



Idaho Association for the
Education of Young Children



**Idaho State
University**

Idaho Needs Assessment

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Executive Summary

This comprehensive needs assessment for Idaho's Early Childhood Care and Education (ECCE) system presents a detailed examination of the landscape, identifying critical needs and opportunities to enhance early learning across the state. The report synthesizes data from a broad spectrum of Idaho communities, including significant insights from Tribal regions, to offer a holistic view of the challenges and priorities within the ECCE sector. Through an inclusive approach, the assessment underscores the diversity of the state's population and the universal desire among families for accessible, affordable, stable, high-quality ECCE.

The demographic analysis reveals a diverse ECCE participant base, with a young, primarily female parent/family demographic actively engaged in their children's early learning. Despite a high commitment to child development activities, such as regular reading, families across Idaho face common barriers, including limited access to preschool programs and the high cost of child care. These challenges are compounded in Tribal areas by unique cultural and logistical factors, emphasizing the need for targeted strategies to ensure equity and inclusivity in early childhood care and education services.

Key areas of need identified in the assessment include enhancing preschool access and enrollment, addressing underutilization and staffing shortages in programs like Head Start, ensuring the affordability of child care, developing a diverse and well-trained ECCE workforce, and providing comprehensive support for ECCE providers. Additionally, the report highlights the critical need for improved data collection and analysis to accurately assess system capacity and inform effective planning and resource allocation.

The recommendations outlined in this report aim to guide policymakers, educators, and community leaders in developing and implementing strategies that address these identified needs. Idaho can make significant strides toward a more equitable and effective early childhood education system by prioritizing initiatives that increase access to and affordability of quality ECCE and support ECCE workforce development. This assessment serves as a call to action, urging collaborative efforts to enhance the foundation of early learning and care for Idaho's children, laying the groundwork for their future success and the state's overall well-being.

Overview of Needs Assessment

This needs assessment aims to understand the current state of early childhood care and education (ECCE) in Idaho, including the quality and availability of licensed and unlicensed care, particularly for rural, minority, and high-poverty communities. It also seeks to get an unduplicated count of children being served and identify service gaps. The assessment employed several methods:

Employer Business Climate Survey: Explores child care's impact on businesses and how businesses might support the ECCE sector.

Document and Data Review: Reviews existing reports and data to synthesize findings, identify needed updates, and determine data gaps.

Focus Groups and Town Halls: Identifies what stakeholders want the state to keep doing, stop doing, and start doing regarding ECCE services and resources.

Landscape Analysis: Explores quality and availability of licensed and unlicensed care, focusing on rural, minority, and high-poverty areas. Identifies service gaps and availability issues.

Local Needs Assessments: Assesses the availability of ECCE services, provider information, and community perceptions about ECCE and identifies strategies to address gaps.

Parent/Family Survey: Surveys families on their satisfaction with child care options, barriers to services, availability of resources and information, and child trauma needs.

Provider Survey: Assesses impacts of the pandemic on the child care workforce and identifies existing and emerging workforce needs.

Tribal Needs Assessment: Examines the ECCE needs of Idaho's Tribal nations.

Wage Comparability Study: Analyzes ECCE wages compared to similar careers to understand competitiveness and retention issues.

Idaho's Young Children and Their Families

Idaho strives to better understand the landscape of early childhood care and education (ECCE) opportunities for its youngest residents. A critical component is assessing the capacity of various facility types that serve children ages birth through 5 across the state. It's also important to consider the ECCE perceptions, challenges, and needs of families to improve the ECCE landscape to one that is accessible, affordable, stable, and high-quality.

Given the lack of a centralized, comprehensive data system, this analysis attempts to provide insight into enrollment and capacity by piecing together data from multiple sources. After a brief demographic profile, the section looks at enrollment and capacity specific to key programs, such as Early Head Start, Head Start, special education preschools, and private preschools. While these capture important segments, they do not represent the full universe of options for families. Based on data collected by Idaho's child care resource and referral network, the section estimates overall licensed capacity for children ages birth through 12 by facility type. It also incorporates more limited capacity estimates from military child care programs and licensed programs in select cities that have their own local licensing requirements.

Data were also compiled from family perception data collected from surveys, focus groups, and town halls to analyze the ECCE perceptions, challenges, and needs of families. Despite the fragmented nature of the data sources, this multifaceted examination sheds light on potential gaps and opportunities to better serve and engage Idaho's young children and families in need of care. Key findings illuminate potential areas of strength and opportunities for improvement in holistically engaging Idaho's families.

Section Key Finding

Idaho children ages 3 through 5 are less likely to be enrolled in preschool when compared to the national average. Of Idaho's young children, 32% are enrolled in preschool compared to 40% nationwide.

Data on access to early intervention are mixed. Data on children with disabilities or special needs suggest access to early intervention services for infants and toddlers is improving, but identification for children ages 3 through 4 is potentially declining. The number of Idaho infants and toddlers enrolled in early intervention has increased in the past five years. Meanwhile, special education enrollment among children ages 3 through 5 has fallen among children ages 3 through 4 and risen among children aged 5. This suggests some children are not being identified for special education until age 5, potentially when entering kindergarten, which may be their first formal schooling touchpoint.

Head Start enrollment is below capacity. Unlike before the pandemic, Head Start slots are not meeting full enrollment on average across Idaho. This capacity issue is primarily due to staffing shortages.

Families in Idaho place a high importance on early childhood care and education.

However, they don't always have accessible, affordable, stable, high-quality ECCE in their communities.

COVID-19 brought many challenges for Idaho families, of which they are still feeling the impacts.

These challenges include job loss, mental health needs, decreased access to child care and education, and more.

The potential demand for child care is lower in Idaho than nationwide. With a lower parental labor force participation rate among parents with young children in Idaho than the national average, the demand for child care in the state is likely to be somewhat lower than the demand nationwide. However, the lack of child care availability can also depress labor force participation rates.

Demographic Profile

In 2022, there were an estimated 137,420 children ages birth through 5 in Idaho (American Community Survey 2018: ACS 5-Year Estimates Detailed Tables, B09001, n.d.). This amount is similar to the estimated count of young children in 2018 (Figure 1). Over this period, the number of infants and toddlers (ages birth through 2) declined by 4%, while the number of preschool-age children (ages 3 through 5) grew by 3%.

Figure 1. Count of Children Ages 0–2 and 3–5 in Idaho, 2018–2022



Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2018–22, Table B09001

As shown in Table 1, the counties with the fastest-growing young child population in terms of percentage change between 2018 and 2022 were Boise, Camas, Butte, and Custer counties. While the number of children added in these counties was relatively small, they reflect a significant change for these small counties. In terms of numeric change, Kootenai County had

the most significant increase in young children, up by 1,549 in five years. This is equivalent to a 14% increase in Kootenai County, among Idaho counties' top 10 fastest percentage change rates.

Table 1. Fastest Growing Change in Young Child (0–5) Population Between 2018–22 in Idaho Counties

County	Count	Percent
Boise County	120	50.4%
Camas County	26	39.4%
Butte County	40	31.0%
Custer County	40	26.1%
Bonner County	490	20.6%
Shoshone County	162	17.8%
Gem County	170	15.2%
Idaho County	134	15.1%
Kootenai County	1549	14.2%
Payette County	221	12.9%
Adams County	20	11.9%
Washington County	63	10.1%
Teton County	74	7.4%
Boundary County	63	7.3%
Clearwater County	16	4.5%

Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2018–22, Table B09001

Many counties lost population, with Clark, Blaine, Lemhi, and Power counties showing the fastest rate of decline in young child population between 2018 and 2022 (Table 2). While only a modest percentage change (-3%), Ada County had the greatest numeric decline in the population of young children, falling by 890 children between 2018 and 2022. This decrease is followed by Bannock County, which saw a decline of 791 young children and was among the top 10 fastest declining by percentage change (-10%).

Table 2. Fastest Declining Change in Young Child (0–5) Population Between 2018–22 in Idaho Counties

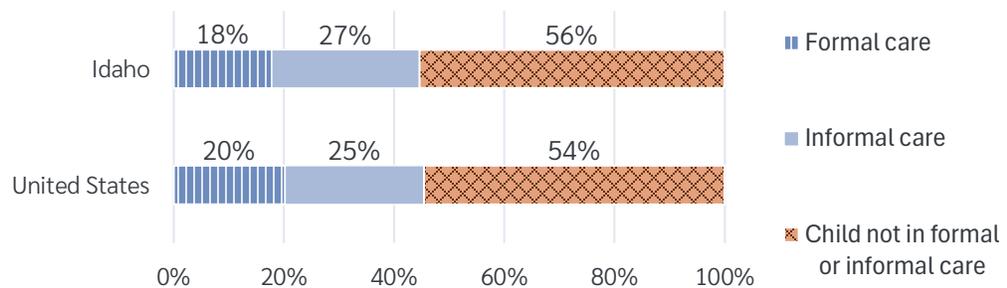
County	Count	Percent
Clark County	-48	-42.5%
Blaine County	-531	-36.0%
Lemhi County	-102	-21.4%
Power County	-134	-18.4%
Lewis County	-42	-17.4%
Gooding County	-152	-12.6%
Caribou County	-67	-11.1%
Bannock County	-791	-10.4%
Jerome County	-222	-9.3%
Bingham County	-326	-7.2%
Nez Perce County	-208	-7.0%
Owyhee County	-58	-6.2%
Lincoln County	-15	-3.3%
Madison County	-137	-3.1%
Ada County	-890	-2.7%

Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2018–22, Table B09001

Formal versus Informal Care Settings

According to data from the United States Census Bureau Household Pulse Survey from early 2023, Figure 2 shows slightly more Idaho families with children ages birth through 11 use informal sources of child care than the national average (Weeks 53–57 Household Pulse Survey, 2023). Informal care includes babysitters or a non-parent relative, while formal care includes child care centers, preschools, or other out-of-home care settings. If a respondent selected none of the care options, this was assumed to indicate that the parent cares for the child at home.

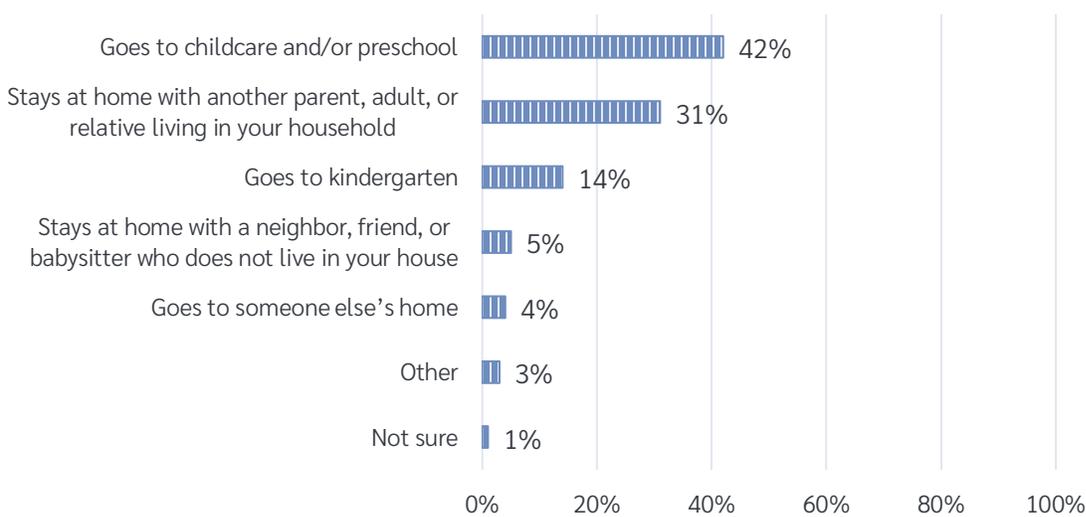
Figure 2. Child Care Arrangements for Children Ages 0–11, January 4–May 8, 2023



Note: Data reflect the average of results from five Household Pulse surveys conducted between January 4 and May 8, 2023. Source: Parsons Consulting, Inc. analysis of U.S. Census Bureau Household Pulse Survey, 2022–23 (Weeks 53–57)

On the Parent/Family Survey, most respondents indicated that their child goes to child care and/or preschool (42%), as shown in Figure 3. The second largest group of respondents indicated their child stays at home with another parent/adult/relative living in the household (31%). Almost 15% of respondents indicated their child attended kindergarten, while the remaining respondents indicated a mix of other care options, such as a babysitter or someone else’s home.

Figure 3. ‘Most often when you are working or attending school, your child’ on Parent/Family Survey (N = 778)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Children Served by Idaho’s Early Childhood Care and Education System

This research, as well as past research, has attempted to estimate counts of early childhood care and education (ECCE) capacity or enrollment among children ages birth through 5 in Idaho. For example, a pre-pandemic 2020 gap assessment by the Bipartisan Policy Center estimated 55,845 spaces for children ages birth through 5 in Idaho, with 85% in center-based programs (Child care gap assessment, 2020). However, as stated in the 2020 Idaho Preschool Development Grant Birth–Age 5 Needs Assessment, the accuracy of this estimate is unknown (Whitney et al., 2020). Idaho did not then, and still does not, require providers serving fewer than seven children to be licensed by the state, and even among licensed settings, only estimates of enrollment or capacity are possible due to a lack of data (Becoming a Child Care Provider, n.d.).

Additionally, the data collected from many discrete sources may be duplicated or not limited to ages birth through 5. For example, Head Start providers are licensed by the state, so the “Head Start” and “Licensed by the State” datasets would contain duplicates. These limitations impact the ability to estimate a reliable, unduplicated count of ECCE capacity or enrollment within the current policy and data landscape.

Despite these limitations, this section can provide a greater understanding of the ECCE landscape in Idaho. The secondary data displayed in this section are sourced from the American Community Survey and several different administrative data sources that provide enrollment counts, such as Head Start and school district special education.¹ The available data may be capacity estimates (how many slots are available for children) or enrollment estimates (how many children are filling slots). The data are presented by groups: Infants and Toddlers, Preschool, Tribal, Licensed Capacity (All Ages), and Military Child Development Programs. Given the variability and lack of rigor of the data sources, this research does not present an estimate of overall capacity. Yet, trends and learnings can be gleaned from the data available.

Infants and Toddlers

This section provides data from two sources of information on infants and toddlers enrolled in early childhood care and education, summarized in Table 3 (PIR Indicator Report – 2023, n.d.; Public Records Request response KL-00018, 2023). The first includes infants and toddlers enrolled in Early Head Start. The second includes infants and toddlers with developmental delays or disabilities receiving early intervention services through the Individuals with Disabilities Education Act (IDEA) Part C program. Enrollment data from licensed child care locations serving infants and

¹ Early Head Start and Head Start data are inclusive of: Early Head Start programs for infants, toddlers, and expectant families; Head Start preschool programs, which primarily serve children ages 3–4; American Indian and Alaska Native Head Start programs operated by Tribal governments, Tribal colleges, or Tribal agencies; and Migrant and Seasonal Head Start programs designed to provide program services to farmworker families.

toddlers is not available. However, the “Licensed Capacity (All Ages)” section provides estimates for licensed capacity for all ages.

Table 3. Summary Table of Infant and Toddler Enrollment Estimates, 2023

Source	Enrollment Estimate
Early Head Start	1,144
Early Intervention (IDEA Part C)	2,347

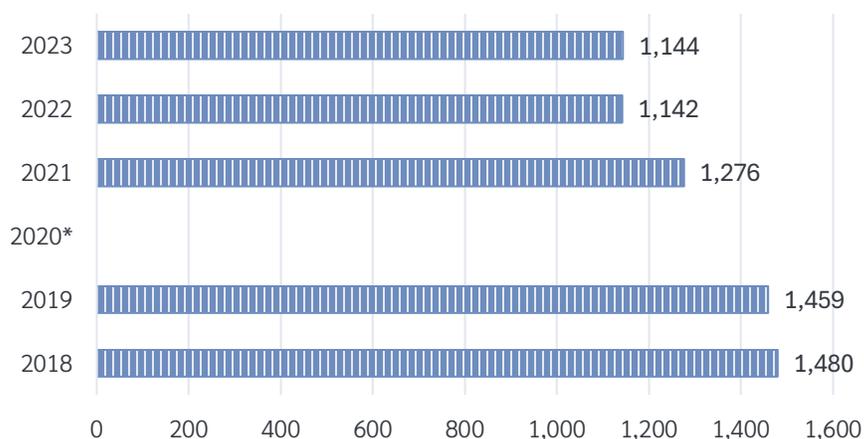
Note: Figures in this table should not be summed due to potential duplication across sources.

Sources: U.S. Department of Health and Human Services, Office of Head Start; PIR Indicator Report – 2023; Idaho Department of Health and Welfare, Public Records Request response KL-00018, 2023

Early Head Start

Early Head Start serves infants and toddlers (ages birth through 2), as well as pregnant women, in center-based and home-based programs. Families with income below the poverty level are eligible for Early Head Start. The cumulative enrollment of infants and toddlers in Early Head Start in Idaho in 2023 was 1,144 (PIR Indicator Report - 2018, n.d.; PIR Indicator Report - 2019, n.d.; PIR Indicator Report - 2021, n.d.; PIR Indicator Report - 2022, n.d.; PIR Indicator Report – 2023, n.d.).² This is a 23% decline in cumulative enrollment since 2018. Note that Figure 4 is inclusive of home-based Early Head Start, which is a home-visiting model and not an out-of-home child care model; pregnant women served are not included in this tally.³ See the Head Start section for a discussion of possible contributors to the decline in cumulative enrollment.

Figure 42. Cumulative Enrollment in Early Head Start (Ages 0–2) in Idaho, 2018–23



Note: Performance Indicator Reports (PIR) were not developed for 2020.

