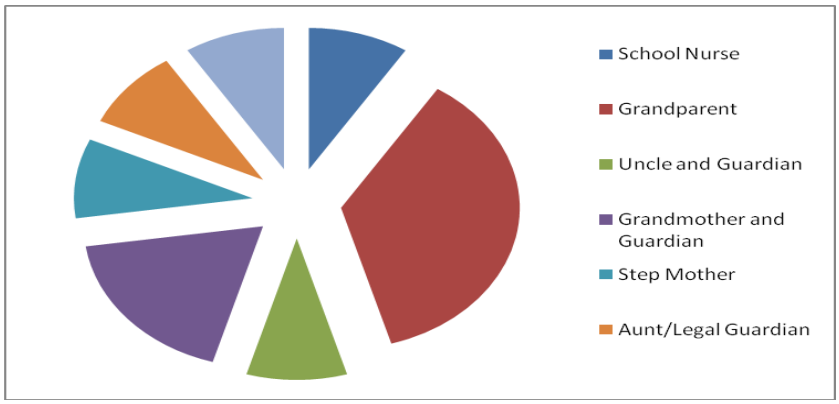

Figure 3. Persons who completed survey that were the guardian and not the parent Of the child with special needs (n=11)

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Seventy two percent of parents/guardians responding to the survey reported that their children with special needs attended child care. Over half of these attended a child care center, while slightly less than one fourth of the children attended after school programs (Figure 4).

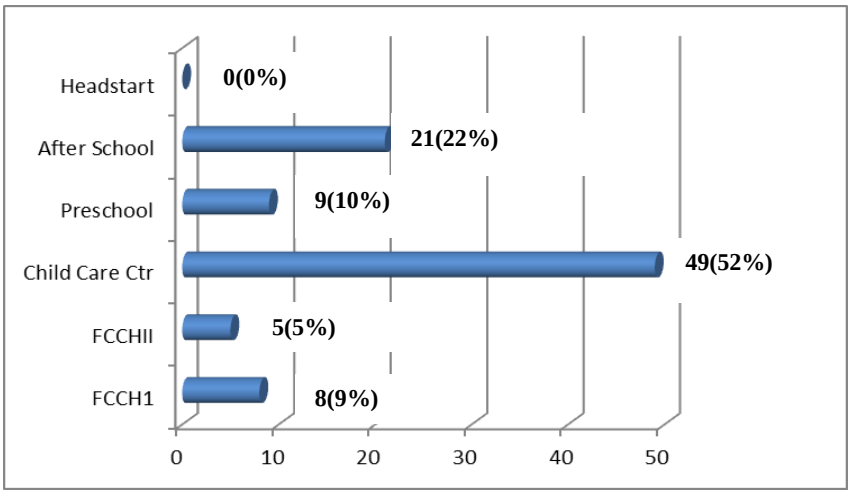

Figure 4. Type of child care program attended by children (n=131)

Developmental delay, language delay and mobility problems were the top three diagnosed special needs identified for the urban (total), rural and total sample groups. Developmental delay and epilepsy/seizure disorder were the top diagnosed conditions for the other group. Forty percent of the sample reported that their child had problems with mobility.

Accessing Quality Child Care

Of the 94 parents/guardians who answered yes that their child with special needs was attending child care, 65(69%) reported having difficulty finding a quality child care program that would accept their child. Reasons given to parents/guardians by child care providers as to why their child was not accepted to the child care program were related to the (a) child care provider and/or facility, (b) characteristics of the child, and (c) willingness of child care providers to enroll the child (Table 4). Less than one third of the total sample (41/131, 31%) felt they had

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Table 4. *Qualitative Themes (reasons) related to why child not enrolled into child care program by child care providers*

Theme	Qualitative Data to Support Theme
Child care provider and/or facility	• *"Not enough staff"* • *"Staff said couldn't handle kids like that"* • *"Not enough knowledge"* • *"Lack experience"*
Characteristics of Child	• *"He hits other kids so hard to place him"* • *"Not potty trained"* • *"Child considered 'too busy' and couldn't be watched well enough"* • *"Child hits himself and others, bites, claws, scratches, breaks things, throws things"* • *"It is his behavior and getting mad real quick"* • *"They didn't feel comfortable with his seizures"*
Willingness to enroll	• *"Said they didn't accept special needs kids"* • *"They didn't exactly say no, but did not welcome my kid with open arms, so I kept looking "* • *"No specific reasons were given by any of the facilities we looked at, they all had generic responses such as 'our facility is not equipped for those concerns' or 'we don't feel like we would be able to accommodate your child"* • *"I tried to get her into head start and was told we made too much, but the preschool program won't take her because of her needs"* • *"My child is 10, but I remember clearly not being wanted in daycare. It broke my heart. I fought it and got her in….at another daycare. I had to go to meetings weekly to review her behaviors, always with the implication that she might have to leave. Only one place I have gone did not bat an eye at the Down Syndrome, and then they were not a very safe place"*

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choices (more than one child care program to choose from) in selecting a quality child care program. In contrast, 16% of the total sample reported finding quality child care but decided they were not ready to place their child in a child care program.

The top three reasons encountered by parents/guardians in accessing quality child care for all groups (urban, rural, other) were inadequate training of staff, lack of experience of staff in working with children with special needs, and lack of enough staff to provide needed care.

Effect on Economic Status of Family

The results of the survey indicated that the inability of parents/guardians to access quality child care for their children with special needs did affect the economic status of the family (Figure 5). In this sample, approximately one fourth of the parents/guardians had to stop working because they were unable to find quality child care. Greater than one third of the parents/guardians in the total sample had to cut back on work hours because of the inability to find quality child care. Slightly less than one fourth had to hire someone to come into their home to care for their child with special needs because they were unable to find quality child care.

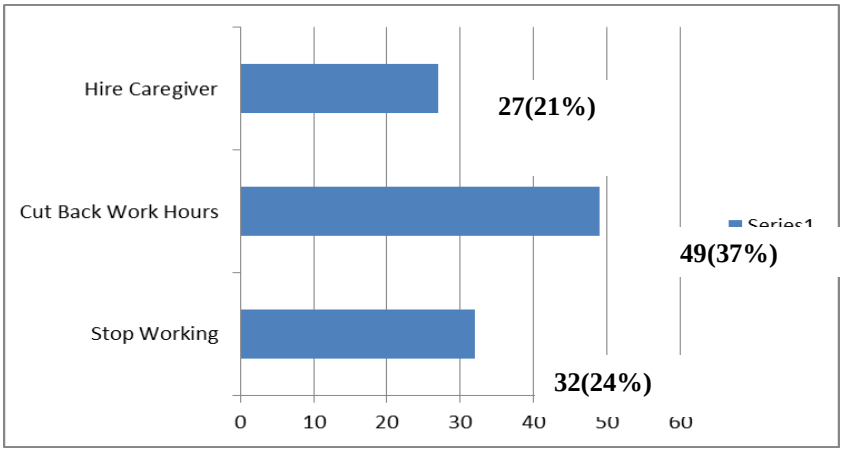

Figure 5. Effect on economic status of family due to inability to find quality child care (n=131).

