

Who provides early care and education for young children with special needs?

Findings from the 2012 National Survey of Early Care and Education

Introduction

This Snapshot uses data from the 2012 National Survey of Early Care and Education (NSECE) to examine caregiving arrangements for young children with special needs¹ to better understand where these children receive early care and education (ECE) services. Findings in this Snapshot are focused on children under age 6 and ECE providers serving children under age 6.

Key Findings

According to analyses of the 2012 NSECE:

- Roughly 5 percent (1.2 million) of the 23 million children under age 6 in the United States had a condition that affected the way their parent cared for them. This condition includes children with diagnosed or undiagnosed disabilities, special health care needs, and behavioral or emotional needs.
- Nearly one third (32%) of children under age 6 without special needs were cared for solely by their parents, compared to nearly one fifth (19%) of children under age 6 with special needs.
- Among children with special needs, the most commonly used nonparental care type was center-based care. Twenty-five percent of children with special needs used center-based care, compared to 20 percent of children without special needs.
- A greater proportion of children with special needs relied on a combination of nonparental care types (20%), compared to their peers without special needs (13%).
- Thirty-three percent of centers that serve children under age 6 cared for at least one child with a physical condition that affected their care.
- Twenty-two percent of listed home-based providers that serve children under age 6 cared for at least one child with a condition that affected their care.

¹ In this Snapshot, we opted for using “special needs” because the sample of children include children whose conditions affected their care but may not meet the eligibility criteria for IDEA services. We recognize the limitations of the “special needs” term, and affirm each person’s right to self-identify the way they wish.

Glossary

Children with special needs

We refer to children with conditions that affect their care as children with *special needs*. These children may or may not have officially diagnosed disabilities, as their disability status in the survey is unknown. However, they are reported by caregivers to require accommodations.

Provider

Provider refers to a program providing early care and education services. These providers may be center-based or home-based.

Children under age 6

Findings in this snapshot include *children under age 6*, not yet in kindergarten.

Regular care

Regular care is defined as care that a child attended for at least five hours during the surveyed week.

Data and Methods

This Snapshot is based on information collected in the National Survey of Early Care and Education (NSECE), a set of four integrated, nationally representative surveys (household survey, center-based provider survey, center-based workforce survey, home-based provider survey) that characterize the supply of and demand for ECE in the United States. Though comparisons are present throughout this Snapshot, tests to identify significant differences were not conducted. Data presented here come from the following surveys:

Household survey

The household survey characterizes ECE needs and preferences for households across the United States with children under age 13. Parents or guardians in the household responded to questions detailing the types of early care and education utilized, the cost of that care, and demographic information on the family members in the household.

This Snapshot is focused on an estimated 23 million children under age 6, not yet in kindergarten. This included children up to 72 months old, excluding those children between the ages of 60 and 72 months who received care from an elementary school teacher. To identify children with special needs, respondents reported if each child in the household had **“a physical, emotional, developmental, or behavioral condition that affects the way you provide care for him/her”**.

Center-based provider survey

The center-based provider survey provides details about center-based early care and education programs that serve children under age 13. Respondents provided information about their program, including details about the services provided, workforce policies, and characteristics of children served.

This series focused on the estimated 129,000 center-based programs caring for children under age 6, not yet in kindergarten. To identify programs that worked with children with special needs, respondents reported the number of children enrolled in the program who had **“a physical condition that affects the way your program serves them”**.

Home-based provider survey

The home-based provider survey provides details about home-based providers caring for children under age 13, including information about services offered, workforce qualifications, and characteristics of children served. Home-based providers could have been listed on a state or federal registry of providers (referred to as ‘listed’) or unlisted. **Listed providers** may include licensed, regulated, registered, or license-exempt providers. **Unlisted providers**, who were identified through the household screener, included both paid and unpaid providers (see this NSECE [technical report](#) for additional details about unlisted home-based providers).

This series focused on the roughly 118,000 listed and 3,649,000 unlisted providers caring for children under age 6. To identify programs that worked with children with special needs, respondents reported the total number of children cared for with **“an emotional, developmental, or behavioral issue that affects the way the provider cares for him or her”**.