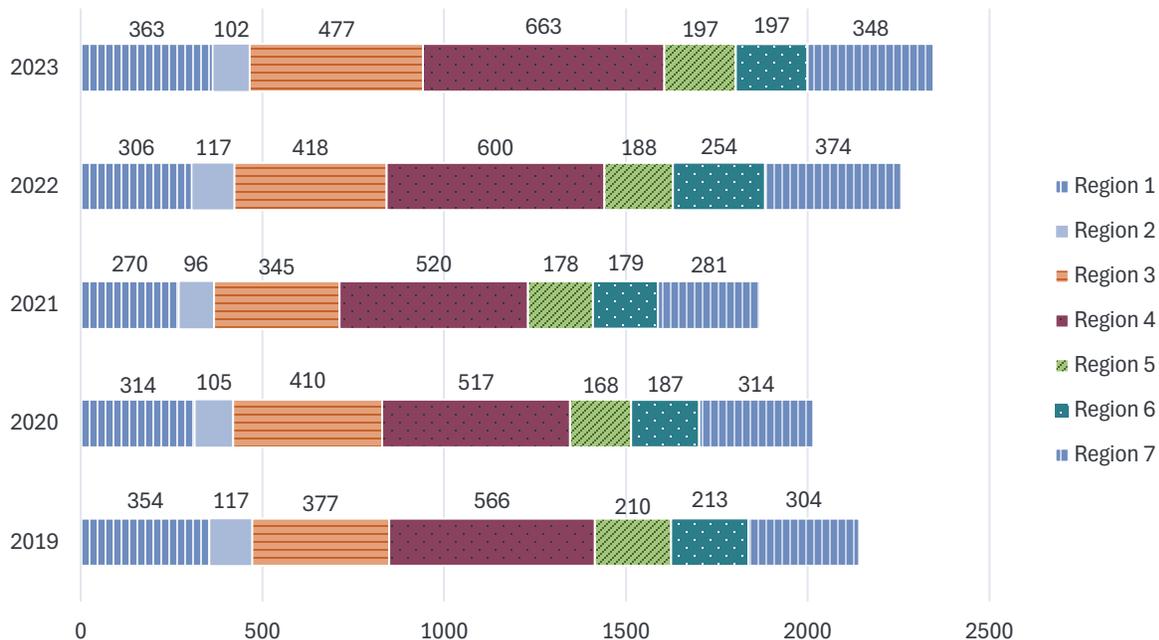
² The term cumulative enrollment refers to the actual number of children that Head Start programs serve throughout the entire program year, inclusive of enrollees who left during the program year and the enrollees who filled those empty places. Due to turnover, more children and families may receive Head Start services cumulatively throughout the program year than indicated by the funded enrollment (or capacity) numbers.

³ In program year 2023, home-based programs represented approximately 11% of funded enrollment in Early Head Start and Head Start.

Early Intervention (IDEA Part C)

The Infant Toddler Program (ITP), which is provided by the Idaho Department of Health and Welfare, provides IDEA Part C services for infants and toddlers with disabilities. ITP is a coordinated early intervention system to assist children with developmental delays or conditions that may result in developmental delays. The number of children enrolled in Part C ITP services ranges by region. Region 4, which includes Ada, Boise, Elmore, and Valley counties, has the highest participation numbers, followed by Region 3, which includes Adams, Canyon, Gem, Owyhee, Payette, and Washington counties (Public Records Request response KL-00018, 2023). Region 2, including Clearwater, Idaho, Latah, Lewis, and Nez Perce counties, has the lowest ITP participation numbers. Figure 5 shows that ITP participation statewide fluctuated over the past five years, peaking at 2,347 in 2023. This increase in children identified and enrolled in early intervention services suggests improvements in identifying children early; however, as shown in Figure 8, special education data for children ages 3 through 5 shows the opposite trend, with a steady decline in the number of children ages 3 through 4 enrolled, and a slight increase in children aged 5 enrolled, potentially suggesting identification at kindergarten entry.

Figure 53. Idaho Children Ages 0–2 Enrolled in Part C Early Intervention Services by Region, 2019–23



Note: Counties by region include: Region 1: Benewah, Bonner, Boundary, Kootenai, Shoshone; Region 2: Clearwater, Idaho, Latah, Lewis, Nez Perce; Region 3: Adams, Canyon, Gem, Owyhee, Payette, Washington; Region 4: Ada, Boise, Elmore, Valley; Region 5: Blaine, Camas, Cassia, Gooding, Jerome, Lincoln, Minidoka, Twin Falls; Region 6: Bannock, Bear Lake, Bingham, Caribou, Franklin, Oneida, Power; and Region 7: Bonneville, Butte, Clark, Custer, Fremont, Jefferson, Lemhi, Madison, Teton.

Preschool

This section provides four different sources of information on children enrolled in preschool. The first is based on 2018-22 American Community Survey data, which asks parents if their child is enrolled in “nursery school” or “preschool.” The second is based on Head Start enrollment data. The third is based on Idaho Department of Education special education enrollment data for children ages 3 through 5, which may include children aged 5 enrolled in kindergarten. The fourth and last source of preschool data is based on an [Idaho Department of Education list of private schools](#) operating in the state and [private school enrollment data from the National Center for Education Statistics database](#). Enrollment data from licensed child care facilities serving the preschool-age population are not available.

However, the “Licensed Capacity (All)” section provides estimates for licensed capacity for all ages. Table 4 summarizes the estimates of these four preschool enrollment sources (American Community Surveys 2018-22: ACS 5-Year Estimates Subject Tables, S1401, n.d.; PIR Indicator Report – 2023, n.d.; K. Sanders, personal communication, October 19, 2023; PSS Private School Universe Survey data 2021-2022 school year, n.d.).

While these data are summarized in Table 4, it is important to note that these sources should not be summed because there is likely duplication across the sources or variation in how the data were collected. The survey-based estimates can be viewed as inclusive of all three enrollment counts—Head Start, special education, and private schools—but differ in that they are based on how parents respond to the question and whether they consider their young child’s ECCE to be “nursery school” or “preschool.” For the three enrollment count sources, duplication may be possible if children receive their special education services in a Head Start or private preschool, or if a child attends Head Start part of the day and a private school part of the day.

Table 4. Summary Table of Preschool Enrollment Estimates, Most Recent Year Available

Source	Enrollment Estimate	Year
Parent Report of Children Enrolled in Preschool	23,583	2018–22 pooled
Head Start	2,420	2023
Special Education	3,705	2022–23
Private Preschool	3,076	2021–22

Note: Figures in the table should not be summed due to duplication across sources.

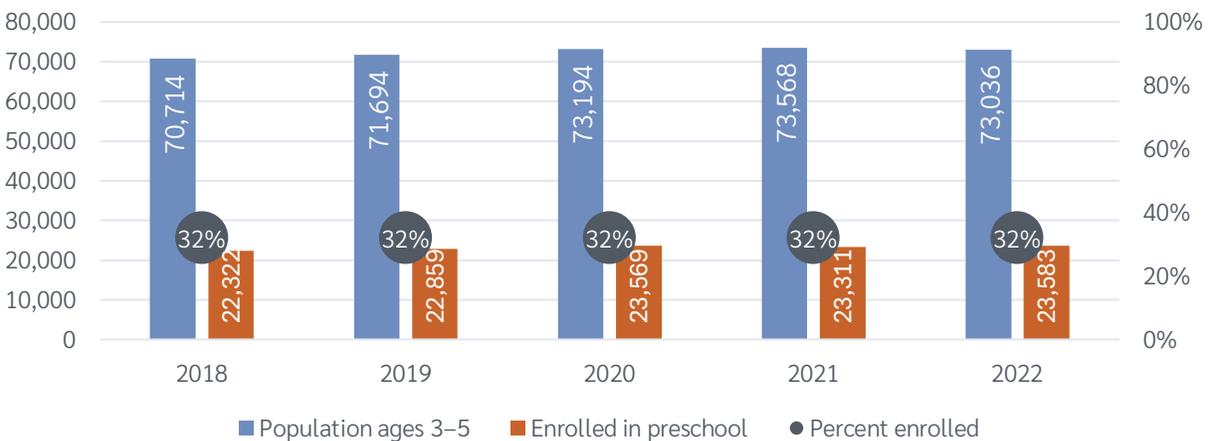
Sources: U.S. Census Bureau, *American Community Survey, 5-Year Estimates, 2018–22, Table S1401*; U.S. Department of Health and Human Services, Office of Head Start, *PIR Indicator Report - 2023*; Idaho Department of Education Public Records Request response (K. Sanders, personal communication, October 19, 2023); U.S. Department of Education, *National Center for Education Statistics, PSS Private School Universe Survey data 2021-2022 school year*

Parent Report on Children Enrolled in Preschool

Idaho preschool-age children are less likely to be enrolled in preschool than the national average. According to parent report, Figure 6 shows an estimated 32% of Idaho children ages 3 through 5 were enrolled in preschool in 2022 (American Community Surveys 2018–22: ACS 5-Year Estimates Detailed Tables, B09001, n.d.; American Community Surveys 2018–22: ACS 5-Year Estimates Subject Tables, S1401, n.d.). Nationwide, 40% of children ages 3 through 5 were enrolled in preschool.⁴

The percentage of Idaho children enrolled in preschool has not changed over the past five years. At the county level, preschool enrollment rates range from 0% to 57% (see Appendix A).⁵

Figure 6. Percentage of Children Ages 3–5 Enrolled in Preschool in Idaho, 2018–22



⁴ The American Community Survey asks respondents if their young child (age 3 or older) has attended “nursery school, preschool” in the last three months. The [United States Census Bureau](#) defines a nursery school as a “group or class that is organized to provide educational experiences for children during the year or years preceding kindergarten. It includes instruction as an important and integral phase of its program of child care. Private homes in which essentially custodial care is provided are not considered nursery schools. Children attending nursery school are classified as attending during either part of the day or the full day. Part-day attendance refers to those who attend either in the morning or in the afternoon, but not both. Full-day attendance refers to those who attend in both the morning and the afternoon. Children enrolled in Head Start programs or similar programs sponsored by local agencies to provide preschool education to young children are counted under nursery school.” Despite this definition, parents may interpret “nursery school, preschool” differently when completing the survey. The numerator for the percentage of children enrolled in preschool is the count of children ages 3 or older who are enrolled in preschool, as defined above and as reported by the parent on the American Community Survey. Consequently, the count of the number of children enrolled in preschool may include a small number of children aged 6 who did not start kindergarten yet and remain in preschool. The denominator is the number of children ages 3 through 5 in Idaho (or in each county, for the county-level estimates). This denominator may include children aged 5 who are enrolled in kindergarten, when ideally the denominator would comprise only children ages 3 through 5 who are eligible for preschool (and children enrolled in kindergarten would not be considered eligible).

⁵ The Census Bureau pools five years of survey data to stabilize estimates with small samples; however, sample size can still impact the stability of data in counties with small populations.

Head Start

Head Start serves children ages 3 through 5 (prior to kindergarten entry) in center-based and home-based programs.⁶ Children in families with income below the poverty level are eligible to participate in Head Start. Idaho’s Head Start cumulative enrollment in the 2023 program year was 2,420,⁷ marking a 28% decline since 2018. Meanwhile, center-based funded enrollment (or capacity) for children ages birth through 5 has remained relatively steady since 2018 but, notably, more than cumulative enrollment in recent years (Figure 7).

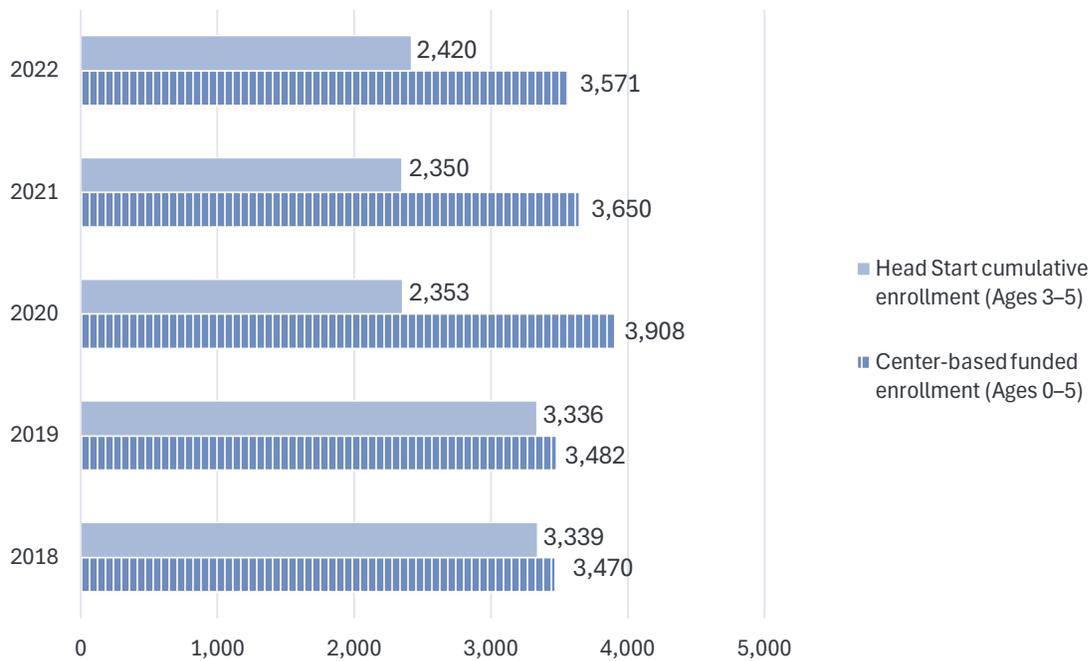
The Administration for Children and Families, which administers the Head Start program, including Early Head Start, reports that during the 2021 program year, programs nationwide “experienced significant challenges in meeting full enrollment, which were primarily workforce-related and largely due to staff shortages” (Head Start Program Facts, 2023). Research in other states has suggested additional factors may also contribute to Head Start enrollment challenges, such as limited schedule (part day only), transportation (difficulty getting to or from the facility or to other care during the work day), or restrictive eligibility criteria (inability to serve families living above the poverty level) (Parsons et al., 2023).

Consequently, some Head Start programs in Idaho are requesting “scope changes” when they cannot operate at their funded enrollment. A scope change enables the programs to shift funds to alternative uses, such as increasing staff salaries, adjusting classroom sizes, and other supports to increase staff retention or the duration of Head Start slots (Change is Scope Data from Region 10, 2023; J. Sproul, personal communication, February 20, 2024).

⁶ In program year 2023, home-based programs represented approximately 11% of funded enrollment in Head Start and Early Head Start.

⁷ The term cumulative enrollment refers to the actual number of children that Head Start programs serve throughout the entire program year, inclusive of enrollees who left during the program year and the enrollees who filled those empty places. Due to turnover, more children and families may receive Head Start services cumulatively throughout the program year than indicated by the funded enrollment (or capacity) numbers.

Figure 7. Cumulative Enrollment in Head Start (Ages 3–5) in Idaho Compared to Center-Based Funded Enrollment (Ages 0–5), 2018–23



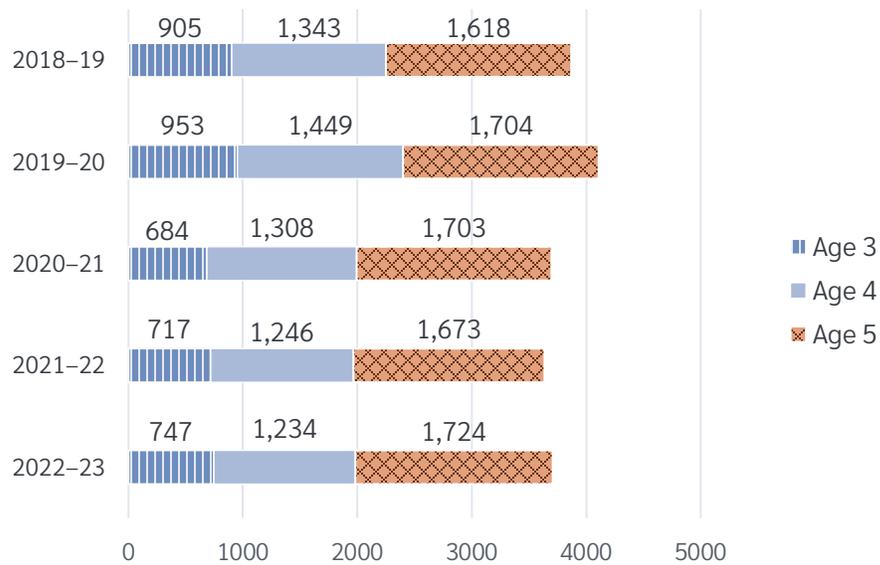
Note: Performance Indicator Reports were not developed for 2020.

Sources: U.S. Department of Health and Human Services, Office of Head Start, Performance Indicator Reports 2018, 2019, 2021, 2022, 2023

School District Special Education (Part B)

In Idaho, due to state prohibitions on spending state funds on preschool, public school district-provided preschool is generally limited to services for children with disabilities as required by the Individuals with Disabilities in Education Act (IDEA) Part B (Sullivan, 2023). As shown in Figure 8, a total of 3,705 children ages 3 through 5 were enrolled in special education in Idaho public school districts in 2022–23 (K. Sanders, personal communication, October 19, 2023). The number of children enrolled fell 4% between 2018–19 and 2022–23, driven primarily by a 17% decline in the number of children aged 3 enrolled and an 8% decline in the number of children aged 4 enrolled. The simultaneous increase of 7% in the number of children aged 5 enrolled suggests that children may be getting identified for special education later than in the past, potentially when entering kindergarten. With most (68%) of Idaho children not attending preschool (see Figure 6), kindergarten entry is often the first formal educational touchpoint for children and where a special need may be identified for the first time. However, as shown in Figure 8, the number of infants and toddlers with special needs receiving early intervention services reached a three-year high in 2023, suggesting improvement in early access to services for children with developmental delays or disabilities.

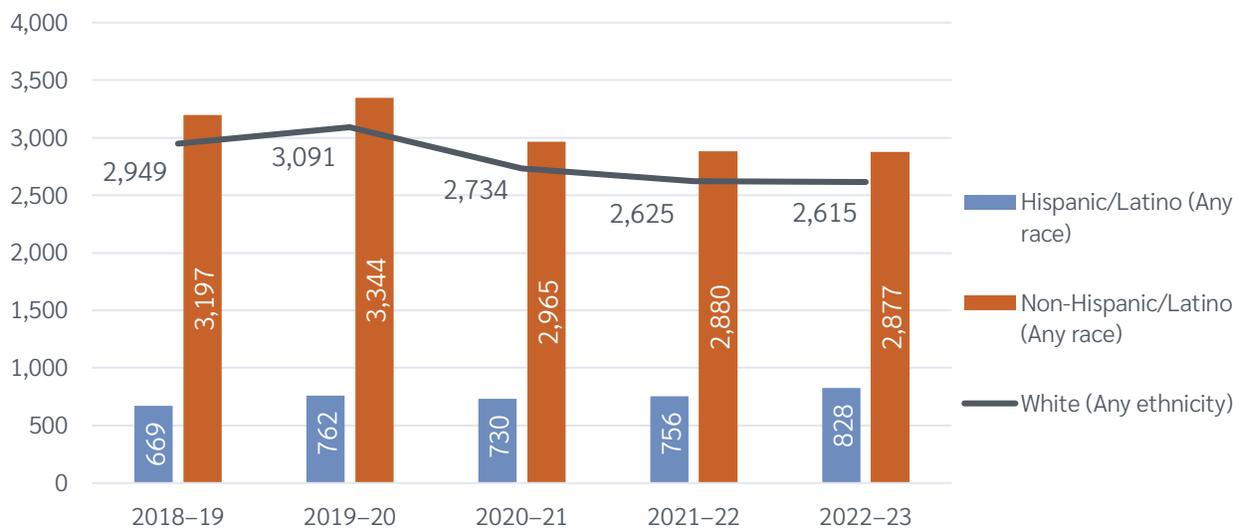
Figure 8. Count of Idaho Children Ages 3–5 Enrolled in School District Special Education, by Age, 2018–19 through 2022–23



Source: Idaho Department of Education, K. Sanders, personal communication, October 19, 2023

As shown in Figure 9, the number of children ages 3 through 5 of Hispanic or Latino origin receiving special education services has increased over the past five years (24%), while the number of non-Hispanic or Latino students has declined (-10%).