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Need for Support and Services

Patents reported needing more support and services. Slightly greater than one half of the urban (total), rural and total sample reported needing more support in caring for their child with special needs. While the majority of the total sample reported being aware of early intervention services, special education services, and resources in their community that were available to them, the data suggest that those living in rural areas may be less aware of these services (Table 5). When seeking information on quality child care programs, parents/guardians of children with special needs from all groups most often sought out other parents/guardians of children with special needs first. The next most frequently reported source of information was health care professionals, except for those living in rural areas who reported using the internet as their second most often used source of information.

Table 5. *Parents/guardians' awareness of services for special needs children available in their communities.*

	Urban (total) N=84	Rural N=38	Other N=9	Total Sample N=131
Aware of early intervention services				
Yes	73(87%)	29(76%)	6(67%)	108(82%)
No	11(13%)	9(24%)	3(33%)	23(18%)
Aware of special education services				
Yes	68(81%)	29(76%)	5(56%)	102(78%)
No	16(19%)	9(24%)	4(44%)	29(22%)
Know of resources in my community				
Yes	67(80%)	24(63%)	6(67%)	97(74%)
No	17(20%)	14(37%)	3(33%)	34(26%)

The last question on the survey was open ended and asked for any additional comments the parents/guardians would like to add. The major themes that were reported were seeking

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help/services and number and/or quality of child care providers (Table 6). Seeking help/services included inquiries about how to find support groups or seminars, how to find and contact other parents/guardians with special needs children to talk with, how to talk with teachers about child's needs or parents/guardians concerns, and how to find what services are available to help. Number and/or quality of child care providers included lack of child care programs in areas in which families lived and lack of quality child care programs.

Table 6. *Themes related to qualitative data collected regarding other issues parents/guardianss encountered in accessing quality child care for their children with special needs.*

Theme	Qualitative Data
Seeking help/services	• *"Would like to find support groups or seminars"* • *"Would like to have other parents with special needs kids to talk to", "a place to contact other parents"* • *"Is there a web site with a list of other parents and their contact information who have children with special needs? It would be helpful to talk with them"* • *"How to address child's needs or parent concerns with teacher without causing turmoil"* • *"I really could use more support, help, I don't know what other kind of help is out there for sure"*
Number and/or quality of child care providers	• *"There is not enough child care in this area"* • *"I live in an area, as far as I know, there are no such programs"* • *"I am pretty happy where I am at, but I just sort of accepted it since no one else would take him. If I had a choice, he would be in a different location or if I had the money, I would take care of him myself and not worry so much about whether or not he is getting the attention he needs so bad"*

Discussion

The literature review completed and utilized for development of the survey instrument resulted in only 15 articles related to parents'/guardians' evaluation of obtaining quality child care for their children with special needs. Only a few articles looked at/compared quality child

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care needs of rural and urban parents/guardians of children with special needs. This suggests that evidence is lacking to guide funding, interventions or innovative programs and policy decisions related to quality child care and children with special needs. This may account for the frequent and frustrating challenges reported by the parents/guardians responding to this needs assessment and evaluation survey.

The results of this survey are consistent with the evidence found in the literature. Sixty nine percent of the survey respondents reported difficulty in finding quality child care most frequently related to inadequate staff and inadequately trained staff. Funding from the federal, state and local levels often do not provide sufficient resources to ensure adequate training and support for the early education workforce (American Academy of Pediatrics, 2005; Tempfer, 2004). This compares to a survey of parents done in Maryland in 2004 where 83% of parents reported difficulty with child care for their children with special needs (Maryland Developmental Disabilities Council, 2004). This suggests that training of Nebraska child care providers in caring for children with special needs should be a priority focus for funding allocation. Training for child care providers that should be of priority focus should include the top three diagnosed special needs identified: developmental delays, language delays and mobility problems. It may also be necessary to establish policy that requires some of the mandatory training of child care providers to include the areas important to caring for children with special needs.

Fifty two percent of survey respondents indicated they needed more support in caring for their child with special needs. As an example, less than one third (31%) of total sample felt they had choices regarding obtaining quality child care (i.e. more than one program to choose from). Tempfer (2004) purported that lack of health consultation to child care programs and inadequate

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coordination between early intervention services and child care programs adds to challenges in obtaining quality child care by parents/guardians with special needs children. In a literature review by Brehm, Gildea, and Karsting (2009) it was found that child care health consultation provided to child care programs serving all children has been associated with a positive impact on the development and use of standards-based health and safety policies, infection control, prevention of communicable diseases, increased staff confidence, and fewer child absences. Given these potential outcomes, child care health consultation would seem to be even more important for children with special needs. Further research needs to be done on child care health consultation and outcomes of children with special needs, cost effectiveness of child care health consultation, and coordination of care between child care providers, early childhood agencies, and parents/guardians of children with special needs.

When quality child care is difficult to access, the economic status of the family can be affected. For this sample, approximately one fourth of the respondents had to quit work to take care of their child with special needs. In addition, over one third had to cut back hours of work to care for their child and a little less than a one fourth had to hire someone to care for their child in their home. This is consistent with the literature where complex health care needs (Okimura et al, 2009), functional limitations (Tempfer, 2004), developmental problems and autism spectrum disorder have been found to be associated with a higher probability that child care problems will greatly affect parental employment (Montes & Halterman, 2008). A study that looked at parents perceptions about how caregiving and employment responsibilities can successfully fit together found that there is a lack of community-based services and resources necessary to support work and family obligations in a meaningful way (Rosenzweig, Brennan, & Ogilvie, 2002).

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Reasons given by respondents as to why child care providers did not accept their children into their child care program were troubling. While the lack of adequate training and not knowing how to handle a special needs child is fixable, the attitude of unwillingness to enroll the child is concerning and should be further explored. If these statements were related to unwarranted refusal to enroll the child, this may indicate a need for training for child care providers regarding compliance with the Americans with Disabilities Act. The Americans with Disabilities Act states that child care providers cannot deny enrollment to a child with special needs by claiming their staff does not have enough training, it is their legal responsibility to find the training they need in order to make reasonable accommodations for the child (Wisconsin Department of Workforce Development and Wisconsin Department of Public Instruction, Wisconsin Child Care Information Center, 2007). Further study and policy analysis is recommended.