How many young children have a condition that affects their care?

According to the 2012 NSECE household survey, there were 23 million children under age 6 in the United States. Of those children, roughly 1.2 million (5%), had a condition that affected the way their parents cared for them such as a physical, emotional, developmental, or behavioral condition. These children may or may not have diagnosed disabilities or receive early intervention or early childhood special education services.²

Parents of children who have a condition that affects their care need *quality* child care arrangements so that parents are able to work to provide for their families while getting their child's needs met. However, prior to this Snapshot, there has been a lack of research identifying who provides ECE services for children under age 6 with special needs.



1.2 million

children under age 6 have conditions that affect their care

Source. 2012 NSECE household survey

Who provides care for children with special needs?

The 2012 NSECE household survey asks respondents to report the nonparental care their child(ren) received in the week prior to survey administration. The NSECE assumes any time a child does not spend in nonparental care is spent with their parent. The NSECE Project Team (2016) used these data to identify the types of regular nonparental care types children regularly used (Table 1). **Regular care** is defined as care that a child attended for at least five hours during the surveyed week.³

Importantly, categorizing the *types* of regular care a child utilizes does not speak to the number of *individual providers* from whom children receive that care. For example, it is possible that a child utilizes only one type of care (e.g., center-based care), but receives that care from multiple, unique providers (e.g., a Head Start provider in the morning, followed by a community-based provider in the afternoon). If, collectively, that child attended at least five hours of center-based care across the multiple providers during the surveyed week, center-based care would be noted as a regular care arrangement for that child.

Table 1. Classification of children's regular care types

Type of Care	Definition
Center-based care	Head Start, public pre-K, community-based providers.
Paid individual care	An individual with whom the child may or may not have a prior personal relationship and who receives payment for caring for the child (e.g., home-based provider or babysitter who receives payment for caring for the child).
Unpaid individual care	An individual with whom the child may or may not have a prior personal relationship and who does not receive payment for caring for the child (e.g., grandmother or sibling who does not receive payment).
Other organizational ECE	Organizational ECE care that does not fit into the center-based category (e.g., church child care, recreational activities).

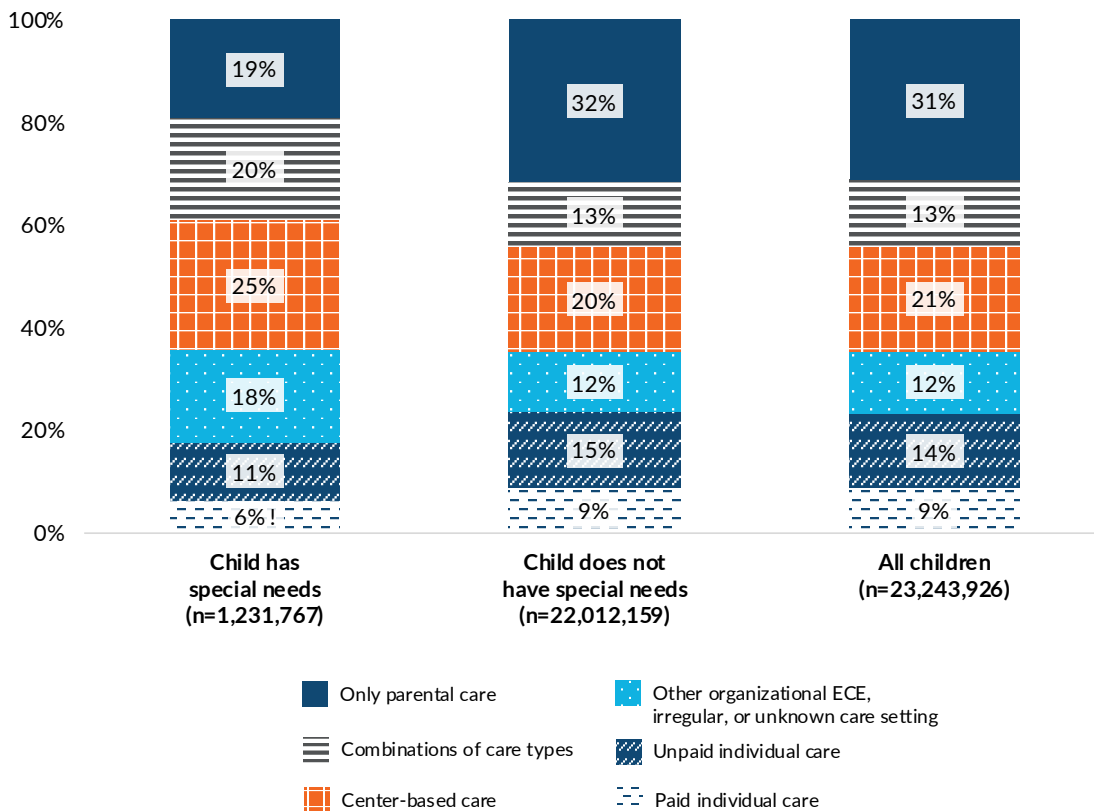
² Other surveys, such as the National Survey of Children's Health (NSCH), have used more comprehensive measures of special need, which may lead to differences between the NSECE and other nationally representative estimates of the number of children under age 6 with special needs. The 2011-2012 NSCH includes a five-item parent-reported tool to identify children with special health care needs. This set of NSCH items—broader than the singular item included in the 2012 NSECE household survey—suggests 11.4 percent of children under age 6 nationwide have special health care needs (Child and Adolescent Health Measurement Initiative, 2012).