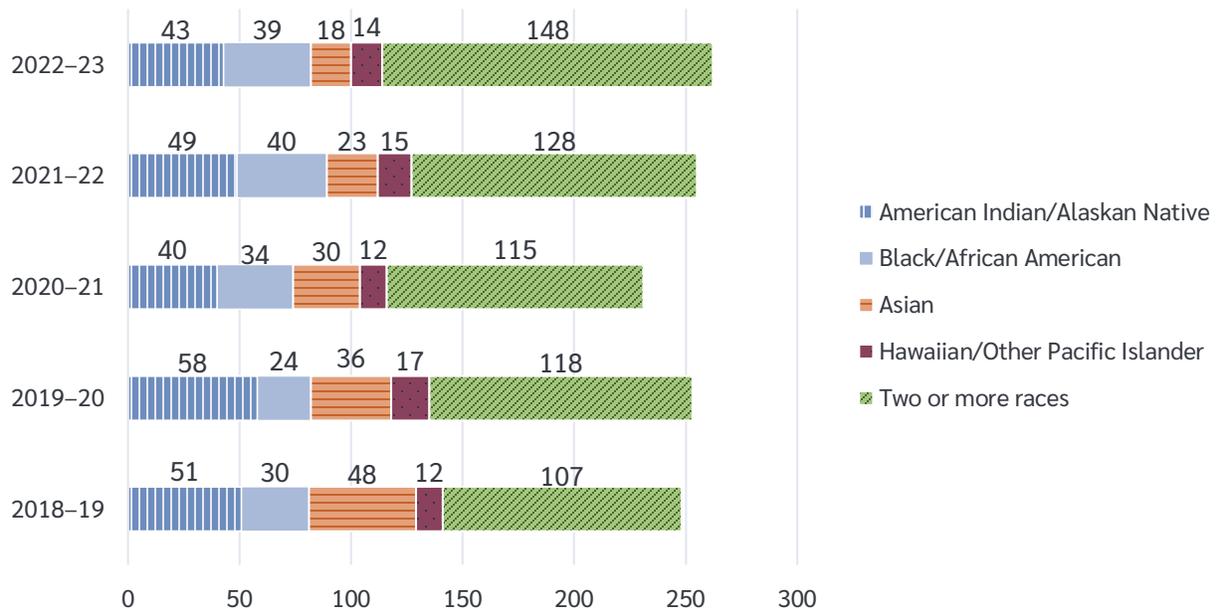
Figure 9. Count of Idaho Children Ages 3–5 Enrolled in School District Special Education by Ethnicity (Hispanic/Non-Hispanic of Any Race) and Race (White of Any Ethnicity), 2018–19 through 2022–23



Note: The category “White” is shown in this figure versus Figure 10 because it comprises a much larger proportion of the population than the non-White population and consequently has the effect of skewing the scale to render trend analysis of non-White categories difficult.

Data by race/ethnicity displayed in Figures 9 and 10 show an 11% decline in special education enrollment among White children ages 3 through 5 and a 38% increase in enrollment among children identified as two or more races—the greatest increase among all race/ethnicity categories. The count of Asian children in special education in Idaho is small, but it has declined the fastest, falling 63%, from 48 students in 2018–19 to 18 students in 2022–23.

Figure 104. Count of Idaho Children Ages 3–5 Enrolled in School District Special Education, by Race/Ethnicity (BIPOC only), 2018–19 through 2022–23



Note: The category “White” is not shown in Figure 9 because it comprises a much larger proportion of the population and consequently skews the scale to render trend analysis of BIPOC/non-White categories difficult. BIPOC stands for Black, Indigenous, and People of Color.

Source: Idaho Department of Education, K. Sanders, personal communication, October 19, 2023

Private Preschools

As Table 5 shows, there are approximately 3,076 children enrolled in private preschools in Idaho (PSS Private School Universe Survey data 2021-22 school year, n.d.; Idaho Private Schools, 2023). These data are based on 76 private schools providing preschool enrollment counts to the National Center for Education Statistics (NCES).

In addition, 13 private schools in the Idaho Department of Education’s list of private schools as of June 2023 indicated they served preschool-age children but did not respond to the PSS, so enrollment counts are not included from these schools.⁸

Table 5. Count of Enrollment in Private Preschools in Idaho, 2021–22

County	Preschool Enrollment
Ada	1,048
Bannock	25
Blaine	82
Bonner	117
Bonneville	396
Boundary	20
Canyon	338
Elmore	81
Idaho	16
Jerome	33
Kootenai	429
Latah	65
Minidoka	34
Nez Perce	117
Payette	20
Shoshone	12
Teton	28
Twin Falls	195
Valley	20
Statewide Total	3,076

Sources: U.S. Department of Education, National Center for Education Statistics, PSS Private School Universe Survey data 2021-22 school year; Idaho Department of Education, Idaho Private Schools, 2023

Tribal

Idaho is home to five federally recognized American Indian Tribes: Coeur d’Alene, Kootenai, Nez Perce, Shoshone-Bannock, and Shoshone-Piaute (Tribal Lands, 2021). The two Tribally-controlled schools in Idaho—Coeur d’Alene Tribal School and Shoshone Bannock School District #537—do not serve children ages birth through 5.⁹ There are three Tribal Head Start programs in Idaho. Counts for these programs are included in the overall counts of Early Head Start and Early Head Start cumulative and funded enrollment provided in Figure 7; however, to provide additional detail on these specific programs, the enrollment counts and locations are provided in Table 6

⁸ Additionally, NCES data included preschool enrollment counts for schools in the Idaho Department of Education list that indicated that they serve kindergarten and older only; therefore, there may be additional schools on the Idaho Department of Education list that serve preschool age children but did not respond to the PSS.

⁹ Information obtained by Parsons Consulting, Inc. email outreach (December 2023) to Coeur d’Alene Tribal School and the United States Department of the Interior, Bureau of Indian Education, BIE Schools Directory. According to the BIE Schools Directory, there are only two BIE-operated or Tribally-controlled schools in Idaho.

(PIR Indicator Report - 2018, n.d.; PIR Indicator Report - 2019, n.d.; PIR Indicator Report - 2021, n.d.; PIR Indicator Report - 2022, n.d.; PIR Indicator Report – 2023, n.d.). In addition to Head Start, there may be other programs serving young children on reservations; however, due to the sovereignty and self-determination of the Tribal Nations to govern child care standards and rules, these programs may or may not be state-licensed and, therefore, not captured in these databases.

For a comprehensive review of the Tribal landscape in Idaho, refer to the report “Workforce and Family Experiences in Idaho’s ECCE Tribal Communities: Access to Care, COVID-19, and Healing from Trauma” compiled by Marzano Research and Denver University’s Butler Institute for Families (Appendix E).

Table 6. Tribal Early Head Start and Head Start Programs in Idaho and Cumulative Enrollment in 2023

Program Name	Location	Cumulative Enrollment
Shoshone-Bannock Tribal Business Council	Fort Hall	81
Nez Perce Tribe, Head Start	Lapwai	112
Nez Perce Tribe, Early Head Start	Lapwai	58
Coeur d'Alene Tribe, Head Start	Plummer	36
Coeur d'Alene Tribe, Early Head Start	Plummer	40

Source: Department of Health and Human Services, Office of Head Start, Performance Indicator Reports 2018, 2019, 2021, 2022, 2023

Licensed Capacity (All Ages)

This section provides broad estimates of licensed child care capacity for children ages birth through 12 in Idaho using Registry of IdahoSTARS Eligibility (RISE) data. RISE is an online information management system for licensed child care in Idaho. IdahoSTARS manages the RISE database with funding from the Idaho Department of Health and Welfare and the Child Care and Development Block Grant. Any provider participating in state licensing or the Idaho Child Care Program (ICCP) must be registered through RISE. All other providers may choose to enter their facilities in RISE. RISE data do not include slot counts for the actual number of children served, but they do identify the facility type and capacity guidelines by facility type. RISE data do not specify the age of children served.

For the analysis of licensed capacity available through RISE data, we include state-licensed providers, pending state license, pending licensing, pending renewal, pending certification, and pending facility type change. There are 706 providers within these facility types, with most (394) licensed as a “Large Child Care Center” (Data on Lisc ICCP for Idaho, 2023). To estimate the overall capacity of pending and licensed providers, we use the minimum and maximum parameters for each provider type (e.g., family child care facilities may serve a minimum of one child and a maximum of six children). Applying these figures to the count of providers results in an aggregate estimate of the range of licensed capacity in Idaho. As shown in Table 7, using this methodology, the estimate of licensed child care capacity in Idaho for children ages birth through 12 ranges from 12,764 to 61,439.

Table 7. Number of State Pending or Licensed Providers and Estimated Range of Child Care Capacity for All Ages (0–12) by Type of Facility, 2024

Provider Type	Facilities	Minimum Capacity Estimate	Maximum Capacity Estimate
Large Child Care Center (26 or more children)	394	10,244	56,736
Group Child Care Facility (up to 12 children)	190	1,330	2,280
Small Child Care Center (up to 25 children)	89	1,157	2,225
Family Child Care Facility (up to 6 children)	31	31	186
Relative Child Care (up to 6 related children)	2	2	12
Total	706	12,764	61,439

Note: The maximum parameter used for large child care centers serving 26 or more children was 144. This parameter uses the average capacity of 85 children for large child care centers based on available capacity data for city-licensed providers in Coeur d’Alene and Pocatello, Idaho. To estimate the upper parameter, we calculate the difference from the mean for the lower parameter of 26 and apply it to the upper estimate: $26 + X/2 = 85$, where X is the upper estimate parameter.

Source: IdahoSTARS data pull by facility type, license status, county, and ICCP status (Data on Lisc ICCP for Idaho, 2023)

City-licensed Providers

Seven cities in Idaho have a licensing system for child care providers operating in their city. These include Boise, Chubbuck, Coeur d’Alene, Idaho Falls, Lewiston, Moscow, and Pocatello. Cities are allowed to have their own licensing system if the standards are as high as the state standards; in most cases, the standards are higher. City-licensed providers do not need to be licensed with the state. The researchers contacted each city to request licensing data, including the provider address, type of provider, and ages of the children served. Data collection was incomplete, given the variability and limitations among the cities in the data they track. For example, no city tracks enrollment, two record capacity for the provider, one records maximum capacity, and none has data that can be limited to the ages birth through 5 population. Among the two cities providing capacity data, the average capacity for city-licensed providers in Coeur d’Alene is 53, and the median is 42, while the average capacity for city-licensed providers in Pocatello is 63, and the median is 49.

Beyond these data, given data limitations, reporting in this assessment is limited to the number of city-issued child care licenses by city. As shown in Table 8, Boise has the most city-licensed programs (191), while Moscow has the fewest (11). While actual capacity and enrollment counts are limited, creating a rough estimate of capacity is possible using the available data. One method applies the most conservative figure of 42 (median capacity of Coeur d’Alene city-licensed providers) to the counts of city-licensed providers to arrive at an estimated total potential capacity of 16,800 city-licensed child care spaces for all ages. Another method uses the RISE city-licensed information and the methodology cited above to calculate an estimate of 17,991 slots by city-licensed providers. Both methods arrive at roughly 17,000 city-licensed slots statewide.

Table 8. Count of City-Licensed Child Care Programs in Idaho, 2022 or 2023

City	Count of City-Licensed Programs
Boise	191
Idaho Falls	72
Coeur d'Alene	48
Lewiston	31
Pocatello	30
Chubbuck	17
Moscow	11
Total	400

Note: Boise, Chubbuck, and Pocatello counts are from 2023; Coeur d'Alene, Idaho Falls, Lewiston, and Moscow counts are from 2022. Six duplicate entries for family child care homes were removed from the count for Boise; providers that have more than one location are counted according to the number of sites they operate.

Sources: Author analysis of direct contact via email to cities of Boise, Chubbuck, Coeur d'Alene, Idaho Falls, Lewiston, Moscow, and Pocatello

Military Child Development Programs

Child development programs (CDP) operated by military installations must follow federal licensing guidelines and regulations, which can often be more stringent than those required by the state in which they are located. For example, military CDPs are subject to a minimum of four surprise quality inspections a year to maintain their certification (Department of Defense Instruction, 2014). In Idaho, access to this care is limited to Idaho's Mountain Home Air Force Base (AFB), which has 164 full-time spaces at the Mountain Home AFB Child Development Center (CDC). As of November 2023, the CDC had 104 spaces for infants and toddlers and 60 preschool spaces, although one toddler room was transitioning to preschool due to need. Historically, the CDC averages 155 children enrolled at any one time (C. Eichman, personal communication, November 6–7, 2023).

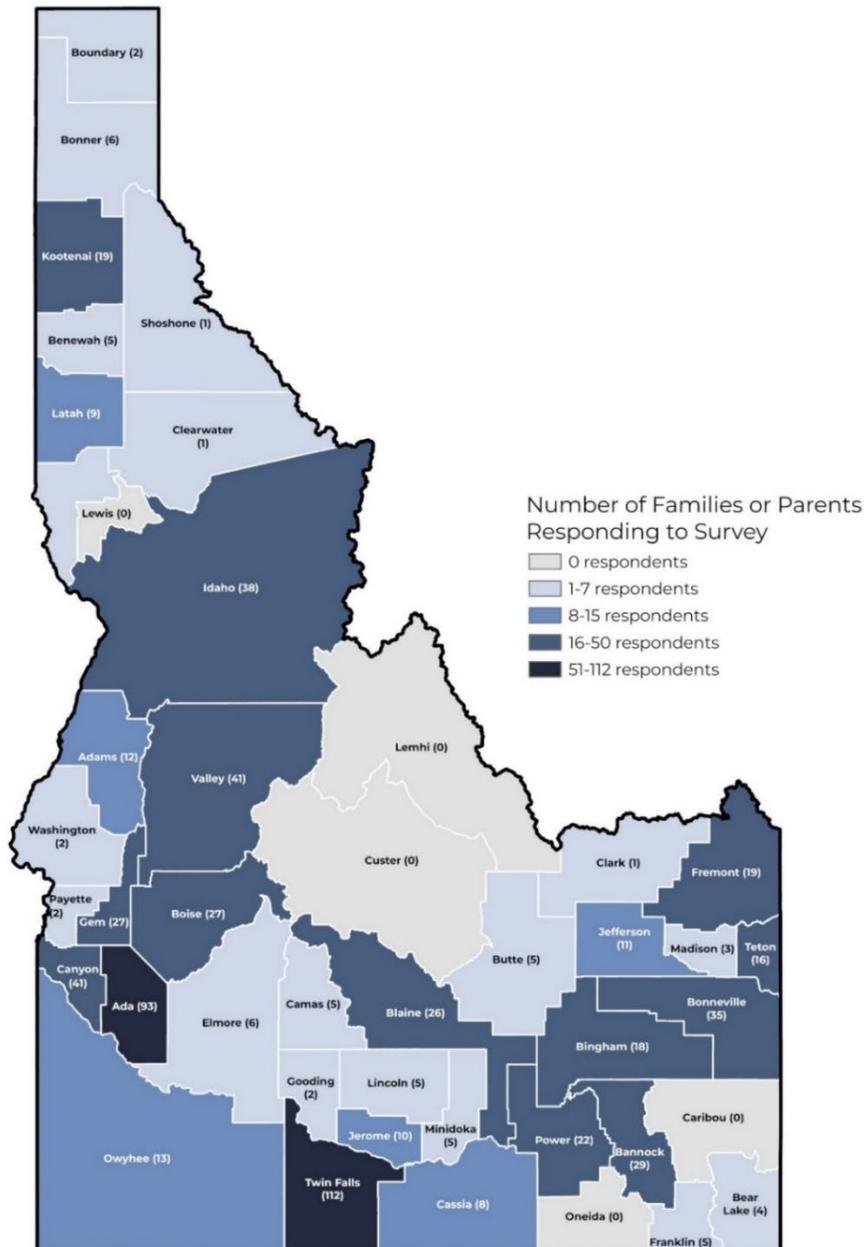
In addition to CDPs, military bases also certify Family Child Care (FCC) homes, which operate as state-licensed private contractors and, therefore, do not require stringent military licensing due to a memorandum of understanding between the AFB and the state. Mountain Home AFB partners with eight FCCs, each with a possible enrollment of six children, bringing the potential capacity to 48 for children ages six weeks through school age. The number of FCCs serving Mountain Home AFB has doubled in the past two years (refer to footnote 12).

Family Perception Data

The Parent/Family Survey, focus groups, and town halls were used to collect data that informed the results in this report. Marzano Research partnered with GS Strategies for the first wave of data collection for families and providers, which was delivered through an online survey format. Provider Survey links were sent to the email addresses of early childhood care and education (ECCE) providers through the Idaho STARS email repository. Marzano Research conducted a second wave of data collection utilizing the same survey.

In this wave, additional contacts with families and providers were established through email, postal services, social media, and direct contacts. This second wave also included a Spanish-language version of the survey and specifically targeted areas of the state with limited response during the first wave of data collection. Results from both waves of data collection were combined and used as the basis for the graphs and tables in this report. Figure 11 shows the number of respondents to the Parent/Family Survey by county.

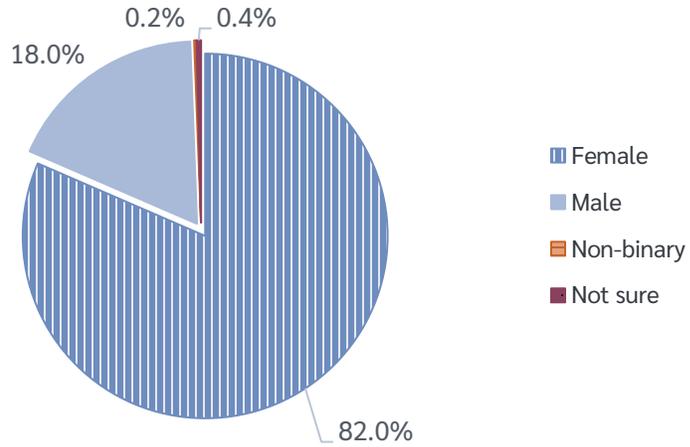
Figure 11. Number of Parents/Families Responding to Parent/Family Survey by County



Source: Author analysis of respondents to the Parent/Family Survey

Of those who responded to the Parent/Family Survey, 82% indicated female when asked about their sex/gender (Figure 12).