A limitation of this needs assessment and evaluation is the convenience sample. The inability to contact the parents/guardians directly to assess and evaluate their needs in accessing quality child care for their children with special needs may have biased the results. Those with computer access, those who were computer savvy, or only those with an exceptional experience in problems with quality child care problems may have responded to the survey.

In summary, many of the survey findings were consistent with findings in the literature. However, there were also unique results obtained from this study from the Nebraska parents/guardians perspective such as rural vs urban. The results provided in this report are a foundation to further research, evaluation and policy development.

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Appendix A

Evidence Tables

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Evidence Table for Children with Special Needs/Parents

Search terms used for review of literature:

Children with special needs, children with special health care needs, parents, family disabilities, child care, child care providers, day care, needs, diagnosis, work, in home, barriers, child care setting, availability, challenges, services, resources, availability and quality of childcare, inclusion, understanding, early intervention, learning disorders, social support, preschool, health knowledge, awareness, infant, toddler, school age, support, education, inclusion, exclusion, rural, urban

Reference	Key Findings
Megumi J. Okumura et al. Understanding Factors Associated With Work Loss for Families Caring for CSHCN. (2009) *Pediatrics*, 124	• Parents of children with special health care needs (CSHCN) are at risk for work loss as a result of the complex health needs of their children. • Availability of a system of care support, such as the medical home, is associated with lower work loss reported by families. • The impact of a child's special health care need on work choices for family members is likely multifactorial.

Reference	Key Findings
Rosenzweig, J., Brennan A., & Ogilvie A. Work-family fit: voices of parents of children with emotional and behavioral disorders. (2002). *Social Work*, 47(4):415-24.	• Employed parents of children with emotional or behavioral disorders overcome significant challenges to fulfill their daily work-family responsibilities; however, their experiences in meeting these multiple demands have not been examined. • The purpose of the present study was to describe the strategies these parents use and their perceptions about how caregiving and employment responsibilities can successfully fit together. • Results revealed that parents experience a serious lack of community-based services and resources necessary to support work and family obligations in a meaningful way. • The data suggest a need for more research and services development to support these families in their communities.

Reference	Key Findings
Montes G, & Halterman J. Child care problems and employment among families with preschool-aged children with autism in the United States. (2008) *Pediatrics*, 122, (1) 202-208.	• The purpose of this work was to describe the child care arrangements of children with autism and to determine whether families of preschool-aged children with autism are more likely to report that child care arrangements affected employment compared with typically developing children and children at high risk for developmental problems. • Ninety-seven percent of preschool-aged children diagnosed with autism spectrum disorder were cared for in community settings, particularly preschool and Head Start, with only 3% in exclusive parental care.

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	• Thirty-nine percent of the parents of children with autism spectrum disorder reported that child care problems had greatly affected their employment decisions, compared with 16% of the children at high risk and 9% of those who were typically developing. • Developmental problems and autism spectrum disorder are associated with higher use of child care services and higher probability that child care problems will greatly affect employment. • These findings warrant evaluation of the community resources available to families with children with special needs.

Reference	Key Findings
Paulsell, D., Nogales, R., & Cohen, J. (2003). Quality Child Care for Infants and Toddlers: Case Studies of Three Community Strategies. *Zero to Three Policy Center*	• The quality of child care can be a critical influence on the well-being of infants and toddlers. • While inadequate supply of infant-toddler care was a significant barrier in the case study communities, finding care for infants and toddlers with special needs was an even bigger challenge. All the initiatives supported child care providers in caring for special needs children by fostering close working relationships with early intervention programs.

Reference	Key Findings
R. Gupta, J. Pascoe, T. Blanchard, D. Langkamp, P. Duncan, P. Gorski, L. Southward (2008). Child Health in Child Care: A Multi-state Survey of Head Start Child Care Directors. *Journal of Pediatric Health Care*, 23 (3), 143-149.	• Incorporating health promotion in childcare centers has been thought to improve health behaviors by parents, childcare directors and health care professionals. • Reported barriers to parents' health education through the child care centers also were similar for Head Start and non–Head Start centers. • About 50% of both subgroups cited inadequate time and funds for health education. • Almost three quarters of directors from both subgroups reported that parents' English-speaking abilities made health education difficult to implement.

Reference	Key Findings
Maryland Developmental Disabilities Council (2004). Barriers to Quality Child Care-Families of Children with Disabilities and Special Health Care Needs Speak Up	• Childcare providers, child and disability-rights advocates, and State agencies have long recognized that barriers to inclusive childcare exist for children with disabilities and special health care needs. More information was needed from families to document the scope of the problem. • Results of this research showed that there are significant gaps in the availability and quality of childcare opportunities for children with disabilities and special health care needs. • There are indicators that families of children with disabilities have difficulties accessing and maintaining quality childcare.

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	• The Maryland Developmental Disabilities Council gathered data from families using surveys and focus groups. Over 400 families responded to the survey and four regional family focus groups were held. • From the surveys and focus groups, a description of families' childcare experiences was developed and is summarized. • 83% of respondents said they had difficulties in finding, obtaining or keeping childcare. • 76% of families reported they had lost income due to family care issues. • 64% of families reported that a childcare provider had asked that their child leave the program/child care setting. • 78% reported they had concerns about availability of child and after-school care their child ages.

Reference	**Key Findings**
Doig, J., McLennan, J., & Urichuk, L (2008). 'Jumping through hoops': parents' experiences with seeking respite care for children with special needs. *Child: care, health and development*, 35, (2), 234–242	• Respite care may act as a means to reduce stress and fatigue in people caring for a dependent who has a disability. • Despite this, a variety of barriers may exist to obtaining such services. • This study explored caregivers' experiences seeking respite care for their children with special needs within a province in Canada. • Evident in the respondents' accounts were the many barriers that parents faced during the process of finding and obtaining respite placements. Most salient among these were the various requirements, which had to be satisfied in order to receive services. • Other barriers identified in previous inquiries, including issues surrounding the availability, affordability and accessibility of respite care, impacted parents' perceptions of the overall respite experience and arose in the present study within the context of 'jumping through hoops'.

Reference	**Key Findings**
Tempfer, T. (2004). Children With Special Healthcare Needs. *Medscape Nurses*	• In an extensive survey conducted, it was found that 33.5% of CSHCN reported inadequate insurance. CSHCN families with lower incomes reported higher rates of inadequate insurance and unmet health needs. • CSHCN with functional limitations required more arranging or giving of care than those CSHCN without functional limitations. However, more than 42% of families spend less than 1 hour per week in arranging or giving care (many only needed medication or simple therapies), while 13.5% of families spend greater than 11 hours per week in arranging or giving care. • While most parents struggle with finding quality child care, families with CSHCN encounter an even greater problem enrolling their children in the few programs that will accept them. • The environment and teachers may not be educated and trained to provide a developmentally appropriate, healthy, and safe program for all children. Many

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	centers are inadequately staffed for the support needed to manage CSHCN, including medication administration. There may be a lack of communication, including healthcare plans, between teachers/providers and primary or specialty healthcare providers to support teachers in the care of CSHCN. Many are finding a lack of health consultation to early childhood programs. Inadequate funding to states also makes it difficult to provide resources for training and support. • A major barrier to inclusion for CSHCN is the need for medication administration in the childcare programs. Large portions of CSHCN require routine medications. Childcare providers frequently are uncomfortable giving the necessary medication or may not understand the indication and importance.