³ For more information about how children utilize types of nonparental care, see: *How are Low-Income Households Using Nonparental Care for Children Under 6.*

Type of Care	Definition
Only irregular care	An irregular care provider cares for the child fewer than five hours weekly. The care arrangement may otherwise meet the requirements for one of the care types listed above. This care type classification is reserved for children who only received nonparental care from multiple irregular care arrangements that collectively sum to five or more hours weekly.
Unknown care setting	Regular nonparental care setting, but there is inadequate information to assign the provider into a specific care type category.
Combinations of nonparental care types	Child regularly uses two or more nonparental care types identified above.
Only parental care	Child uses only parental care and does not regularly use the nonparental care types identified above. A child will be classified as using only parental care if their use of a nonparental care type totals less than five hours (i.e., is not considered regular care).

Figure 1 reports the proportion of children *with* and *without* special needs that regularly utilized either a single type or a combination of nonparental care types. Due to small sample sizes, children who utilized other organizational ECE, only irregular care, or unknown care setting are reported as one group.

Figure 1: Care arrangements for children under age 6, by special need status



Source. 2012 NSECE household survey

Note. Sample includes children birth to five, not yet in kindergarten. Excludes 845,828 weighted cases where parent did not disclose child's special needs status and 10,927 weighted cases where child without special needs spent time in K-8 care, despite not being in kindergarten.

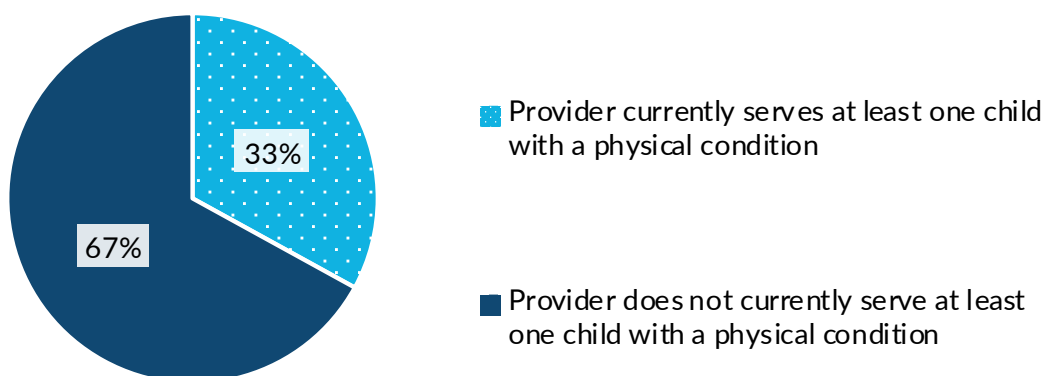
! Estimation is based on an unweighted sample (n<50); interpret with caution.