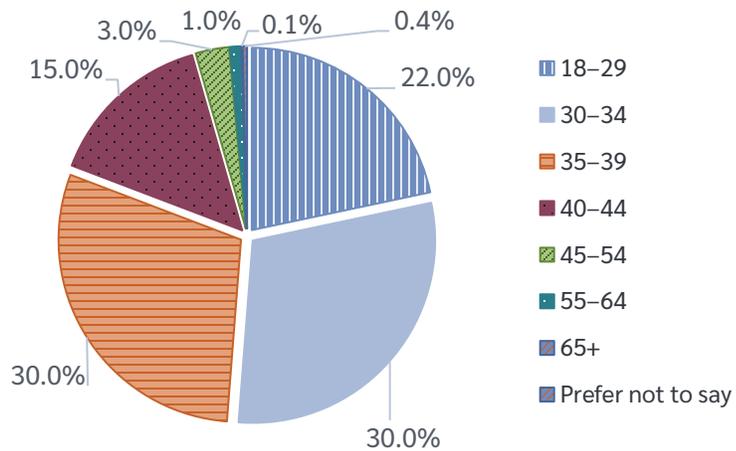
Figure 12. Sex/Gender of respondent on Parent/Family Survey (N = 732)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

When asked about their age, 82% indicated they were under 40 years old (Figure 13).

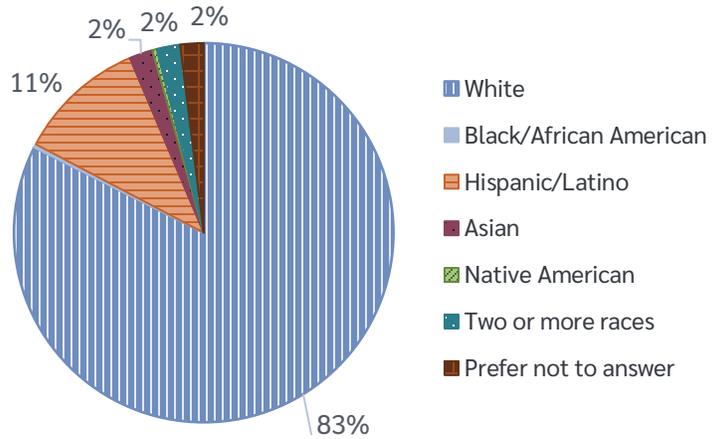
Figure 13. Parent Age of respondent on Parent/Family Survey (N = 734)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

More than 80% of the respondents used 'White' to indicate their race/ethnicity. About 11% identified as Hispanic, while the options for Black, Asian, Native American, two or more races, and those who preferred not to answer were all less than 2% of Parent/Family Survey respondents (Figure 14).

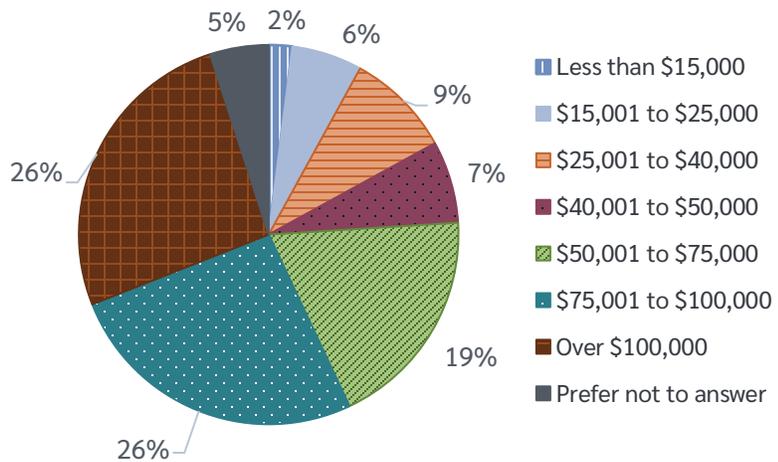
Figure 14. Race/Ethnicity of respondent on Parent/Family Survey (N = 734)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

As shown in Figure 15, 56% of the respondents indicated an income level above \$75,000 a year.

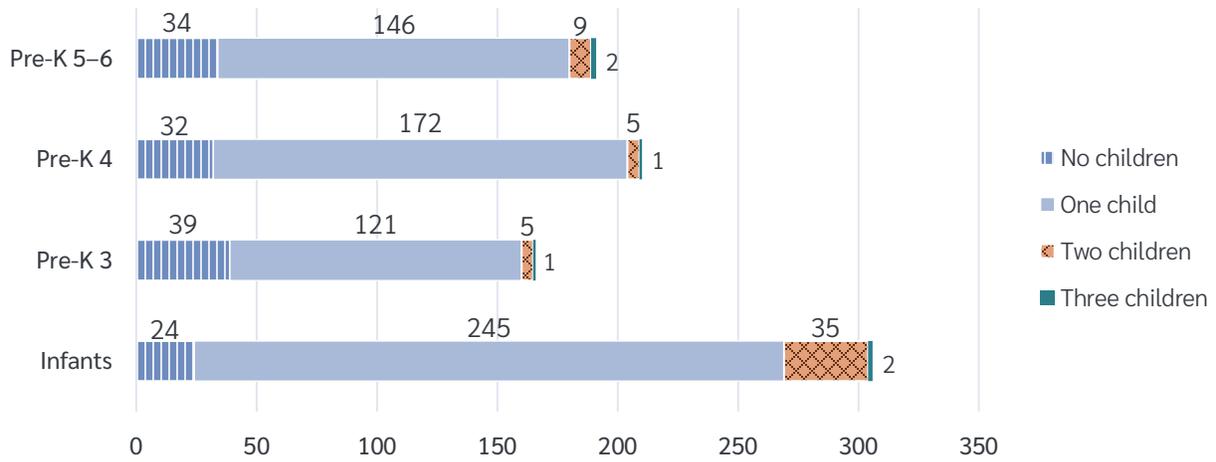
Figure 15. Parent Income of respondent on Parent/Family Survey (N = 734)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

As seen in Figure 16, most respondents had one child in the various age groups of children.

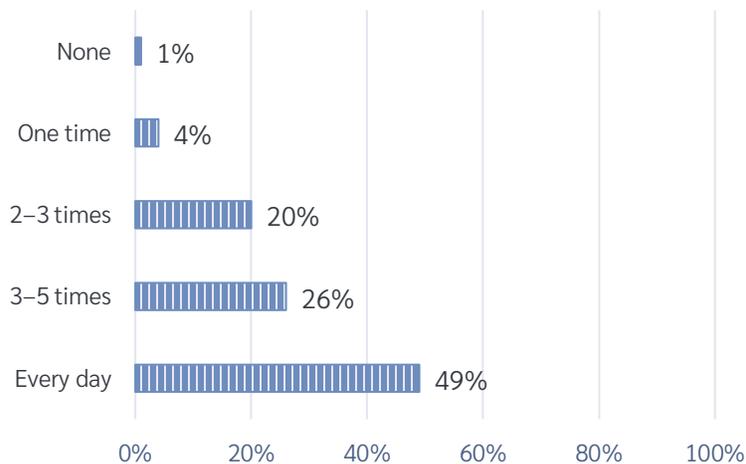
Figure 16. Number of children per grade range of respondent on Parent/Family Survey



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

As an indicator of involvement in their child/children’s education, this survey also asked parents/families the number of times a week they read to their child/children. More than 90% of respondents indicated reading to their child/children at least 2–3 times a week, with more than 40% of those respondents indicating they read to their child/children every day (Figure 17).

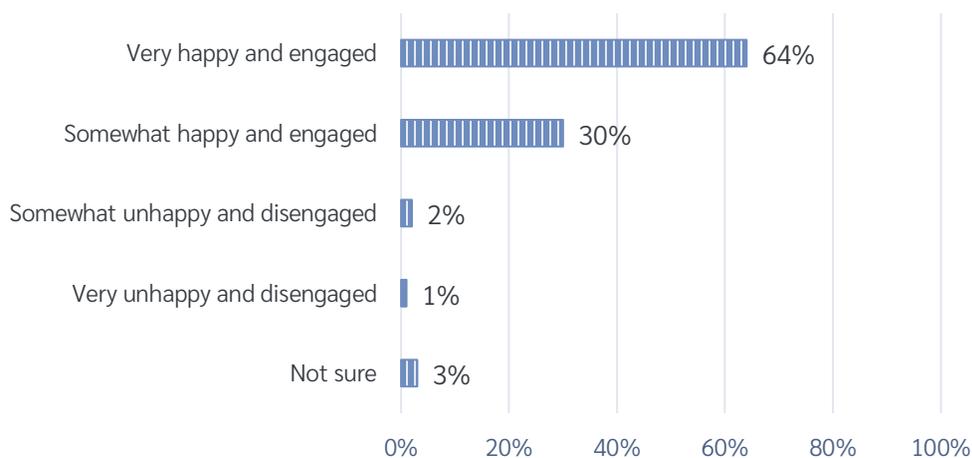
Figure 17. ‘During the past week, how many days did you or other family members read to your child or children?’ on Parent/Family Survey (N = 729)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

When asked to describe their child/children’s feelings about the child care and/or education setting, almost 95% of respondents indicated that their child/children was somewhat to very happy and engaged (Figure 18).

Figure 18. ‘How would you describe your child’s feelings about the child care and/or education setting?’ on Parent/Family Survey (N = 658)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

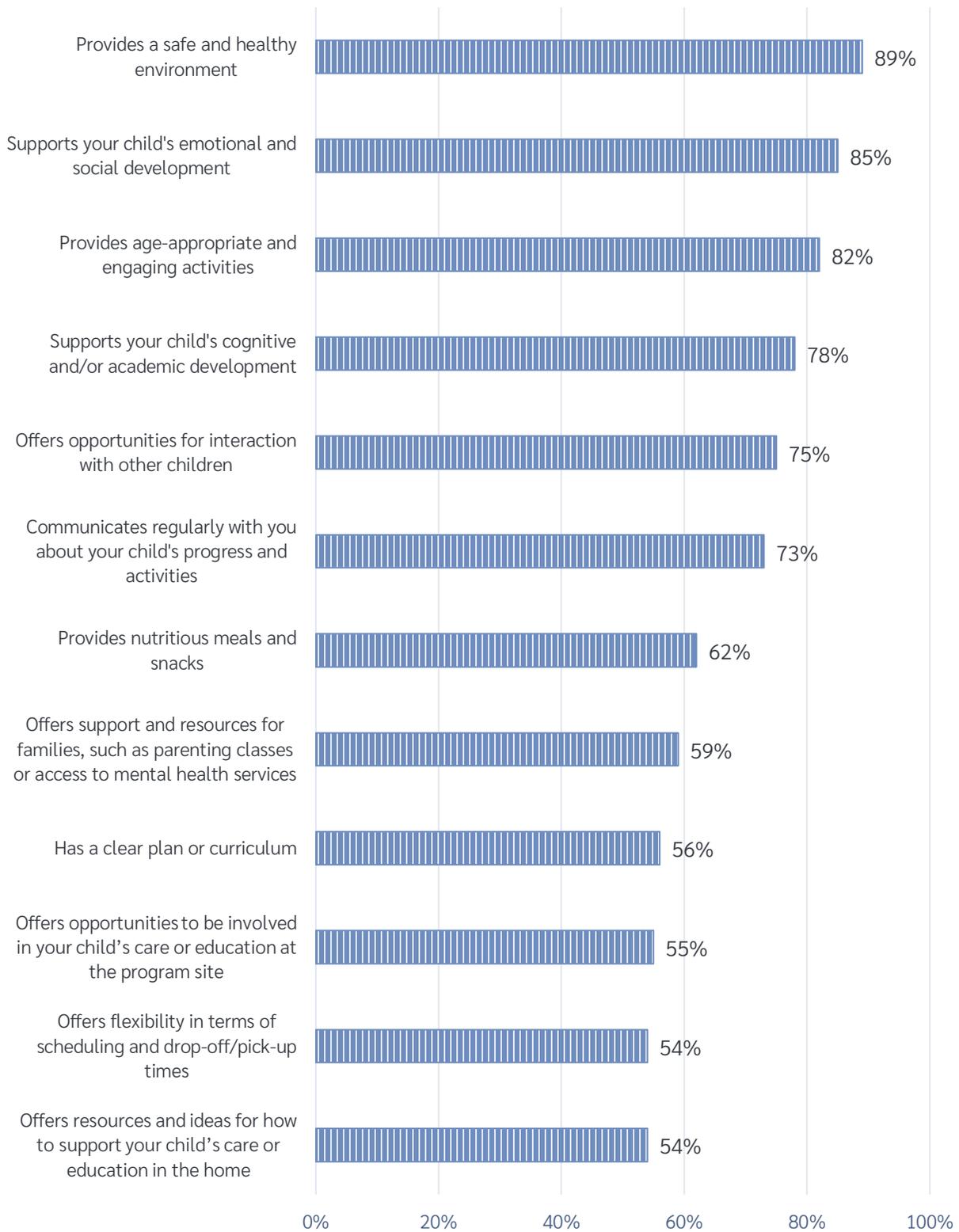
Family Engagement or Needs with the ECCE System

Family engagement refers to the multi-faceted ways in which early childhood care and education (ECCE) providers and systems interact with, involve, and support families. True engagement goes beyond just informing families about services and logistics. It encompasses actively collaborating with families as partners, empowering them to advocate for their children's needs, and connecting them to comprehensive resources that support the whole family unit. Parents and families are foundational in facilitating their young children's healthy development and positive learning experiences.

This section explores various dimensions of respondent engagement in Idaho based on data from the Parent/Family Survey and an analysis of special education data related to parent/family involvement metrics. It examines factors like respondents’ priorities when selecting care, the types of care settings used, perspectives on how well providers facilitate involvement, and the resources and services accessed for support.

For respondents, the top three most frequently-identified priorities when considering child care were a safe and healthy environment (89%), support for their child/children’s social and emotional development (85%), and age-appropriate and engaging activities (82%). Respondents identified flexibility in scheduling (54%), resources to support their child/children (54%), and resources to support the family (39%) as their lowest priorities when considering child care (Figure 19).

Figure 19. 'What is a priority for you in considering child care?' on Parent/Family Survey (N = 723)

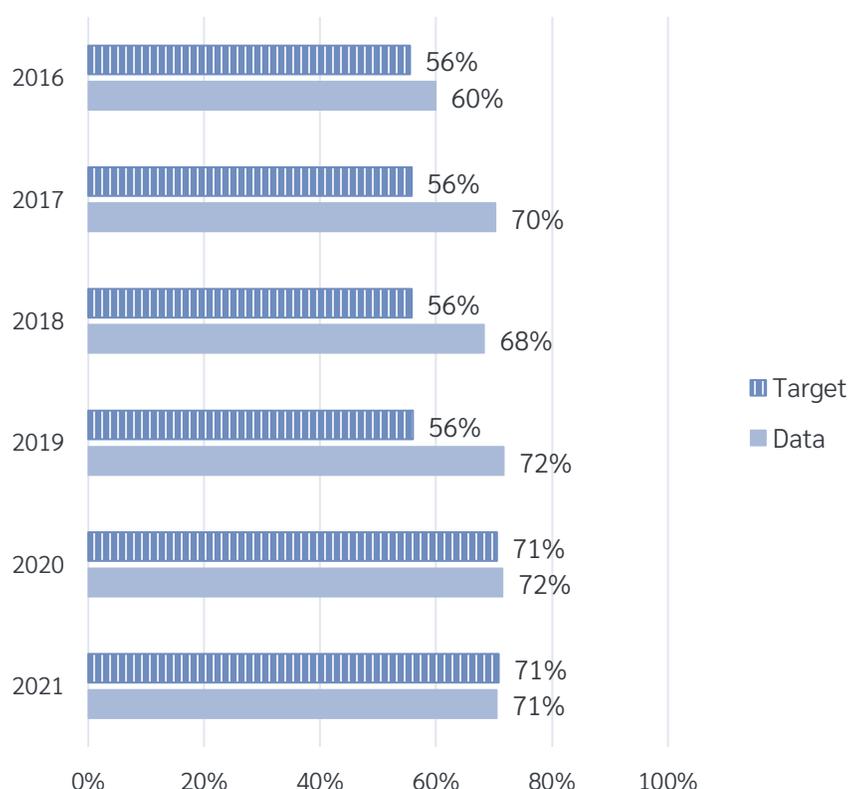


Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Parent Engagement in Special Education

The State Performance Plan/Annual Performance Report: Part B provides information on the percentage of parents/families with a child or children receiving special education services who reported that schools facilitated parent/family involvement to improve services and results for their child/children. In the 2021 federal fiscal year, the most recent data available, Figure 20 shows that 70.5% of respondents reported their child/children’s school facilitated parent/family involvement—slightly below the state's target of 70.8% and a decrease from the 2020 fiscal year results of 71.5% (State Performance Plan/Annual Performance Report: Part B, 2023).

Figure 20. Percentage of parents with a child in special education reporting school-facilitated parent involvement



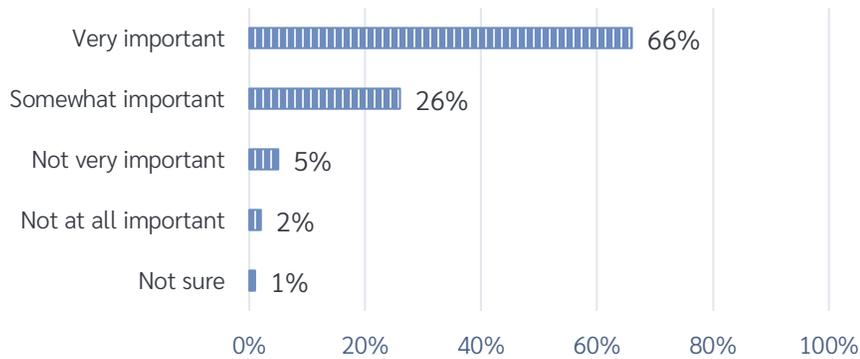
Source: U.S. Department of Education, State Performance Plan/Annual Performance Report: Part B for State Formula Grant Programs under the Individuals with Disabilities Education Act: For Reporting on FFY 2021: Idaho

Parent/Family Report on the Value of Preschool and Kindergarten

Preschool serves as an important early learning experience for many young children before entering kindergarten. This section examines findings from the Parent/Family Survey related to preschool selection, priorities when choosing a preschool program, and perspectives on the importance of preschool. It also looks at respondents’ plans for kindergarten, including their preferred kindergarten model and setting.

The Parent/Family Survey results indicate that most respondents place a high value on preschool for their children, with 66% rating it as very important (Figure 21). Only around 5% identified preschool as of little importance.