Reference	**Key Findings**
Neas, Katherine B. & Mezey, Jennifer (2003). Addressing Child Care Challenges for Children with Disabilities: Proposals for CCDBG and IDEA Reauthorizations. *Center for Law and Social Policy*	• Families with children with disabilities often have difficulty finding high quality childcare for their children. • Finding care for a child with a disability is challenging for parents across the income spectrum. • The National Academy of Sciences' landmark report, From Neurons to Neighborhoods, identifies the main barriers identified by researchers that families face in accessing quality early childhood services in this paper. • Like all families with young children, those whose children have a disability or special health care need are faced with the challenges of finding good quality affordable child care. But the inability or unwillingness of many child care providers to accept children with disabilities, transportation and other logistical problems, difficulties with coordinating early intervention and child care services, and the scarcity of appropriately trained caregivers … made the effort to find any child care a tremendous challenge for these families. • A Maine survey of child care providers confirms these conclusions. The survey found that only about one-third of the surveyed providers served children with medical, physical, or behavioral needs and 12 percent of the providers reported that they had not enrolled a child because of the child's behavioral needs

Reference	**Key Findings**
Kelly, Jean, F. & Booth, Cathryn, L. (1999). Child Care for Infants with Special Needs: Issues and Applications. *Infants and Young Children*, 12(1) 26-33	• The demand for quality child care for infants with special needs is increasing, and parents and professionals are confronted with questions about the quality of care, the type of care arrangement that is most appropriate at different ages, and the effects of child care on child development. • Results of this study suggest the need to increase support for in-home care for infants with special needs, to examine the impact of current back to work and family leave regulations on infants with special needs, and to develop models of service delivery for infants that support early development across appropriate contexts, including the family, early intervention, and child care environments.

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Reference	Key Findings
Markos-Capps, Gina & Godfrey, Athleen B. (1999). Availability of Day Care Services for Preschool Children with Special Health Care Needs. *Infants and Young Children*, 11(3) 62-78.	• The family of a child with special health care needs faces additional challenges and barriers in obtaining adequate day care • These families are frequently denied access to mainstream day care centers because of inadequately trained staff, cost constraints, and inadequate facilities. • Child care services specialized in caring for children with special health care needs are few, expensive, and lack funds to sustain them. • Barriers to admission included restrictive admittance requirements; lack of staff; fear of not meeting the child's needs; and lack of trained personnel. • Policies are needed to create the means for families who receive supplemental income for their children with special health care needs to make choices about how to allocate and channel these funds into needed areas of service, including day care.

Reference	Key Findings
Policy Statement (2005). Early Education and Child Care From Birth to Kindergarten. *American Academy of Pediatrics*, (115) 1w 187-191.	• High-quality early education and child care for young children improves their health and promotes their development and learning. • The positive effects from high-quality programs and the negative effects from poor-quality programs are magnified for children from disadvantaged situations or with special needs, and yet these children are least likely to have access to quality early education and child care. • The out-of-home care arrangements for children of parents who work nontraditional hours such as evenings, weekends, or holidays also compound the access problems. • Federal, state, and local funding levels do not provide sufficient resources, even when combined with parent fees, to ensure adequate training of the early education workforce and do not provide reasonable compensation and career advancement opportunities.

Reference	Key Findings
Maryland Family Network (2010). 2010 Trends in childcare.	• The need for childcare for children with special needs is substantial.

Reference	Key Findings
Child Care Maryland Family Network (2009). Child care for children with special needs.	• As a leading advocate for a strong system of quality child care for all children, Maryland Family Network (MFN) collects data on the child care system, documents gaps in service, and advocates expansion and enhancement where needed. • Parents of children with special needs, in particular, often find more

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	weakness than strength when they enter the system looking for care for their children. • In 2000, LOCATE conducted a survey of child care providers, both group programs and family providers, to determine the pervasiveness of the issues raised by the anecdotal information. • In 2005 and 2009, LOCATE conducted follow-up surveys - using virtually the same survey instrument - to gauge the perceptions, experiences, and training needs of the provider community.

Reference	**Key Findings**
Wisconsin Child Care Information Center (_____) Quality Child Care for Children with Special Needs	• What parents need to know: Child care providers are very skilled and have lots of experience caring for children with a variety of needs. • Most child care providers are able to care for a child with special needs. They may just need a little help from the child's family and/or other resources. • Not all child care providers are aware of their legal responsibilities under the ADA. Parents may need to teach providers their responsibilities and help them • understand that working with a child who has a disability can be a positive and rewarding experience. • Providers cannot deny enrollment to a child with special needs by claiming their staff does not have enough training to care for a child with a disability. It is their responsibility to find the training they need in order to make reasonable accommodations for the child.

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Appendix B

Survey Instrument

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Parents of Children with Special Needs

Children with special needs can be defined as children with physical, developmental, mental, emotional, behavioral, or medical needs that requires different levels of care than other children their age (National Child Care Information and Technical Assistance Center, 2009). The survey is targeting parents of children aged 0-8 years.

This survey is being done by an independent team of nurses from the University of Nebraska Medical Center (UNMC) College of Nursing. The purposes of this survey are to (a) examine the experiences of parents of children with special needs in accessing quality child care, (b) to help identify any barriers you may have experienced in accessing such care, and (c) to obtain your views of what you feel child care providers need in order to provide quality services for your child with special needs. The results of the survey will be used to identify educational needs of child care providers in providing quality child care for children with special needs. The demographic questions asked in the survey are for statistical purposes only and individual respondents will not be identified in any of the findings or reports. This survey contains several different types of questions. We appreciate your careful responses.

1. What is the zip code of your home residence?

2. Do you have any children who have special needs?

3. If you answered yes to question #2, what is/are the ages of your child/children with special needs?

4. If the individual completing this survey is not the parent, could you please describe what your relationship is with the child (i.e. grandparent, family friend, etc.)?

5. Is your child with special needs currently attending a child care program?

Yes___No___

6. If you answered yes to question #5, in which type of child care program is your child enrolled? (Please mark all that apply)

Family Child Care Home I (Program in the home of the provider; maximum capacity is eight children of mixed ages and two additional school age children during non-school hours.)