- **Only one-fifth (19%) of children *with* special needs used parental care as their only regular source of child care.** In contrast, among children under 6 *without* special needs, nearly a third (32%) were cared for by parents only.
- **Among children under 6 *with* special needs, the most commonly used regular nonparental care type was center-based care.** Twenty-five percent of children *with* special needs regularly used center-based care, compared to 20 percent of children *without* special needs.
- **A greater proportion of children *with* special needs regularly relied on a combination of care types (20%) compared to their peers without special needs (13%).** This finding suggests children *with* special needs have care arrangements that incorporate two or more care types more often than children *without* special needs; however, this finding does not speak to the number of *providers* within each care type a child has.
- **Children *without* special needs regularly received care from both paid and unpaid individual caregivers more commonly than children *with* special needs.** Fifteen percent of children *without* special needs used paid individual care, compared to 11 percent of children *with* special needs. Nine percent of children *without* special needs used unpaid individual care, compared to 6 percent of children *with* special needs.

What proportion of center-based providers serve children with special physical conditions?

In the center-based provider survey, providers were asked about the number of children they currently serve who have a physical condition⁴ that affects their care. Approximately 33 percent of center-based providers reported that they were currently serving at least one child *with* a physical condition that affected their care.

Figure 2. Percentage of center-based providers that enroll at least one child with a physical condition that affects his/her care (n=124,482)



Source. 2012 NSECE center-based provider survey

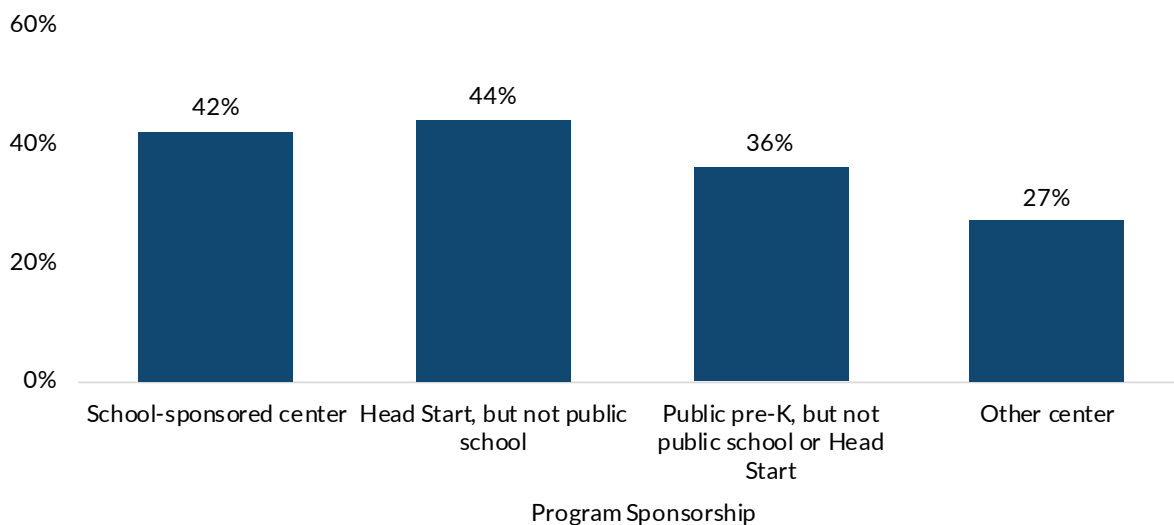
Note. Sample include center-based providers serving children under age 6. Excludes 4,794 weighted cases where the center-based provider did not respond to the question.

⁴ The center-based survey differed from the household survey in that it only asked about physical conditions that affect care, whereas the household survey asked families about physical, emotional, developmental, or behavioral concerns that affected care.