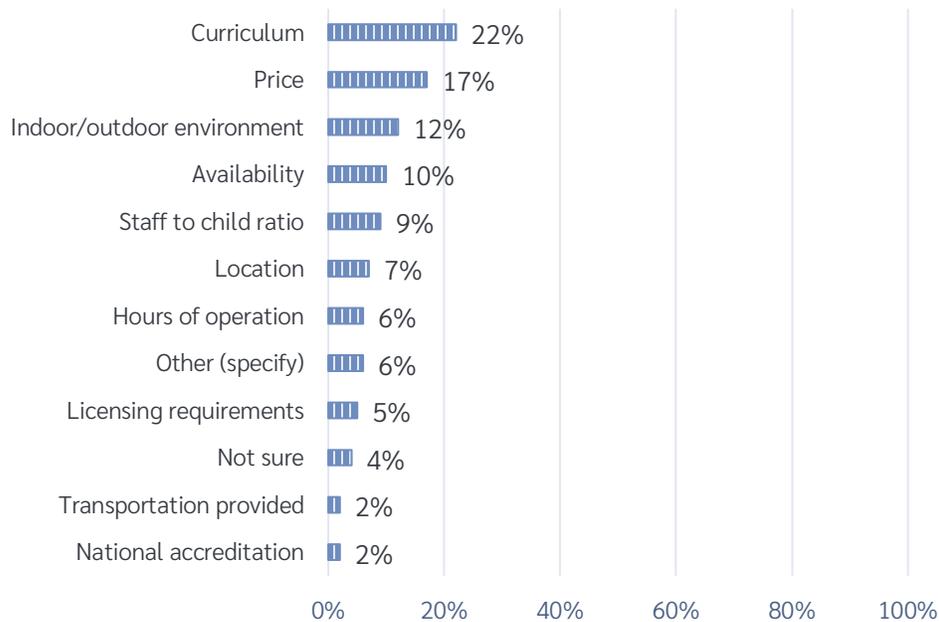
Figure 21. ‘How important is preschool for your child or children?’ on Parent/Family Survey (N = 736)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

The survey also asked respondents to identify their top priority for their preschool program selection (Figure 22). Preschool curriculum (22%), price (17%), and indoor/outdoor environment (12%) were among respondents' top priorities when selecting a preschool program. The fewest respondents identified national accreditation (2%) and transportation provided (2%) as priorities in selecting a preschool program.

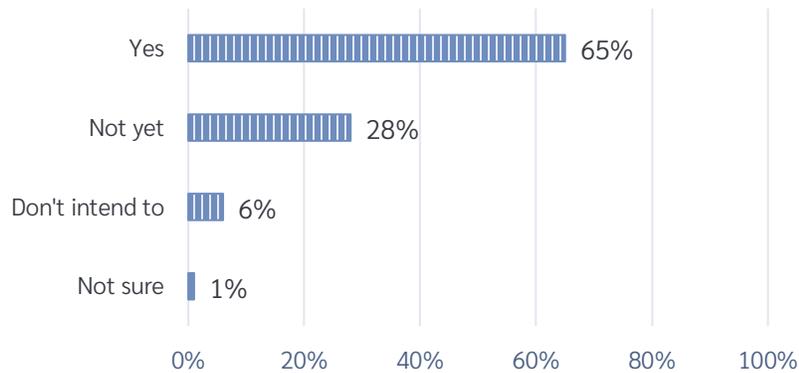
Figure 22. ‘What is the most important factor in selecting a preschool program?’ on Parent/Family Survey (N = 736)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Most respondents indicated they had selected a preschool program (65%), with only 6% not intending to select a preschool program (Figure 23).

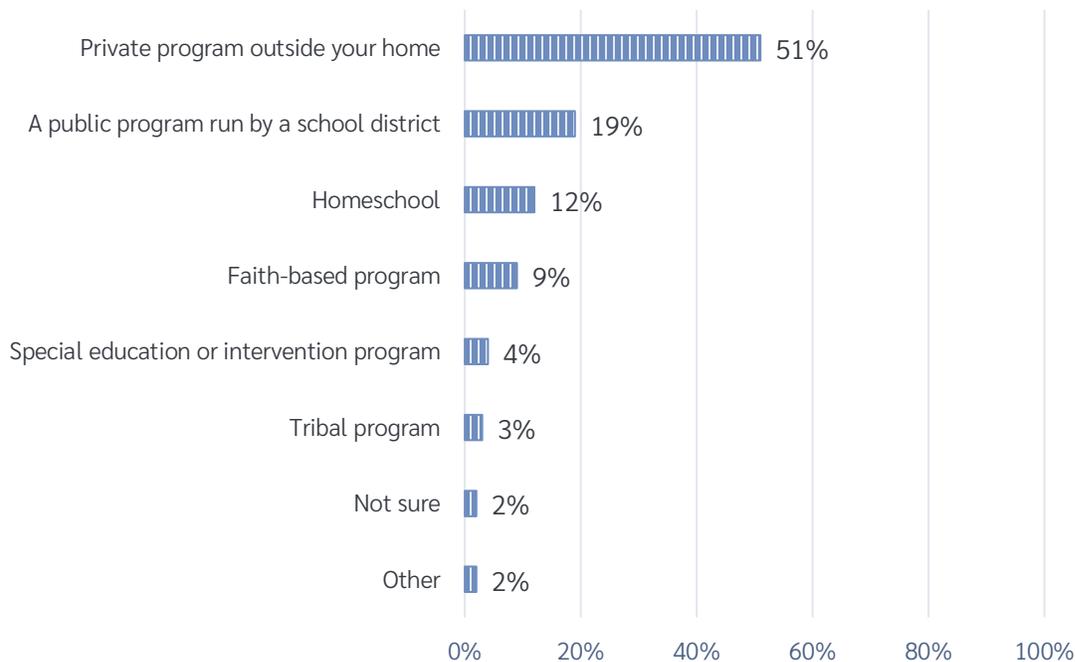
Figure 23. ‘Have you selected a preschool program for your child or children?’ on Parent/Family Survey (N = 741)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

When asked about the type of preschool program they will select for their child/children, 51% of respondents indicated they have or will select a private preschool program (Figure 24). Another 19% indicated they have or will select a preschool program associated with a school district. Only 2% of respondents were unsure about their current or future choice for preschool.

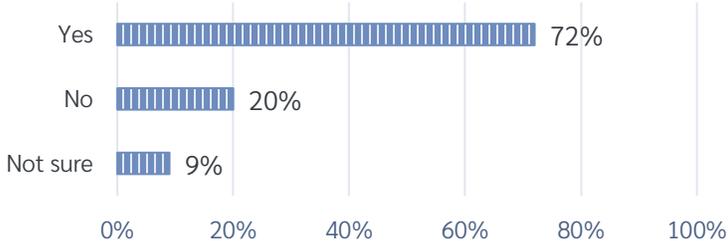
Figure 24. ‘Who provides the preschool program?’ on Parent/Family Survey (N = 481)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

While price was an important factor in selecting a preschool for some parents/families, most respondents (72%) did or plan to pay for their chosen preschool program (Figure 25).

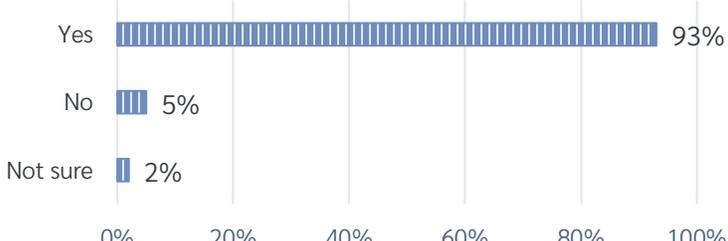
Figure 25. ‘Do you currently pay or plan to pay for that preschool program?’ on Parent/Family Survey (N = 617)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

The Parent/Family Survey also included specific questions related to respondents’ plans for kindergarten (Figure 26). Almost all respondents intend to send their child to kindergarten (93%).

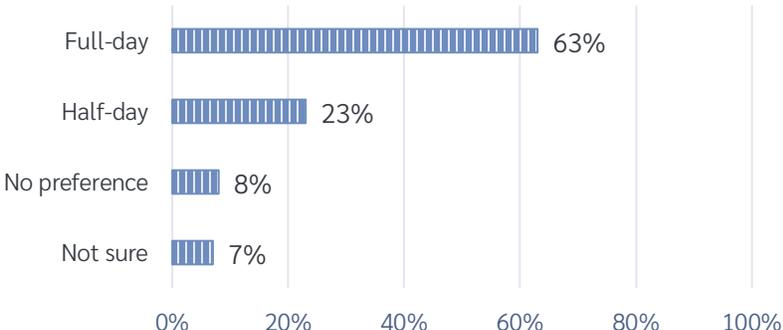
Figure 26. ‘Do you intend to send your child to kindergarten?’ on Parent/Family Survey (N = 740)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

As shown in Figure 27, most respondents preferred a full-day kindergarten (63%) as opposed to a half-day kindergarten (23%), no preference (8%), or unsure (7%).

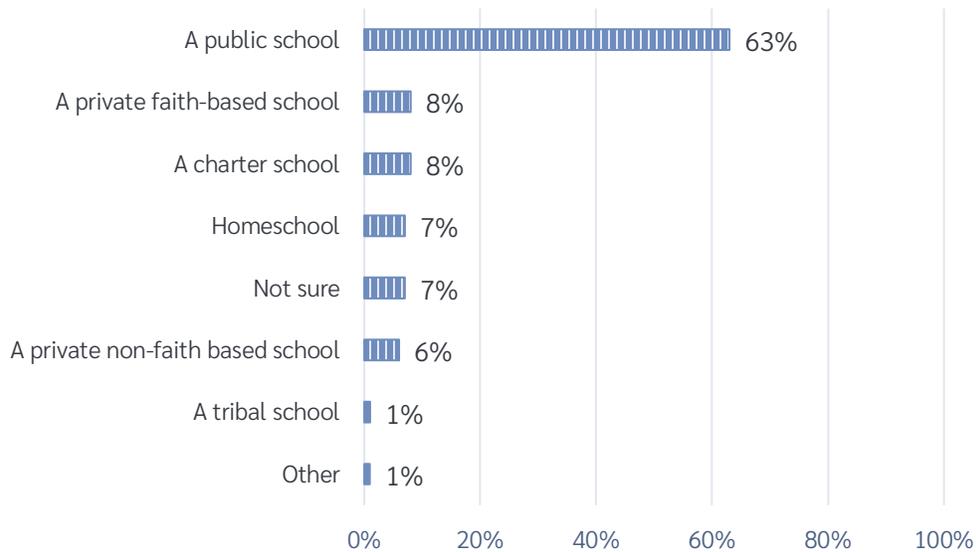
Figure 27. ‘Which type of kindergarten do you prefer?’ on Parent/Family Survey (N = 686)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Figure 28 shows that most respondents (63%) indicated their plan for kindergarten would be in a public school setting. The remaining respondents fell into somewhat similar proportions across kindergarten options: private faith-based (8%), charter school (8%), homeschool (7%), and private non-faith-based (6%). A small percentage indicated a preference for a tribal school (1%) or another option not listed (1%).

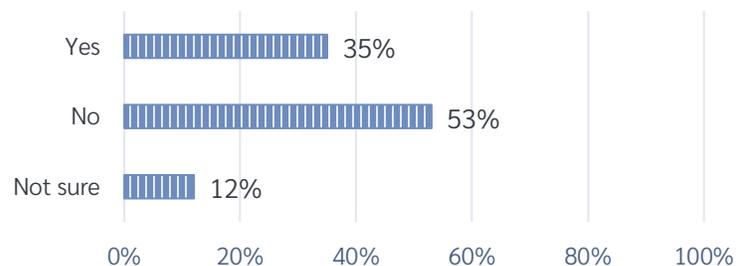
Figure 28. ‘Your child or children will be attending kindergarten at’ on Parent/Family Survey (N = 716)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

As a majority of respondents intend to use public school settings for kindergarten, it is unsurprising that the majority (53%) also do not plan to pay for their child/children’s kindergarten program (Figure 29).

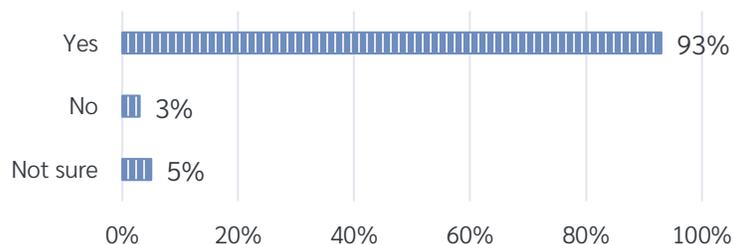
Figure 29. ‘Do you currently pay or plan to pay for that kindergarten program?’ on Parent/Family Survey (N = 698)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Despite some variation in kindergarten preferences, nearly all respondents (93%) believe their child would have the necessary skills to succeed in kindergarten (Figure 30).

Figure 30. ‘Do you believe your child has or will have the skills necessary to succeed in kindergarten?’ on Parent/Family Survey (N = 304)



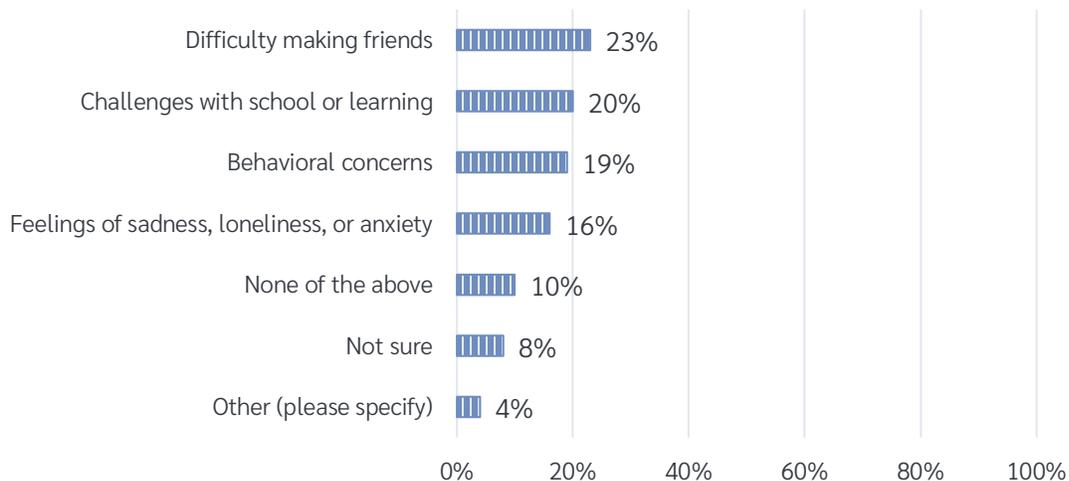
Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

COVID-19 on Impact on Families

The COVID-19 pandemic disrupted many aspects of society, including early childhood care and education for young children and their families. This section explores how Idaho families were impacted by the pandemic based on responses to the Parent/Family Survey. It looks at the specific challenges faced by children and families, the broader workforce, and communities due to COVID-19-related child care issues.

The Parent/Family Survey results illustrate that the COVID-19 pandemic created significant difficulties for many Idaho families with young children. Respondents cited challenges like difficulty making friends (23%), challenges with school or learning (20%), behavioral concerns (19%), and feelings of sadness, loneliness, or anxiety (16%) as difficulties their child/children experienced due to COVID-19 (Figure 31).

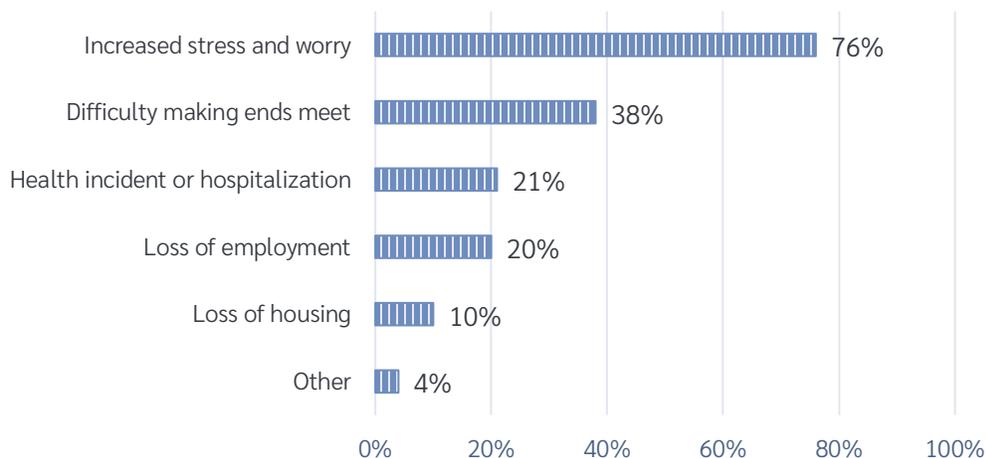
Figure 31. ‘What are some difficulties your child has had due to Covid?’ on Parent/Family Survey (N = 773)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

On the family side, increased stress and worry (76%) and difficulty making ends meet (38%) were among the top difficulties reported (Figure 32).

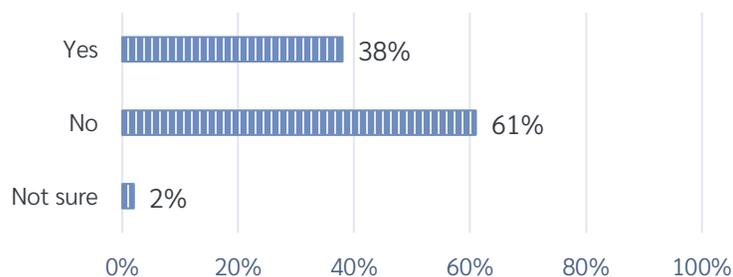
Figure 32. ‘What are some difficulties your family has had due to Covid?’ on Parent/Family Survey (N = 732)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

When asked if they, or anyone in their family, had to quit, not take, or greatly change their job because of child care difficulties during the COVID-19 pandemic, 38% of respondents selected yes (Figure 33). These findings underscore the economic ripples caused by the pandemic's impact on the child care sector.