Family Child Care Home II (Program in the home of the provider or another site; maximum capacity is twelve with two providers.)

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- Child Care Center (Program licensed for at least 13 children)
- Preschool (Program providing educational services where children do not nap and are not fed a meal.)
- Head Start
- School Age/After School Programs

Other (please specify)

7. Does your child with special needs have problems with mobilty?

- Yes
- No

8. Has your child with special needs ever been diagnosed with any of the following conditions? (Please mark all that apply)

- Asthma
- Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD)
- Autism or Autism Spectrum Disorder
- Behavior problems (i.e. temper tantrums bullying or being bullied, biting etc)
- Mental retardation
- Developmental delay
- Language delay
- Hearing impairment
- Depression, anxiety and eating disorder or other emotional problem
- Diabetes
- Heart problem, including congenital heart disease
- Blood problem such as anemia or sickle cell disease (no including sickle cell trait)
- Cystic fibrosis
- Cerebral palsy
- Muscular Dystrophy
- Epilepsy or seizure disorder
- Mobility problems
- Migraine or frequent headaches
- Arthritis or other joint problems
- Environmental allergies
- Food allergies
- Skin disorders
- HIV

Other (please specify)

9. Did you encounter any difficulty in the ability to find a quality child care program that would accept your child with special needs?

- Yes
- No

10. If you answered yes to question #9, what were the reason(s) you were given as to why your child was not accepted to the child care program?

11. What difficulties/barriers have you encountered in accessing child care for your child with special needs? (Please mark all that apply)

- Child care program lacked budget to care for a child with special needs

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- ☐ Child care program lacked equipment needed for my child
- ☐ Child care staff had inadequate training
- ☐ Other parents objected to having a child with special needs in program
- ☐ Transportation issues for my child
- ☐ Child care staff had no experience working with children with special needs (even if trained)
- ☐ Child care program unable to provide the needed care (i.e. feeding tubes, insulin injections, etc.)
- ☐ Child care program lacked enough staff
- ☐ Child care program lacked accessibility to building, playground, and/or parking lot
- ☐ Child care program was unable to provide an interpreter
- ☐ Unsure
- ☐ NA
- ☐ No problems or barriers encountered

Other (please specify)

12. Have you or any other family member had to stop working because you were unable to find quality child care for your child?

- ○ Yes
- ○ No

13. Have you or any other family member had to cut back on hours at work because you were unable to find quality child care for your child?

- ○ Yes
- ○ No

14. Have you had to hire somebody to come into your home because you were unable to find quality child care for your child?

- ○ Yes
- ○ No

15. When looking for child care, did you find that you had choices (i.e. more than one program to choose from) of quality child care for your child?

- ○ Yes
- ○ No

16. Did you ever find yourself in the situation where you found a quality child care program, but decided you were not ready to place your child in a program?

- ○ Yes
- ○ No

For the following questions please mark the rating by filling in the circle that is closest to how you feel about each of the following statements using the scale: Strongly Agree, Agree, Strongly Disagree, Disagree, NA

17. I am aware of early intervention services in my community that I can access for my child.

- ○ Strongly Agree
- ○ Agree

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- Strongly Disagree
- Disagree
- NA

18. I am aware of special education services in my community that I can access for my child.

- Strongly Agree
- Agree
- Strongly Disagree
- Disagree
- NA

19. I know of resources in my community in which I can access to assist me with my child.

- Strongly Agree
- Agree
- Strongly Disagree
- Disagree
- NA

20. I need more support in caring for my child.

- Strongly Agree
- Agree
- Strongly Disagree
- Disagree
- NA

21. I obtain most of my information and resources about children with special needs from the internet.

- Strongly Agree
- Agree
- Strongly Disagree
- Disagree
- NA

22. Where would you seek information on child care programs? (Please mark all that apply)

- Health care professional
- Other parents
- Internet
- Public library
- Licensing Specialist
- Early Childhood Media Center
- Child care consultant
- Local Health Department
- Early Development Network
- Public School/Educational Service Unit
- Unsure

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Other (please specify)

The purpose of the following questions is for statistical purposes only and individual respondents will not be identified in any of the findings or reports.

23. What is your gender?

- Female
- Male

24. What is your race/ethnicity?

- White/non-Hispanic
- African-American
- Hispanic
- Asian-Pacific Islander
- Native American

Other (please specify)

25. What is your age?

Age_____

26. Does anyone in your household speak a language besides English?

- Yes
- No

If yes, what language(s)?

27. What is the total combined income of your household before taxes?

- Less than $10,000
- $10,000 to $29,999
- $30,000 to $49,999
- $50,000 to $69,999
- $70,000 to $89,999
- $90,000 to $99,999
- $100,000 to $149,999
- $150,000 or more
- Prefer not to answer

28. What is the highest degree or level of school you have completed?

- Elementary school only
- Some high school, but did not finish
- High School/GED
- Some college, did not finish
- Two-year college degree
- Four-year college degree
- Some graduate work
- Completed Master's or professional degree
- Advanced Graduate work or PhD

29. Please describe any other issues you've had in accessing quality child care for your child with special needs or add any additional comments you would like to make.

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Thank you for your participation.

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Appendix C

Qualitative Results

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#10 If you answered yes to question #9, what were the reason(s) you were given as to why your child was not accepted to the child care program?
68507 (Lincoln)"Teachers aren't equipped to handle kids like that. Not enough staff. Not enough knowledge.
Zip Code (other) Unable to deal with toileting needs. Do not have experience to deal with special needs.
Zip Code (68847) (Kearney) Didn't accept special needs kids.
Zip Code (68301) (Adams) My children have a lot of problems and the staff didn't think they could handle them.
Zip Code (68502) (Lincoln) He hits other children so it's hard to put him into daycare.
Zip Code (68128) (La Vista) Behavioral referrals from school and not too many certified ones in the city.
Zip Code (68065) (Valparaiso) Child was considered "too busy" and couldn't be watched well enough. Also, because of her impulsiveness, she was considered a "safety risk" and people did not want to be responsible for her.
Zip Code (68002) (Elkhorn) They didn't feel comfortable with his seizures.
Zip Code (68005) (Bellevue) No specific reasons were given by any of the facilities we looked at, they all had generic responses such as "our facility is not equipped for those concerns" or "we don't feel like we would be able to accommodate your child to the level he deserves". Basic responses like that
Zip Code (68005) (Bellevue) The staff didn't feel they could handle all of the problems my kids has. They weren't sure what to do.
Zip Code (68117) (Omaha) Staff did not know sign language.
Zip Code (68002) (Arlington) Not potty trained.
Zip Code (69031) (Hamlet) The place didn't have enough staff to help my grandchild and was not equipped to deal with the handicapped.
Zip Code (68198) (Omaha) A couple of places that I tried to have my child enrolled were concerned that other parents might have a problem with my kid. They didn't exactly say no, but did not welcome my kid with open arms, so I kept looking.