Provider sponsorship

There were observed differences by provider funding (i.e., sponsorship or auspice) in the rates at which center-based providers reported caring for children *with* physical needs (Figure 3). Children with other needs (e.g., emotional, behavioral, or developmental needs) are not included in these rates. Center-based providers with public funding such as Head Start, public pre-kindergarten (pre-K), and school-sponsored centers tended to report serving at least one child *with* a physical condition at higher rates than other types of center-based providers (36–44% versus 27%). Publicly funded providers typically have mandates to serve children with special needs or disabilities. For example, the Head Start Program Performance Standards (U.S. Department of Health and Human Services, 2016) require providers to reserve 10 percent of slots for children with a disability. It is important to remember when reviewing these responses that providers were asked about physical conditions that affect children’s care, not about the number of children with a special need affecting their care or with a diagnosed disability in their center.

Figure 3. Percentage of center-based providers that currently enroll at least one child with a physical condition that affects his/her care, by provider sponsorship/auspice (n=124,482)



Source. 2012 NSECE center-based provider survey

Note. Sample include center-based providers serving children under age 6. Excludes 4,794 weighted cases where the center-based provider did not respond to the question.

A: Providers often receive funding from multiple sources, making it difficult to create mutually exclusive funding categories. The designation used here reflects a sequential categorization in which centers were first designated as school-sponsored centers (which could include Head Start or public pre-k). Then, among the remaining non-school-sponsored centers, providers were categorized into each of the remaining funding sources (i.e., Head Start, public pre-K, and other). Providers that are designated as “other” are not funded via public schools, Head Start, or public pre-K, but may receive other public funding, such as state-based subsidies.

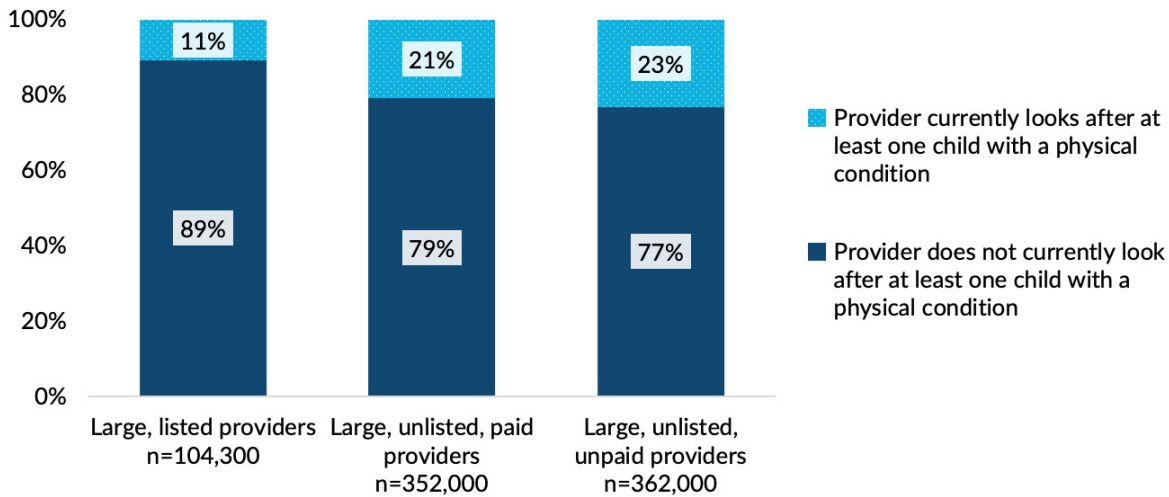
What proportion of large, home-based providers serve children with special physical conditions?

The 2012 NSECE home-based provider survey categorized providers by size. Providers who regularly care for four or more children were classified as large providers; those providers who care for fewer than four children were classified as small providers. Only large, home-based providers were asked about serving children with special physical conditions, whereas *all* home-based providers were asked about serving children with emotional, developmental, or behavioral issues that affect their care. As a result, the analysis on home-based providers serving children *with special physical conditions* represents a smaller subsample of home-based providers.