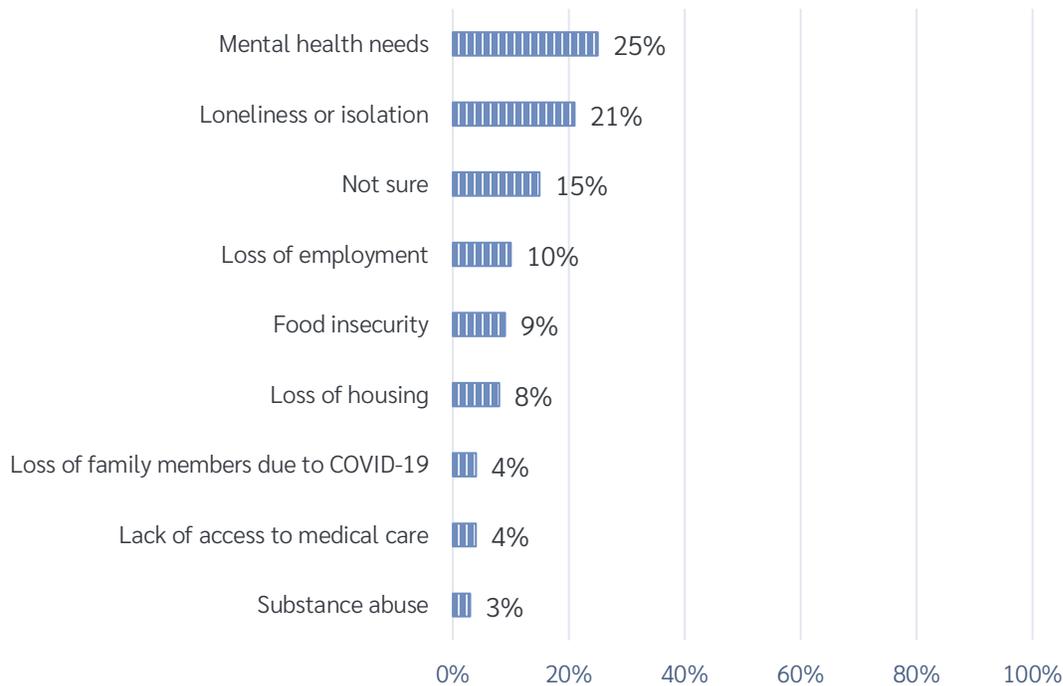
Figure 33. ‘During the past 12 months did you or anyone in the family have to quit a job, not take a job, or greatly change your job because of child care?’ on Parent/Family Survey (N = 774)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

When asked about the effects on their community, respondents indicated that mental health needs (25%) and loneliness or isolation (20%) were the largest effects of the COVID-19 pandemic (Figure 34).

Figure 34. ‘Thinking about your community, which of the following did the pandemic impact the most?’ on Parent/Family Survey (N = 722)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Early Childhood Care and Education Demand

This section estimates the potential demand for early childhood care and education (ECCE) in Idaho based on American Community Survey (ACS) data on the count and percentage of children ages birth through 5 with all parents in the labor force and, therefore, potentially needing care. To estimate the availability of ECCE relative to the potential demand, researchers employ a variety of methodologies to identify “child care deserts” where the quantity of ECCE slots does not meet the potential demand for care.¹⁰ For all methodologies, it is necessary to have reliable early care licensed capacity data to compare with the counts of young children potentially needing care. As indicated above, it is only possible to provide broad-range estimates of licensed capacity for Idaho child care, and these estimates are only possible for children ages birth through 12. Therefore, it is not possible, with currently available data, to accurately assess the adequacy of ECCE capacity in the state.

¹⁰ A basic methodology for determining child care deserts is calculating the gap between licensed slots and the number of children with all parents in the labor force (as a proxy for the number of children potentially needing care). The [Center for American Progress definition](#) is more nuanced: “A child care desert is any census tract with more than 50 children under age 5 that contains either no child care providers or so few options that there are more than three times as many children as licensed child care slots.” In their 2017 study, they estimated that 49% of people in Idaho lived in a child care desert. This was similar to the national rate of 50%.

Parent Labor Force Participation

The number and percentage of young children with all parents in the labor force is a common method for estimating potential demand for preschool or child care. Idaho has an estimated 78,385 children under age 6, with all parents in the labor force (American Community Survey 2022: ACS 5-Year Estimates Detailed Tables, B23008, n.d.).¹¹ This amount is equivalent to 59% of all children ages birth through 5, which is low compared to the national rate of 67%. The ten counties with the greatest proportion of children with all parents in the labor force are shown in Table 9. Please see Appendix A for a complete table of all counties.

Table 9. Ten Counties with the Highest Percentage of Children Under Age 6 with All Parents in the Labor Force in Idaho, 2022

County	Largest City in County	Count of Children	Percentage of Children
Blaine	Hailey	782	84%
Lemhi	Salmon	287	77%
Nez Perce	Lewiston	1,930	75%
Teton	Victor	751	71%
Minidoka	Rupert	1,357	69%
Payette	Payette	1,273	67%
Kootenai	Coeur d'Alene	7,996	67%
Elmore	Mountain Home	1,510	65%
Clearwater	Orofino	238	64%
Bear Lake	Montpelier	351	64%

Note: The denominator for this analysis (count of children under age 6) differs slightly from the demographic data presented in the Demographic Profile section due to the underlying universe for the data. Table B09001 is based on counts of all people under age 18, whereas Table B23008 is based on counts of related children in families.

Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2022, Table B23008

Over ten years, from 2013 to 2022, Idaho has seen a 1% decrease in the number of children under age 6 with all parents in the labor force, as evidenced by the blue line in Figure 35. However, as shown by the gray line, the percentage of young children with all parents in the labor force has increased by two percentage points, from 57% to 59%. This increase is due to an estimated decline of 5% in the count of young children in Idaho between 2013 and 2022.

¹¹ “All parents” means in two-parent households both parents are working and in single-parent households the sole parent is working. Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2022, Table B23008.

Figure 35. Number and Percentage of Children Under Age 6 with All Parents in the Labor Force, Idaho, 2013–23



Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2022, Table B23008

Barriers to Service

The Parent/Family Survey asked respondents various questions to determine some of the challenges families in Idaho are facing when it comes to early childhood care and education (ECCE). The survey revealed a challenge in finding and affording high-quality care in their area or not knowing how to access resources to support their needs. These findings illustrate how critically important accessible, affordable, stable, high-quality child care options are for parents/families' ability to work, young children's learning and healthy development, and community economic vitality. Prioritizing efforts to stabilize and strengthen the ECCE landscape could pay dividends across multiple domains for families.

Section Key Findings

Idaho has a relatively average cost or more affordable child care compared to other states. For example, as a proportion of median income, center-based care for single-parent households in Idaho was relatively more affordable compared to other states, ranking 44 out of 50, where 50 was the most affordable state for center-based child care for single-parent families.

More children are potentially eligible for subsidized child care than those who access subsidies or subsidized care. For every Early Head Start or Head Start slot filled, there are approximately four children potentially needing care because their parents are in the labor force and are income-eligible to participate. For every young child participating in ICCP, approximately five children potentially need care and are income-eligible to participate.

Affordability of services was identified as the principal challenge. A significant portion of respondents, nearly 60%, identified the affordability of services as the principal challenge, followed by concerns about the quality of services (32%) and operational factors such as hours of operation (24%). These findings underscore the need for affordable, high-quality child care solutions that accommodate diverse family schedules.

More than half of respondents reported difficulties in finding high-quality child care. More than half of the respondents (63%) reported difficulties finding high-quality child care in their area, with 40% finding it somewhat difficult and 23% very difficult. This suggests a gap between the demand for quality child care and the available supply.

Nearly a quarter of respondents felt child care options do not meet their needs. While 64% of respondents felt the early care and education options available meet their needs, a significant minority either felt these options do not meet their needs (23%) or were unsure (13%). This indicates room for improvement in ensuring all families have access to satisfactory child care options.

A majority of respondents were unaware of programs or resources available to help them access ECCE. With 63% of respondents unaware of services that could help them overcome challenges related to accessing high-quality ECCE, this highlights a potential area for increased communication and outreach efforts to connect families with available support.

The most utilized services were health services and child care facilities. The survey also shed light on the types of services and resources families have accessed, with health services (56%) and child care facilities (55%) being the most commonly utilized. This information could guide the development of targeted support services that align with family needs.

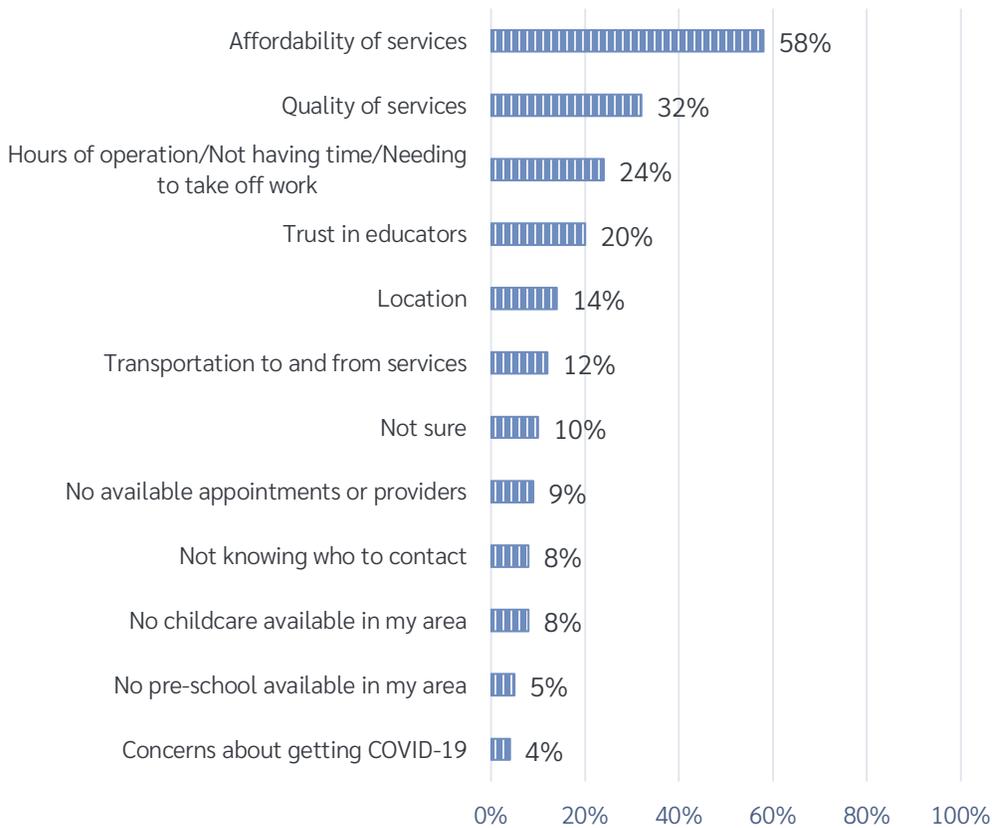
Nearly half of the young children in Idaho live in families with low income or poverty level income. The survey found that 44% of young children in Idaho live in families with low income or poverty level income, slightly higher than the national average. This statistic emphasizes the importance of subsidizing child care to support low income families.

Participation in the Idaho Child Care Program (ICCP) is declining. There has been a 29% decline in the number of children ages birth through 5 participating in ICCP over the past five years, pointing to a need for increased awareness and possibly reevaluation of the program to enhance participation.

Major Challenges

Respondents to the Parent/Family Survey were asked to identify the biggest challenges they experience with child care. Almost 60% noted affordability of services to be the biggest challenge (Figure 36). The other top two challenges respondents identified were quality of services (32%) and operational factors relating to time, such as hours of operation (24%). A fifth of respondents (20%) indicated that trust in educators was the biggest challenge to child care for their family.

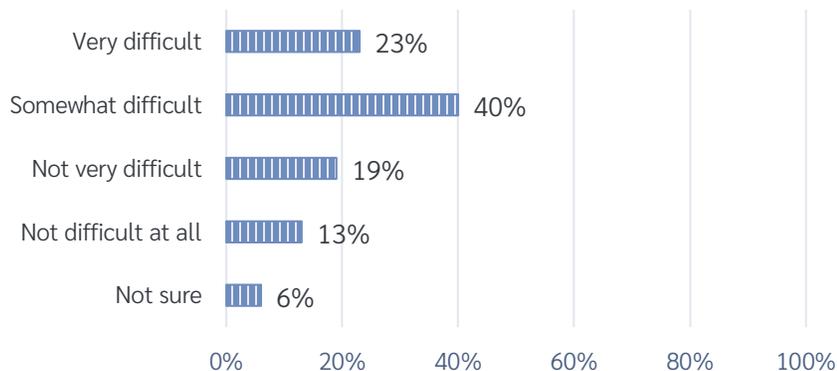
Figure 36. ‘What are the biggest challenges with child care for your family?’ on Parent/Family Survey (N = 530)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

More than half of the respondents indicated finding high-quality child care in their area was either somewhat difficult (40%) or very difficult (23%), as noted in Figure 37.

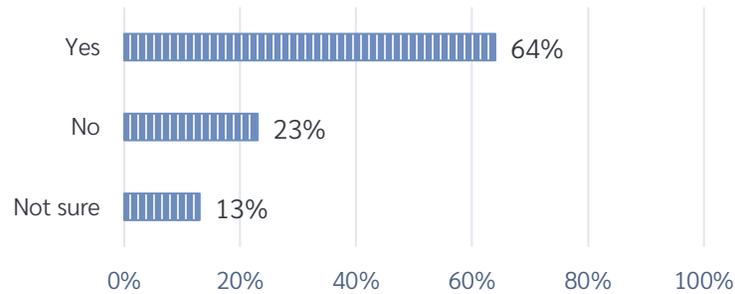
Figure 37. ‘How difficult has it been for you to find high-quality early care and education in your area?’ on Parent/Family Survey (N = 779)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

A majority of respondents (64%) believed that the early care and education options available in their area met their needs (Figure 38). However, a portion of respondents did not feel (23%) or were unsure if (13%) the options met their needs.

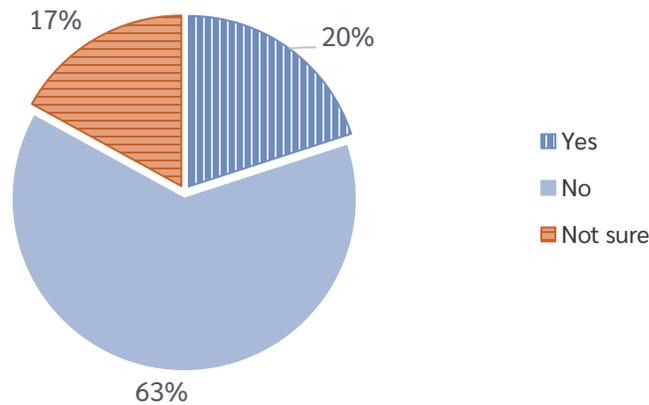
Figure 38. ‘Do the options available for early care and education for your children ages 0–5 meet your needs?’ on Parent/Family Survey (N = 779)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

A majority of respondents were unaware (63%) or unsure (17%) of programs or resources that would help them overcome the various challenges with and access to high-quality early childhood care and education (Figure 39). These data highlight a potential gap in connecting families to comprehensive services. Strengthening communication channels and removing barriers to accessing supplemental assistance could enhance overall family engagement.

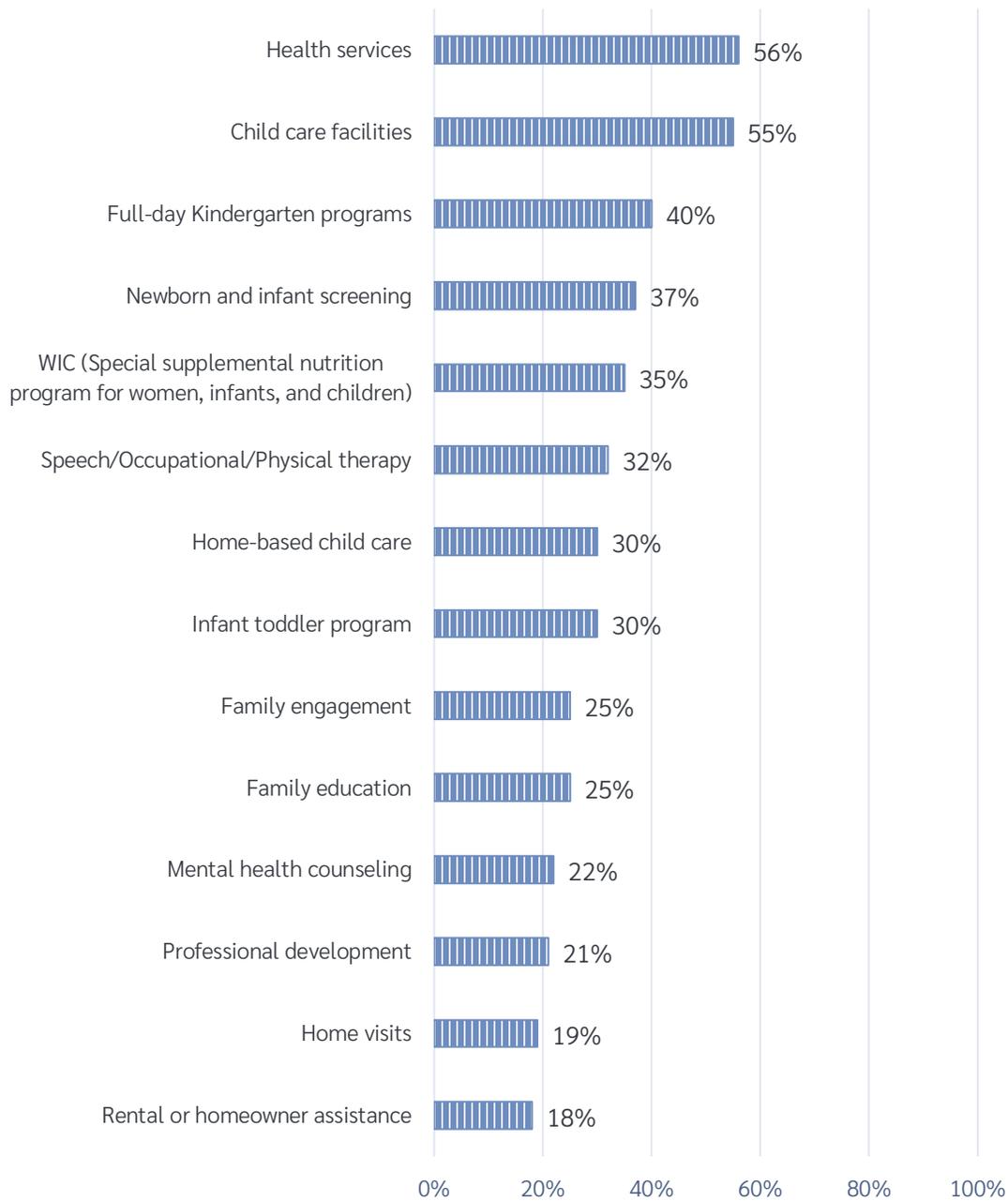
Figure 39. ‘Do you know of any programs or resources that can help you overcome that challenge?’ on Parent/Family Survey (N = 469)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

While many respondents might not have been sure or aware of programs or resources, there are many supports families can access—some of which relate to communities formed around ECCE. The Parent/Family Survey provided an opportunity for respondents to select the services they accessed in the past year (Figure 40). Most respondents selected health services (56%) or child care facilities (55%). Home visits (19%) and rental or homeowner assistance (18%) were the two least identified services.