#29. Please describe any other issues you've had in accessing quality child care for your child with special needs or any additional comments you would like to make.
Zip Code (68048) (Plattsmouth) Schools have difficulty providing day care.
Zip Code (68414) (Nemaha) Child hits himself and others, bites, claws, scratches, breaks things, throws things
Zip Code (68701) (Norfolk) Would like to find support groups or seminars.
Zip Code (68502) (Lincoln) It's his behavior and getting mad real quick.
Zip Code (69155) (Paxton) There is not enough child care available in this area. I also was able to access the respite program but still finding there are not enough providers in the area either.
Zip Code (68502) (Lincoln) It would be nice to have other parents who have special

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needs children to talk with.
Zip Code (68065) (Valparaiso) I have a hard time entrusting the care of my daughter in the care of others. For people I know and trust, I do not want to burden them or overwhelm them. Others I just don't trust their ability to adequately supervise her.
Zip Code (68022) (Elkhorn) I wish there was a pool of trained nurses who could babysit as needed.
Zip Code (68005) (Bellevue) We ended up finding a licensed in home daycare fun by a woman who was more than happy to learn anything.
Zip Code (68172) (Omaha) It was very hard to find a place that would accept my kid. I work as a CNA and we really need the income, but it was so hard to find a place that could handle my baby. I am pretty happy where I am at, but I just sort of accepted it, since no one else would take him. If I had a choice, he would be in a different location, or if I had the money, I would take care of him myself and not have to worry so much about whether or not he is getting the attention he needs so bad.
Zip Code (68123) (Bellevue) I home school my child due to his autism. He can be very difficult. I understand why day cares don't want him, but it makes it very difficult to make a living. I am a single parent. I am so happy I found the place my child is at. I have to work all day and then home school after he is done with day care. I really could use more support, help, I don't know what other kind of help is out there for sure.
Zip Code (other) Funding for child care.
Zip Code (68005) (Bellevue) Is there a Web site with a list of other parents and their contact information who have children with special needs? It would be helpful to talk with them, get referrals and just find out general information that I don't know about.
Zip Code (68467) (York) My child is 10, but I remember clearly not being wanted in daycare. It broke my heart. I fought it and got her in…at another daycare. I had to go to meetings weekly to review her behaviors, always with the implication that she might have to leave. Only one place I have gone did not bat an eye at the Down Syndrome, and then they were not a very safe place.
Zip Code (68305) (Auburn) I live in an area where, as far as I know, there are no such programs. I tried to get her into head start and was told we made too much, but the preschool program won't take her because of her needs. Now, at the age she it, no one wants to watch her.

Zip Code (68510) (Lincoln) How to address child's needs or parent concerns with teacher without causing turmoil.
Zip Code (other) A place to contact other parents to talk with about similar issues with their children, meaning their special needs.

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Appendix D

Quantitative Survey Results

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		Urban (Non-Metro)			Urban (Metro)			Rural		131	Other (Undefined)			Urban (Total)			Overall (Total)	
		Count	% (n=17)	% (n=131)	Count	% (n=67)	% (n=131)	Count	% (38)	% (n=131)	Count	% (n=9)	% (n=131)	Count	% (n=34)	% (n=131)	Count	% (n=131)
Do you have any children who have special needs?	Yes	17			67			38			9			84			131	
	No	0			0			0			0			0			0	
Is your child with special needs currently attending a child care progr	Yes	13	76%	10%	51	76%	39%	0	58%	0%	8	89%	6%	64	76%	49%	94	72%
	No	4	24%	3%	16	24%	12%	16	42%	12%	1	11%	1%	20	24%	15%	37	28%
Family Child Care Home I (Program in the home of the provider; maximum capacity is		1	8%	1%	3	6%	2%	4	18%	3%	0	0%	0%	4	6%	3%	8	9%
Family Child Care Home II (Program in the home of the provider or another site; maxir		1	8%	1%	2	4%	2%	0	0%	0%	2	25%	2%	3	5%	2%	5	5%
Child Care Center (Program licensed for at least 13 children)		5	38%	4%	29	57%	22%	12	55%	9%	3	38%	2%	34	53%	26%	49	52%
Preschool (Program providing educational services where children do not nap and are		0	0%	0%	5	10%	4%	3	14%	2%	1	13%	1%	5	8%	4%	9	10%
Head Start		6	46%	5%	2	4%	2%	0	0%	0%	2	25%	2%	8	13%	6%	10	11%
School Age/After School Programs		3	23%	2%	13	25%	10%	4	18%	3%	1	13%	1%	16	25%	12%	21	22%
Does your child with special needs have problems with mobilty?	Yes	5	29%	4%	28	42%	21%	17	45%	13%	3	33%	2%	33	39%	25%	53	40%
	No	12	71%	9%	39	58%	30%	21	55%	16%	5	56%	4%	51	61%	39%	77	59%
Has your child with special needs ever been diagnosed with any of the following conditions? (Please mark all that apply)																		
Asthma		2	12%	2%	5	7%	4%	5	13%	4%	2	22%	2%	7	8%	5%	14	11%
Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD)		3	18%	2%	8	12%	6%	4	11%	3%	2	22%	2%	11	13%	8%	17	13%
Autism or Autism Spectrum Disorder		4	24%	3%	17	25%	13%	6	16%	5%	2	22%	2%	21	25%	16%	29	22%
Behavior problems (i.e. temper tantrums bullying or being bullied, biting etc)		6	35%	5%	14	21%	11%	7	18%	5%	2	22%	2%	20	24%	15%	29	22%
Mental retardation		2	12%	2%	19	28%	15%	10	26%	8%	0	0%	0%	21	25%	16%	31	24%
Developmental delay		14	82%	11%	48	72%	37%	22	58%	17%	5	56%	4%	62	74%	47%	89	68%
Language delay		9	53%	7%	32	48%	24%	21	55%	16%	3	33%	2%	41	49%	31%	65	50%
Hearing impairment		0	0%	0%	6	9%	5%	4	11%	3%	0	0%	0%	6	7%	5%	10	8%
Depression, anxiety and eating disorder or other emotional problem		0	0%	0%	4	6%	3%	3	8%	2%	0	0%	0%	4	5%	3%	7	5%
Heart problem, including congenital heart disease		1	6%	1%	6	9%	5%	2	5%	2%	1	11%	1%	7	8%	5%	10	8%
Blood problem such as anemia or sickle cell disease (no including sickle cell trait)		0	0%	0%	1	1%	1%	1	3%	1%	1	11%	1%	1	1%	1%	3	2%
Cerebral palsy		1	6%	1%	15	22%	11%	1	3%	1%	0	0%	0%	16	19%	12%	17	13%
Muscular Dystrophy		0	0%	0%	0	0%	0%	2	5%	2%	0	0%	0%	0	0%	0%	2	2%
Epilepsy or seizure disorder		2	12%	2%	16	24%	12%	4	11%	3%	3	33%	2%	18	21%	14%	25	19%
Mobility problems		5	29%	4%	20	30%	15%	13	34%	10%	1	11%	1%	25	30%	19%	39	30%
Migraine or frequent headaches		1	6%	1%	2	3%	2%	1	3%	1%	0	0%	0%	3	4%	2%	4	3%
Arthritis or other joint problems		0	0%	0%	3	4%	2%	1	3%	1%	1	11%	1%	3	4%	2%	5	4%
Environmental allergies		1	6%	1%	7	10%	5%	4	11%	3%	0	0%	0%	8	10%	6%	12	9%
Food allergies		2	12%	2%	7	10%	5%	2	5%	2%	1	11%	1%	9	11%	7%	12	9%
Skin disorders		1	6%	1%	2	3%	2%	1	3%	1%	0	0%	0%	3	4%	2%	4	3%
Did you encounter any difficulty in the ability to find a quality child ca	Yes	10	77%	8%	33	65%	25%	19	86%	15%	3	38%	2%	43	67%	33%	65	69%
Child care program lacked budget to care for a child with special needs		4	40%	3%	9	27%	7%	8	42%	6%	0	0%	0%	13	30%	10%	21	32%
Child care program lacked equipment needed for my child		1	10%	1%	7	21%	5%	5	26%	4%	2	67%	2%	8	19%	6%	15	23%
Child care staff had inadequate training		6	60%	5%	24	73%	18%	14	74%	11%	3	100%	2%	30	70%	23%	47	72%
Other parents objected to having a child with special needs in program		3	30%	2%	9	27%	7%	2	11%	2%	0	0%	0%	12	28%	9%	14	22%
Transportation issues for my child		2	20%	2%	9	27%	7%	3	16%	2%	0	0%	0%	11	26%	8%	14	22%
Child care staff had no experience working with children with special needs (even if tra		7	70%	5%	17	52%	13%	11	58%	8%	2	67%	2%	24	56%	18%	37	57%
Child care program unable to provide the needed care (i.e. feeding tubes, insulin injec		3	30%	2%	7	21%	5%	6	32%	5%	2	67%	2%	10	23%	8%	18	28%
Child care program lacked enough staff		4	40%	3%	15	45%	11%	9	47%	7%	0	0%	0%	19	44%	15%	28	43%
Child care program lacked accessibility to building, playground, and/or parking lot		2	20%	2%	3	9%	2%	3	16%	2%	0	0%	0%	5	12%	4%	8	12%
Child care program was unable to provide an interpreter		0	0%	0%	1	3%	1%	0	0%	0%	0	0%	0%	1	2%	1%	1	2%
Unsure		0	0%	0%	1	3%	1%	2	11%	2%	0	0%	0%	1	2%	1%	3	5%
NA		1	10%	1%	2	6%	2%	1	5%	1%	0	0%	0%	3	7%	2%	4	6%
No problems or barriers encountered		0	0%	0%	2	6%	2%	0	0%	0%	0	0%	0%	2	5%	2%	2	3%
Have you or any other family member had to stop working because y	Yes	3	18%	2%	15	22%	11%	12	32%	9%	2	22%	2%	18	21%	14%	32	24%
	No	14	82%	11%	50	75%	38%	23	61%	18%	4	44%	3%	64	76%	49%	91	69%