Large, home-based providers were asked to report the number of children they looked after who had a physical condition that affects their care. The rate at which large, home-based providers looked

after at least one child with a physical condition was higher among large, unlisted providers, both paid (21%) and unpaid (23%), compared to large, listed providers (11%) (see Figure 4).⁵

Figure 4. Percentage of large, home-based providers that currently look after at least one child with a physical condition



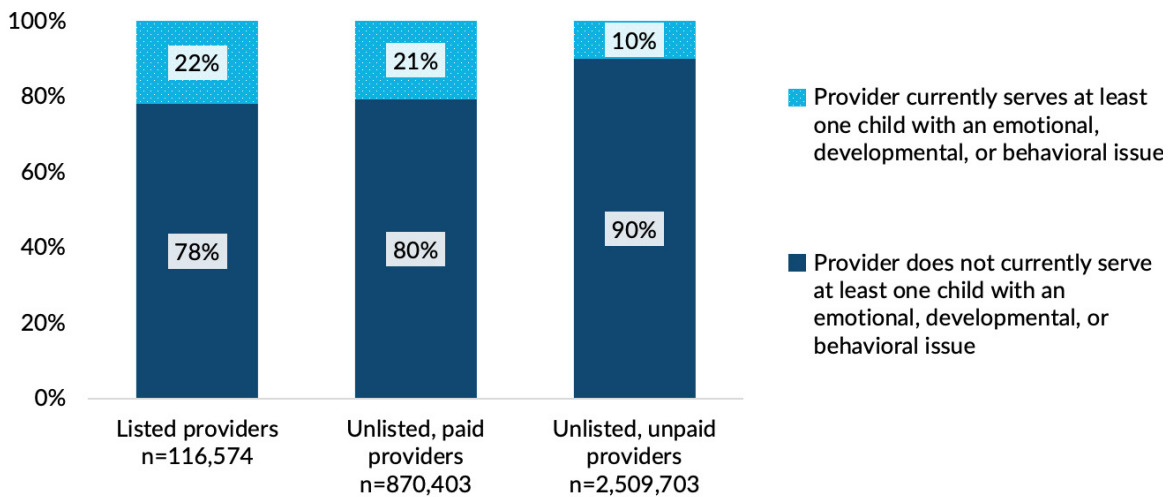
Source. 2012 NSECE restricted use home-based provider survey

Note. Reported sample sizes and percentages have been rounded to reflect data disclosure rules of restricted use dataset.

What proportion of home-based providers serve children with special needs?

In the home-based survey, providers were asked about the presence of enrolled children with a condition that affected their care, such as emotional, developmental, or behavioral issues. Twenty-two percent of listed providers, 21 percent of unlisted, paid providers (not regulated but paid for care), and 10 percent of unlisted, unpaid providers care for at least one child with special needs (Figure 5).

Figure 5. Percentage of home-based providers that care for at least one child with an emotional, developmental, or behavioral issues that affects his/her care



Source. 2012 NSECE home-based provider survey

Note. Sample include home-based providers serving children under age 6.

⁵ See Data and Methods section of this Snapshot for further definition of listed, unlisted paid, and unlisted unpaid types of home-based providers.

References

National Survey of Children's Health. NSCH 2011/12. Data query from the Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. Retrieved [08/01/2020] from www.childhealthdata.org.

NSECE [National Survey of Early Care and Education] Project Team. (2016). *Early Care and Education Usage and Households' Out-of-Pocket Costs: Tabulations from the National Survey of Early Care and Education (NSECE)*. OPRE Report #2016-09. Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. <https://www.acf.hhs.gov/opre/resource/early-care-education-usage-households-out-of-pocket-costs-tabulations-nsece>

NSECE Project Team (National Opinion Research Center). (2019, March 25). National Survey of Early Care and Education (NSECE), [United States], 2010-2012. Inter-university Consortium for Political and Social Research [distributor]. <https://doi.org/10.3886/ICPSR35519.v12>

U.S. Department of Health and Human Services. (2016). *Head Start Program Performance Standards*. Office of Head Start, Administration for Children and Families. <https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/hspps-appendix.pdf>.

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