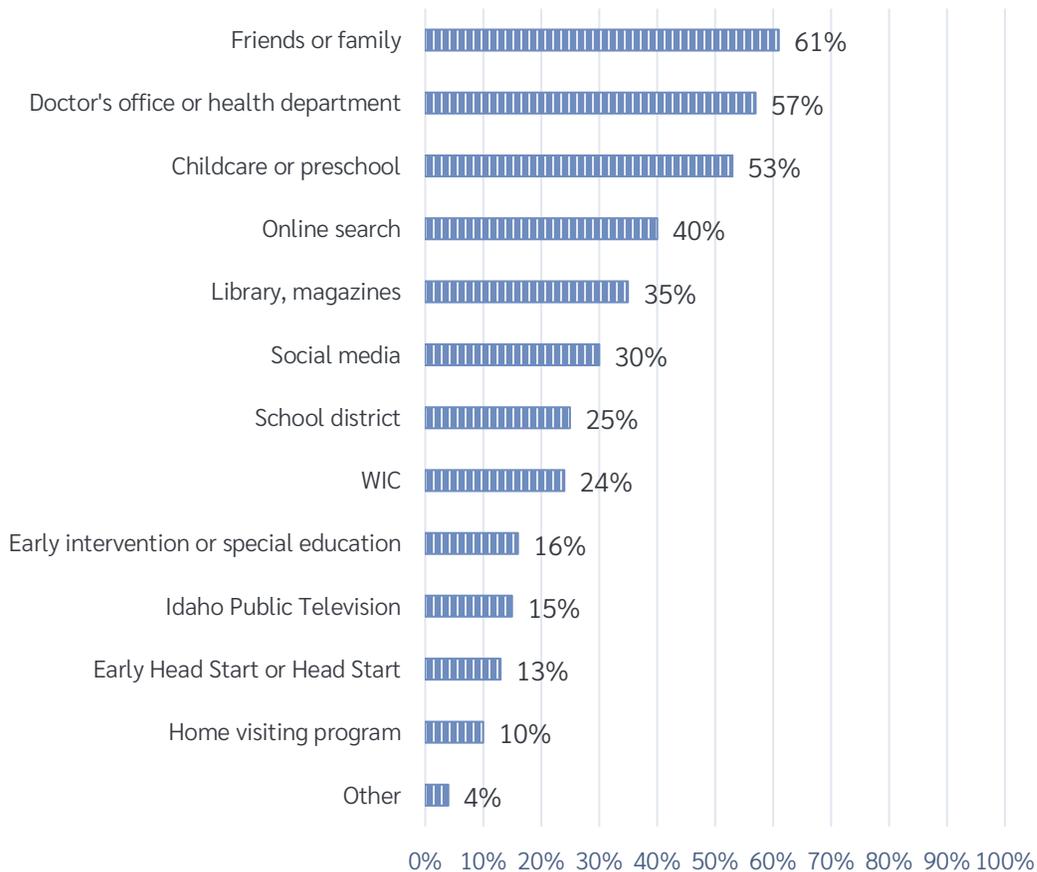
Figure 40. 'What are some services you have accessed?' on Parent/Family Survey (N = 654)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Respondents were also asked to identify resources accessed that were specifically used to support their family (Figure 41). Friends and family (61%), doctors and health departments (57%), and the child care setting or preschool (53%) were identified as the top three resources respondents accessed. The least accessed resources among respondents were Idaho Public Television (15%), Early Head Start or Head Start (13%), and home visiting programs (10%).

Figure 41. ‘What resources have you accessed to support your family?’ on Parent/Family Survey (N = 691)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Cost as a Barrier

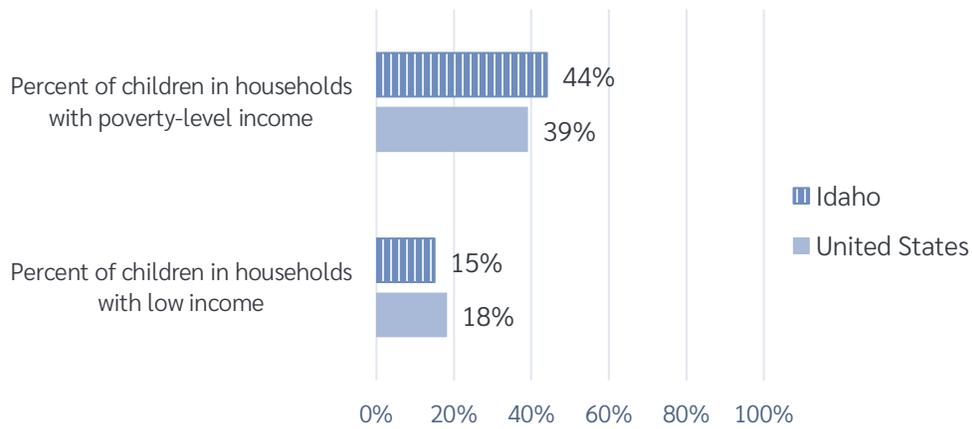
The cost of child care can be a barrier to access for many families. This section examines the percentage of children in families in poverty or with low income. It compares these data to the number of children accessing subsidies through the Idaho Child Care Program (ICCP) or subsidized early care, such as Head Start. This section also shows data on the price of child care in Idaho and families’ ability to afford care.

Children in Families in Poverty or with Low Income

In Idaho, 20,755 children ages birth through 5 live in families below the federal poverty level—15% of all young children in the state (American Community Survey 2022: ACS 5-Year Estimates Detailed Tables, B17024, n.d.). Another 38,309 young children live in families with low income (defined as between 100% and 200% of the federal poverty level). In total, 44% of Idaho’s young children live in families with low income or poverty level income. Compared to the national average of 18%, Idaho has fewer young children in poverty. However, Idaho has more young

children living in families with low income (less than 200% of the federal poverty level) compared to the country as a whole, as shown in Figure 42.

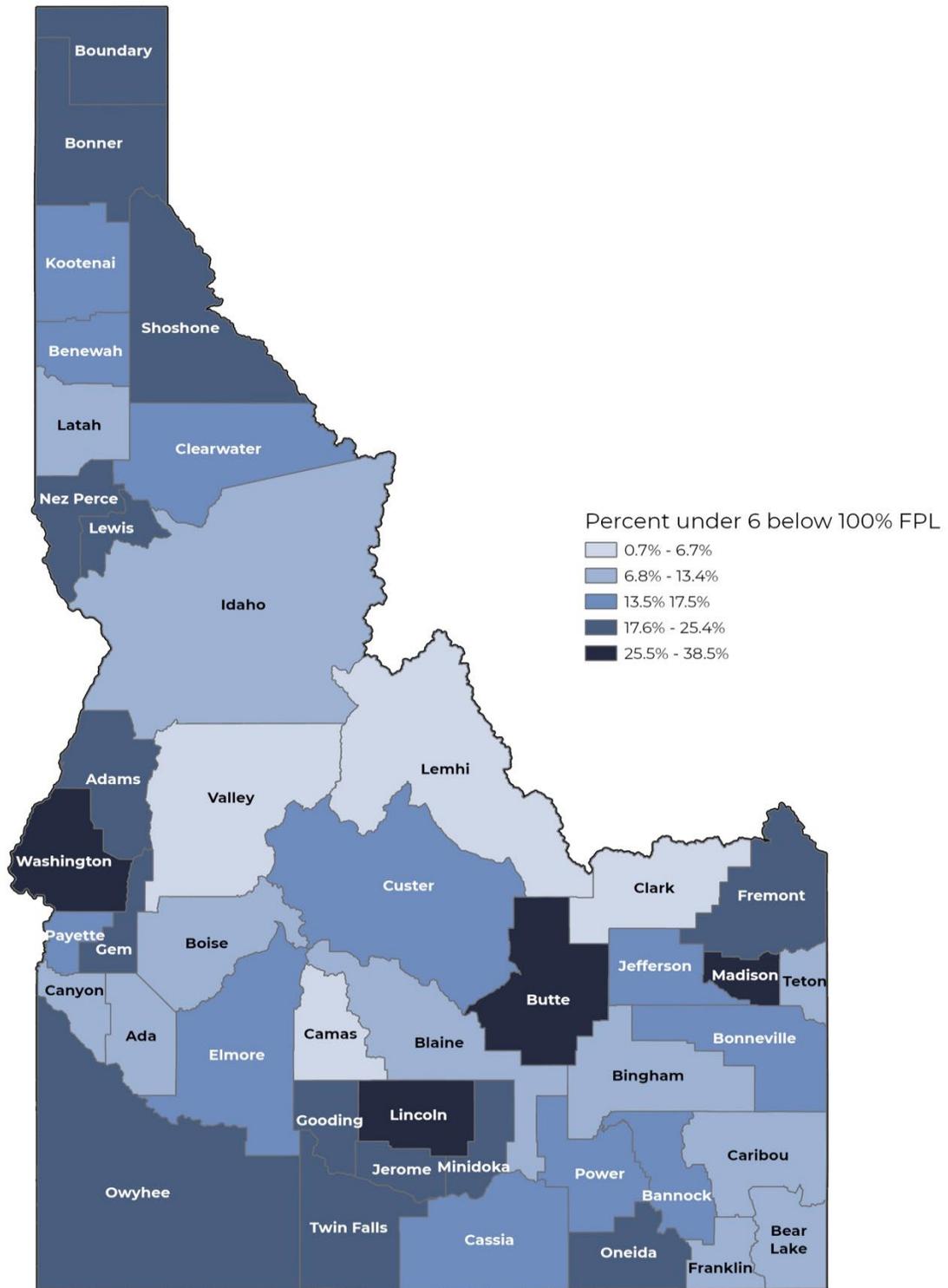
Figure 42. Percentage of Children Living in Families with Poverty Level Income and Low Income, Idaho and the U.S., 2022



Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2022, Table B17024

As shown in Figure 43 (with details provided in Appendix A), counties with the highest rates of young child poverty include Butte County (39%), Washington County (31%), Lincoln County (28%), and Madison County (27%).

Figure 43. Percentage of Children Under Age 6 Living in Families with Income Below Poverty Level, by County, 2022



Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2022, Table B17024

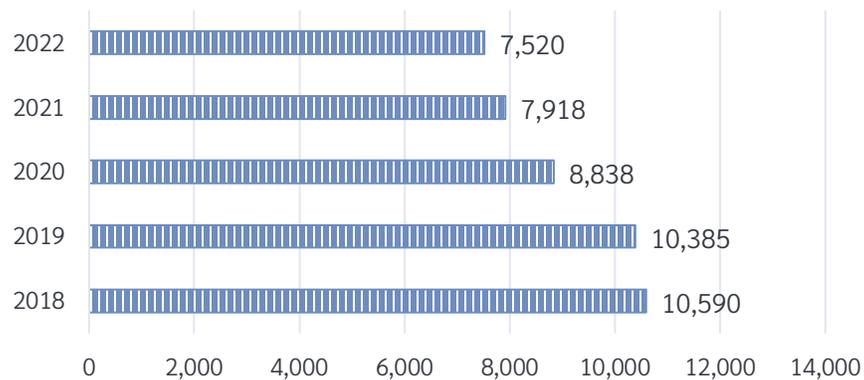
Child Care Subsidies and Subsidized Care

This section provides data on subsidized care and compares it to counts of children potentially eligible for subsidized care. This analysis can assess the extent to which income-eligible children are accessing available subsidized care, either in the form of state subsidies that can be used in private settings, which in Idaho is referred to as the Idaho Child Care Program (ICCP), or by attending a free program like Early Head Start or Head Start.

Idaho Child Care Program (ICCP) Child Care Subsidy

The number of children ages birth through 5 receiving ICCP subsidies decreased from 10,590 in 2018 to 7,520 in 2022, as shown in Figure 44 (Public Records Request response KL-00019, 2023).

Figure 44. Count of Children Ages 0–5 Participating in ICCP, 2018–22



Source: Idaho Department of Health and Welfare, Public Records Request response KL-00019, 2023

Among the 706 pending or licensed providers serving children ages birth through 12 included in RISE data, 464 (66%) were pending certification or certified to participate in ICCP.¹²

Analysis of Subsidized Care Participation and Eligibility

As detailed in this section, more children are potentially eligible for subsidized child care than those who access subsidies or subsidized care (Figure 45). For every Early Head Start or Head Start slot filled, there are approximately four children potentially needing care because their parents are in the labor force and are income-eligible to participate. For every young child participating in the ICCP, approximately five children potentially need care and are income-eligible to participate.

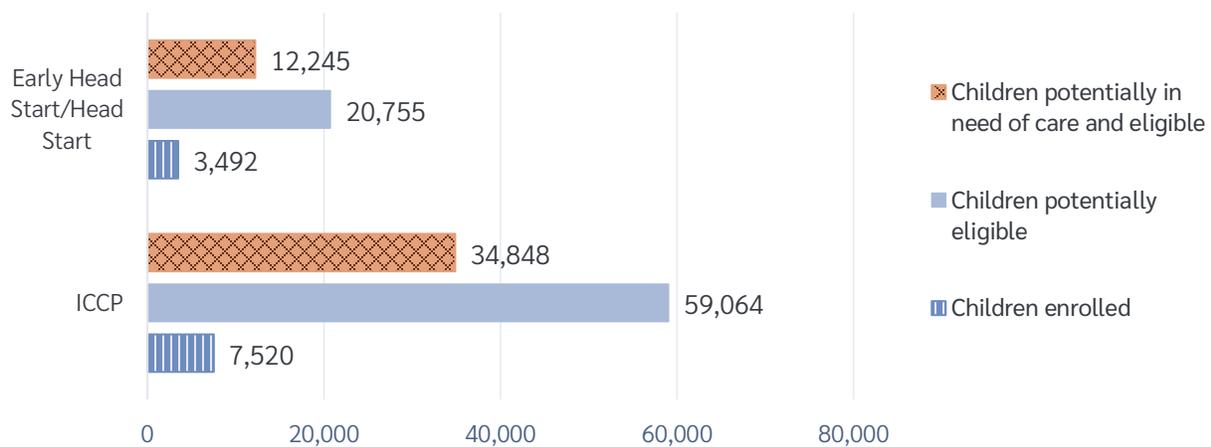
¹² From IdahoSTARS Eligibility data pull, February 27, 2024.

In Idaho, a family of four earning a monthly income of \$4,375 or less is eligible for ICCP subsidies if they meet other criteria, such as residency and employment or education enrollment (Child Care, n.d.). This is roughly equivalent to a family earning 200% of the Federal Poverty Level, which was \$55,500 for a family of four in 2022 (2022 Poverty Guidelines, 2022).

Therefore, the potentially eligible population for ICCP is estimated using the count of children ages birth through 5 living in families with income below 200% of the Federal Poverty Level. As shown in Figure 45, approximately 13% of young children potentially eligible for ICCP subsidies participated (American Community Survey 2022: ACS 5-Year Estimates Detailed Tables, B17024, n.d.; Public Records Request response KL-00019, 2023; PIR Indicator Report – 2022, n.d.). If the count of children in low income households is adjusted by the percentage of children potentially needing care (defined as the number of young children with all parents in the labor force) and eligible for an ICCP subsidy, approximately 20% of eligible young children are participating.

According to the United States Health and Human Services (HSS), children are eligible for Early Head Start or Head Start if they are living in poverty as determined by the HSS Poverty Guidelines (2022 Poverty Guidelines, 2022). In 2022, there were 20,755 young children living in poverty in Idaho. When compared to the cumulative enrollment in Early Head Start or Head Start in 2022, approximately 17% of eligible young children are filling a slot. If the count of children in poverty is adjusted by the percentage of children potentially needing care, approximately 25% of young children in need of care and eligible for Early Head Start or Head Start are filling a slot.

Figure 45. Count of Children Ages 0–5 Participating in the Idaho Child Care Program (ICCP) or Early Head Start/Head Start that are Potentially Eligible for Subsidized Care, 2022



Note: Children Potentially Eligible for ICCP is defined as children ages birth through 5 living in families with incomes 200% or less of the Federal Poverty Level; for Early Head Start and Head Start, it is defined as children ages birth through 5 living in families with income at or below the Federal Poverty Level. Children Potentially in Need of Care and Eligible is calculated by multiplying the count of Children Potentially Eligible by the Idaho percentage of children ages birth through 5 with all parents in the labor force (59%), which is a proxy for demand for child care.

Sources: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2022, Table B17024; Idaho Department of Health and Welfare, Public Records Request response KL-00019, 2023; U.S. Department of Health and Human Services, Office of Head Star, PIR Indicator Report - 2022

Cost of Early Childhood Care and Education in Idaho

Previous research provides insight into the availability and financial impact of early childhood care and education in Idaho. One of families' most significant barriers to accessing early childhood care and education is the high cost involved. While Idaho's child care prices are relatively affordable compared to other states, expenses still comprise a substantial portion of household income for many families. This section examines child care costs in Idaho through several lenses to illustrate the economic burden on parents.

Across the state, the average price-to-income ratio of child care decreased slightly from 2020 to 2021 (Community Health Needs Assessment, 2023). Analysis conducted by the Western Idaho Community Health Collaborative suggests federal assistance, rising wages, and a decline in child care use contributed to lower costs, but cautioned that cost remains a major barrier to low income households. This limitation can impact all Idahoans, including those not currently utilizing child care. Research conducted on the rising infant and toddler child care prices nationwide found that the State of Idaho loses an average of \$525 million a year in economic tax revenue, employee earnings, and worker productivity due to child care-related challenges (Bishop, 2023).

While Idaho may fare better than some states when it comes to child care affordability, the cost is still a formidable challenge that likely prices many families out of options that may be higher quality or a better fit for their circumstances.

Median Income Compared to Child Care Expenses

Child care expenses comprise a significant share of family income. Not surprisingly, child care costs make up a larger share of single-parent family incomes than two-parent households. An affordability analysis by Child Care Aware of America estimates the annual price of full-time center-based private care for a 4-year-old in Idaho as \$8,160, or 26% of a single-family median income in Idaho, and 9% of a two-parent family income in Idaho (2022 Child Care Affordability Analysis, 2022). Depending on the age of the child and the type of care (center versus in-home versus after-school care), annual child care costs for one child range from 22% to 31% of single-parent incomes and 8% to 11% of two-parent household incomes in Idaho, as shown in Table 10.

Table 10. Annual Price of Child Care for One Child by Median Income for Single-Parent and Two-Parent Families in Idaho, 2022

Type of Child Care Center	Annual Price for One Child	Single-Parent Family % of Median Income (\$31,026)	Two-Parent Family % of Median Income (\$90,027)
Infant, Center	\$9,708	31.3%	10.8%
Infant, FCC	\$7,308	23.6%	8.1%
Toddler, Center	\$8,880	28.6%	9.9%
Toddler, FCC	\$7,092	22.9%	7.9%
4-Year-Old, Center	\$8,160	26.3%	9.1%
4-Year-Old, FCC	\$6,744	21.7%	7.5%

Note: These price analyses do not factor in quality of care.
 Source: Child Care Aware of America, 2022 Child Care Affordability Analysis

Idaho has relatively average or more affordable child care compared to other states. According to Child Care Aware of America's 2022 Child Care Affordability Analysis, where 1 is the least affordable state, and 50 is the most affordable state, Idaho ranks between 24th and 44th depending on the age of the child and the type of care provided (e.g., family versus center). For example, the average annual price of home-based child care for a 4-year-old in Idaho ranked 24th; the price of full-time, center-based preschool or child care for a four-year-old in Idaho ranked 25th; and home-based care for toddlers in Idaho ranked 26th. As a proportion of median income, center-based care for single-parent households in Idaho was relatively more affordable compared to other states, ranking 44 out of 50.