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Have you or any other family member had to cut back on hours at wo	Yes	7	41%	5%	25	37%	19%	13	34%	10%	4	44%	3%	32	38%	24%	49	37%
	No	10	59%	8%	40	60%	31%	22	58%	17%	1	11%	1%	50	60%	38%	73	56%
Have you had to hire somebody to come into your home because you	Yes	6	35%	5%	12	18%	9%	8	21%	6%	1	11%	1%	18	21%	14%	27	21%
	No	11	65%	8%	54	81%	41%	27	71%	21%	5	56%	4%	65	77%	50%	97	74%
When looking for child care, did you find that you had choices (i.e. m	Yes	10	59%	8%	19	28%	15%	11	29%	8%	1	11%	1%	29	35%	22%	41	31%
	No	7	41%	5%	46	69%	35%	24	63%	18%	5	56%	4%	53	63%	40%	82	63%
Did you ever find yourself in the situation where you found a quality c	Yes	4	24%	3%	7	10%	5%	8	21%	6%	2	22%	2%	11	13%	8%	21	16%
	No	13	76%	10%	57	85%	44%	27	71%	21%	4	44%	3%	70	83%	53%	101	77%
I am aware of early intervention services in my community that I can	Strongly A	7	41%	5%	35	52%	27%	14	37%	11%	4	44%	3%	42	50%	32%	60	46%
	Agree	9	53%	7%	22	33%	17%	15	39%	11%	2	22%	2%	31	37%	24%	48	37%
	Strongly D	0	0%	0%	1	1%	1%	0	0%	0%	0	0%	0%	1	1%	1%	1	1%
	Disagree	1	6%	1%	5	7%	4%	3	8%	2%	0	0%	0%	6	7%	5%	9	7%
	NA	0	0%	0%	1	1%	1%	1	3%	1%	0	0%	0%	1	1%	1%	2	2%
I am aware of special education services in my community that I can	Strongly A	5	29%	4%	28	42%	21%	16	42%	12%	2	22%	2%	33	39%	25%	51	39%
	Agree	10	59%	8%	25	37%	19%	13	34%	10%	3	33%	2%	35	42%	27%	51	39%
	Strongly D	0	0%	0%	4	6%	3%	1	3%	1%	0	0%	0%	4	5%	3%	5	4%
	Disagree	1	6%	1%	4	6%	3%	3	8%	2%	1	11%	1%	5	6%	4%	9	7%
	NA	1	6%	1%	3	4%	2%	0	0%	0%	0	0%	0%	4	5%	3%	4	3%
I know of resources in my community in which I can access to assist n	Strongly A	3	18%	2%	17	25%	13%	13	34%	10%	2	22%	2%	20	24%	15%	35	27%
	Agree	12	71%	9%	35	52%	27%	11	29%	8%	4	44%	3%	47	56%	36%	62	47%
	Strongly D	0	0%	0%	4	6%	3%	2	5%	2%	0	0%	0%	4	5%	3%	6	5%
	Disagree	1	6%	1%	5	7%	4%	6	16%	5%	0	0%	0%	6	7%	5%	12	9%
	NA	1	6%	1%	2	3%	2%	0	0%	0%	0	0%	0%	3	4%	2%	3	2%
I need more support in caring for my child.	Strongly A	0	0%	0%	14	21%	11%	9	24%	7%	0	0%	0%	14	17%	11%	23	18%
	Agree	10	59%	8%	21	31%	16%	12	32%	9%	2	22%	2%	31	37%	24%	45	34%
	Strongly D	2	12%	2%	1	1%	1%	3	8%	2%	1	11%	1%	3	4%	2%	7	5%
	Disagree	5	29%	4%	21	31%	16%	8	21%	6%	3	33%	2%	26	31%	20%	37	28%
	NA	0	0%	0%	6	9%	5%	1	3%	1%	0	0%	0%	6	7%	5%	7	5%
I obtain most of my information and resources about children with spe	Strongly A	6	35%	5%	10	15%	8%	6	16%	5%	1	11%	1%	16	19%	12%	23	18%
	Agree	4	24%	3%	21	31%	16%	13	34%	10%	3	33%	2%	25	30%	19%	41	31%
	Strongly D	1	6%	1%	8	12%	6%	3	8%	2%	0	0%	0%	9	11%	7%	12	9%
	Disagree	6	35%	5%	24	36%	18%	7	18%	5%	2	22%	2%	30	36%	23%	39	30%
	NA	0	0%	0%	1	1%	1%	3	8%	2%	0	0%	0%	1	1%	1%	4	3%
Where would you seek information on child care programs? (Please mark all that apply)																		
Health care professional	Checked	9	53%	7%	46	69%	35%	15	39%	11%	3	33%	2%	55	65%	42%	73	56%
Other parents	Checked	13	76%	10%	51	76%	39%	26	68%	20%	4	44%	3%	64	76%	49%	94	72%
Internet	Checked	8	47%	6%	32	48%	24%	18	47%	14%	3	33%	2%	40	48%	31%	61	47%
Public library	Checked	0	0%	0%	2	3%	2%	2	5%	2%	0	0%	0%	2	2%	2%	4	3%
Licensing Specialist	Checked	5	29%	4%	12	18%	9%	7	18%	5%	0	0%	0%	17	20%	13%	24	18%
Early Childhood Media Center	Checked	3	18%	2%	4	6%	3%	1	3%	1%	1	11%	1%	7	8%	5%	9	7%
Child care consultant	Checked	3	18%	2%	13	19%	10%	3	8%	2%	1	11%	1%	16	19%	12%	20	15%
Local Health Department	Checked	4	24%	3%	9	13%	7%	6	16%	5%	0	0%	0%	13	15%	10%	19	15%
Early Development Network	Checked	8	47%	6%	25	37%	19%	10	26%	8%	1	11%	1%	33	39%	25%	44	34%
Public School/Educational Service Unit	Checked	7	41%	5%	29	43%	22%	13	34%	10%	0	0%	0%	36	43%	27%	49	37%
Unsure	Checked	1	6%	1%	2	3%	2%	3	8%	2%	0	0%	0%	3	4%	2%	6	5%
What is your gender?	Female	16	94%	12%	54	81%	41%	29	76%	22%	6	67%	5%	70	83%	53%	105	80%
	Male	1	6%	1%	10	15%	8%	4	11%	3%	0	0%	0%	11	13%	8%	15	11%
What is your race/ethnicity?	White/non-	13	76%	10%	60	90%	46%	29	76%	22%	5	56%	4%	73	87%	56%	107	82%
	African-Am	1	6%	1%	1	1%	1%	3	8%	2%	0	0%	0%	2	2%	2%	5	4%
	Hispanic	1	6%	1%	0	0%	0%	1	3%	1%	1	11%	1%	1	1%	1%	3	2%
	Asian-Pac	0	0%	0%	1	1%	1%	0	0%	0%	0	0%	0%	1	1%	1%	1	1%
	Native Am	0	0%	0%	1	1%	1%	0	0%	0%	0	0%	0%	1	1%	1%	1	1%

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What is your age?	Mean	40			38			39			32							
Does anyone in your household speak a language besides English?	Yes	1	6%	1%	4	6%	3%	1	3%	1%	1	11%	1%	5	6%	4%	7	5%
	No	0	0%	0%	0	0%	0%	0	0%	0%	0	0%	0%	0	0%	0%	0	0%
What is the total combined income of your household before taxes?	Less than	2	12%	2%	0	0%	0%	0	0%	0%	1	11%	1%	2	2%	2%	3	2%
	$10,000 to	3	18%	2%	7	10%	5%	5	13%	4%	0	0%	0%	10	12%	8%	15	11%
	$30,000 to	3	18%	2%	9	13%	7%	6	16%	5%	2	22%	2%	12	14%	9%	20	15%
	$50,000 to	3	18%	2%	14	21%	11%	9	24%	7%	1	11%	1%	17	20%	13%	27	21%
	$70,000 to	1	6%	1%	7	10%	5%	4	11%	3%	0	0%	0%	8	10%	6%	12	9%
	$90,000 to	2	12%	2%	5	7%	4%	3	8%	0%	0	0%	0%	7	8%	5%	10	8%
	$100,000 t	0	0%	0%	9	13%	7%	1	3%	1%	0	0%	0%	9	11%	7%	10	8%
	$150,000 (	0	0%	0%	0	0%	0%	1	3%	1%	1	11%	1%	0	0%	0%	2	2%
	Prefer not	2	12%	2%	11	16%	8%	3	8%	2%	1	11%	1%	13	15%	10%	17	13%
What is the highest degree or level of school you have completed?	Elementar	0	0%	0%	0	0%	0%	0	0%	0%	0	0%	0%	0	0%	0%	0	0%
	Some high	1	6%	1%	3	4%	2%	1	3%	1%	0	0%	0%	4	5%	3%	5	4%
	High Scho	2	12%	2%	7	10%	5%	5	13%	4%	0	0%	0%	9	11%	7%	14	11%
	Some colle	4	24%	3%	13	19%	10%	4	11%	3%	2	22%	2%	17	20%	13%	23	18%
	Two-year c	3	18%	2%	11	16%	8%	8	21%	6%	1	11%	1%	14	17%	11%	23	18%
	Four-year	3	18%	2%	19	28%	15%	9	24%	7%	1	11%	1%	22	26%	17%	32	24%
	Some grad	2	12%	2%	3	4%	2%	4	11%	3%	1	11%	1%	5	6%	4%	10	8%
	Completed	1	6%	1%	8	12%	6%	2	5%	2%	0	0%	0%	9	11%	7%	11	8%
	Advanced	1	6%	1%	0	0%	0%	0	0%	0%	0	0%	0%	1	1%	1%	1	1%

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