Despite relatively affordable average child care prices compared to other states, research from the Massachusetts Institute of Technology (MIT) on median income compared to typical expenses, including child care, found that working adults with children in Idaho need to make a notably higher wage than the median wage to pay for their household's expenses.¹³ For example, one working adult with two children requires 2.5 times the median wage of \$16.88 to pay for living costs. In a two-adult household with one working family member, there is a need to make 1.9 to 2.6 times the median wage to cover living expenses for one to three children. See Appendix D for additional details on the MIT analysis.

¹³ Dataset from MIT 2022 Living Wage Calculator provided to Parsons Consulting, Inc. on December 4, 2023.

Idaho's Early Childhood Care and Education Providers

Idaho's early childhood care and education (ECCE) providers form the backbone of support for the state's youngest residents, offering a critical foundation for lifelong learning and development. This section delves into these providers' demographics, experiences, and perspectives, drawing on comprehensive survey data to paint a detailed picture of the individuals who play such a pivotal role in early childhood education. Figure 46 shows the number of respondents to the Provider Survey by county in Idaho. As we explore the characteristics of these providers, including their demographic profiles, educational backgrounds, and the settings in which they work, we gain insights into the challenges and triumphs of delivering early childhood education across Idaho. From the impact of COVID-19 on child care slots to the adaptability of Idaho families during the pandemic, the resilience and dedication of ECCE providers shine through. This introduction sets the stage for a deeper understanding of the ECCE landscape in Idaho, highlighting the critical importance of supporting providers and ensuring that every child in Idaho has access to high-quality early learning experiences.

Section Key Findings

COVID-19 relief dollars have a measurable impact. The millions in relief dollars issued to child care businesses saved 24,110 child care slots.

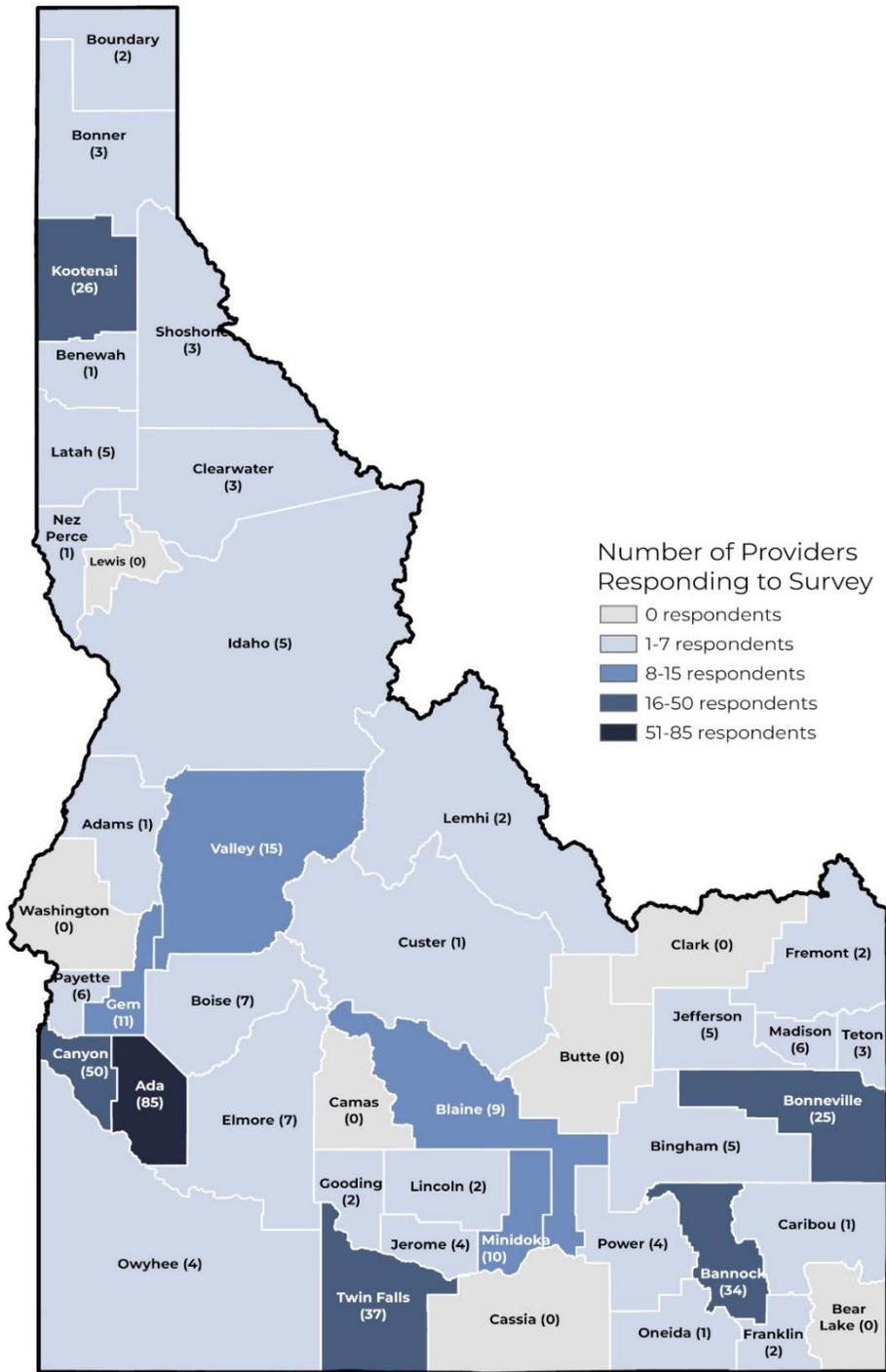
Idaho families' child care was consistently less disrupted by the pandemic than the national average. Between July 2021 and August 2022, between 14% and 36% of Idaho families with young children reported their child care arrangements were disrupted due to the coronavirus pandemic, compared to between 26% and 45% nationwide.

The vast majority of ECCE providers in Idaho are female, mirroring national trends in the field. Additionally, the survey reveals a diverse age range among providers, with a significant portion identifying as White. These demographic insights are crucial for understanding the composition of the workforce and informing targeted support and professional development opportunities.

Providers identify several challenges facing the children they serve, including social interaction and basic living needs. These insights underscore the need for comprehensive support systems that address the holistic needs of children and families.

The survey findings highlight a high level of confidence among providers in their abilities to create positive learning environments and manage children's behavior effectively. However, there are varying degrees of job satisfaction and future employment plans, indicating areas where further support could enhance retention and job satisfaction within the profession.

Figure 46. Number of Providers Responding to Provider Survey by County

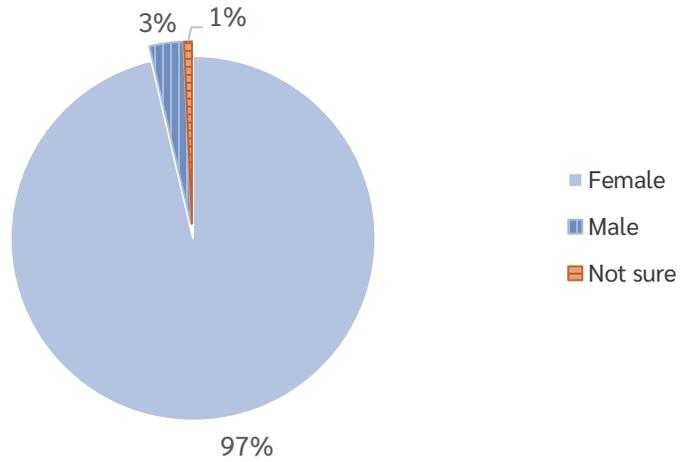


Source: Author analysis of responses to the Provider Survey

Demographic Profile

More than 97% of respondents to the Provider Survey were female (Figure 47).

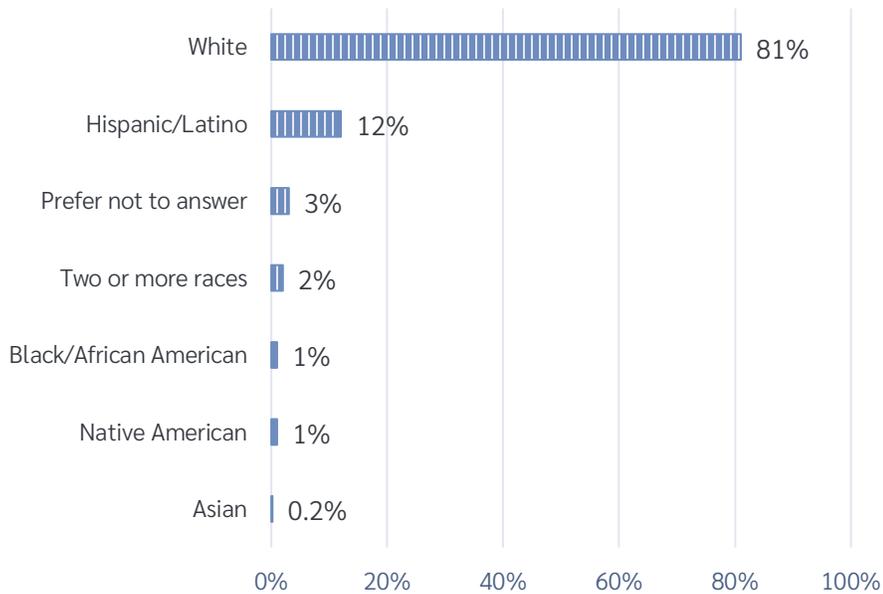
Figure 47. Provider Sex/Gender on Provider Survey (N = 426)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

More than 80% of respondents identified as White (Figure 48). Providers identifying as Hispanic were the next largest proportion at 12% of respondents.

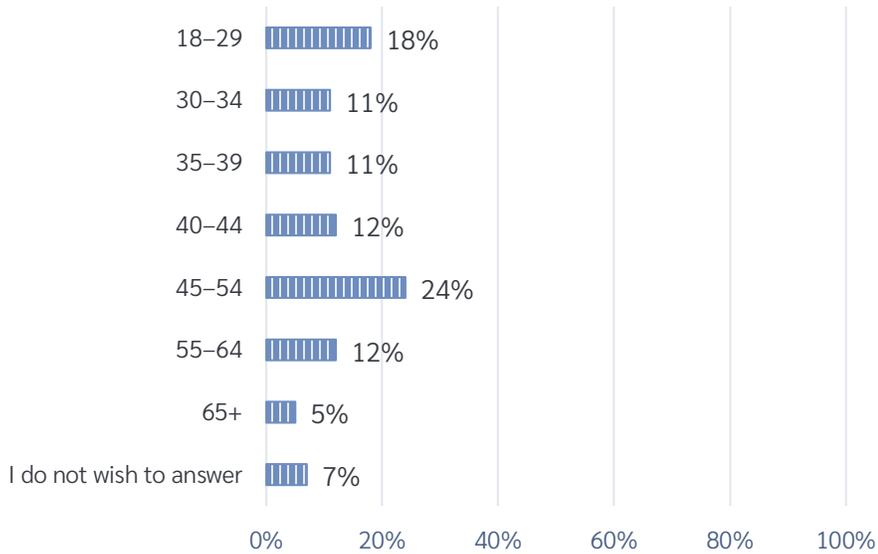
Figure 48. Provider Race/Ethnicity on Provider Survey (N = 429)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

The age of providers was more variable. Just under a quarter of respondents (24%) indicated their age was between 45–54 (Figure 49). Providers ages 18 through 29 were the next largest group of respondents (18%).

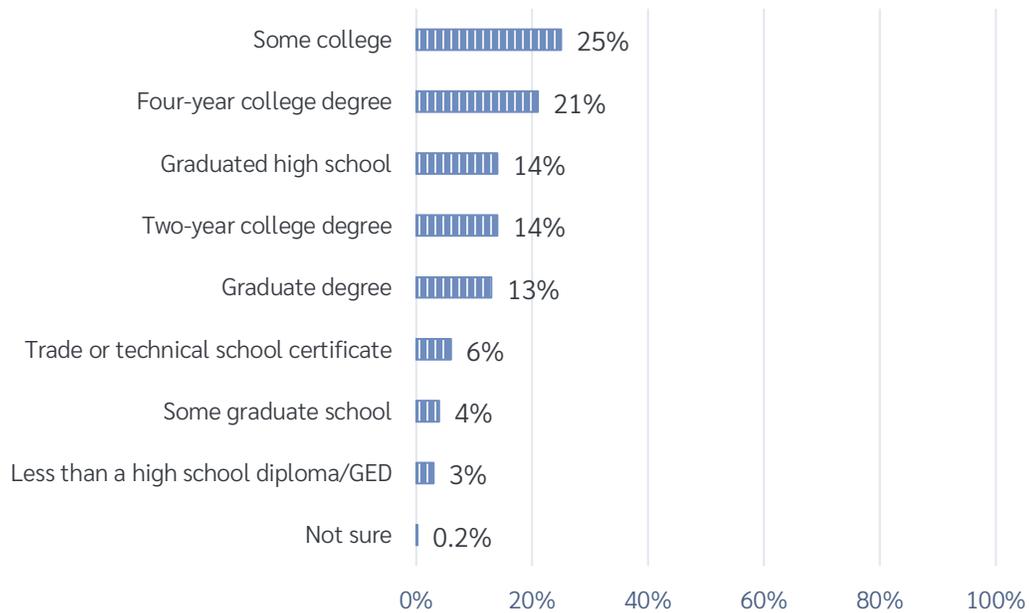
Figure 49. Provider Age on Provider Survey (N = 429)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

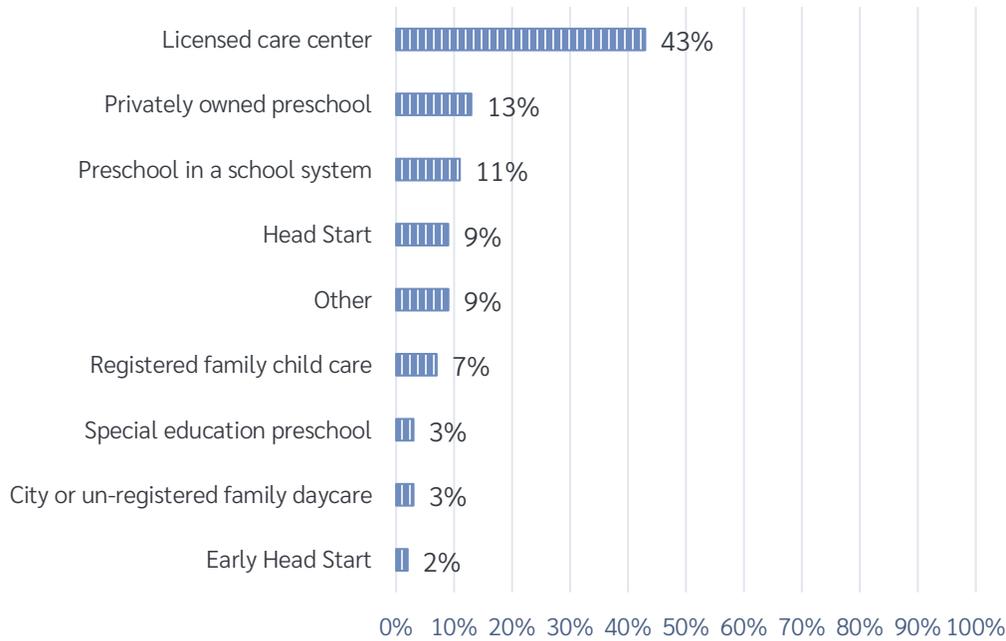
More than half had attended some college or had a four-year degree, and 12% indicated that their highest level of education was at the graduate degree level (Figure 50).

Figure 50. ‘What is the highest level of education you have attained?’ on Provider Survey (N = 428)



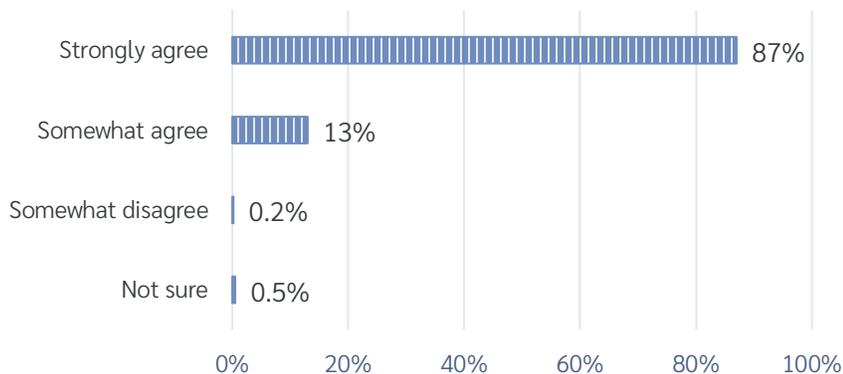
The percentage of respondents who indicated they worked in a licensed care center was 43%, while 13% indicated they worked in a private preschool, and 11% were employed in a public school system (Figure 51). Less than 10% of respondents indicated an Early Head Start or Head Start center as their place of employment.

Figure 51. ‘Which describes the early care and education setting where you currently work?’ on Provider Survey (N = 457)



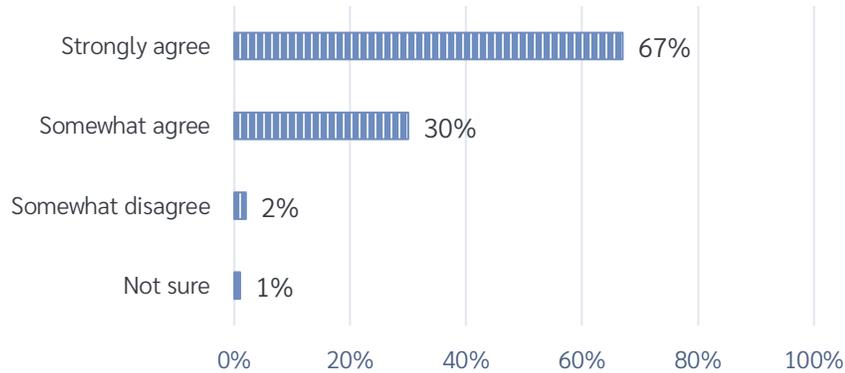
Finally, providers were asked several questions about their experiences as educators and their feelings toward their job and future employment plans. Nearly 99% of providers responding indicated confidence in their ability to create a positive learning environment for children (Figure 52).

Figure 52. ‘I am confident that I can create a positive learning environment for children’ on Provider Survey (N = 431)



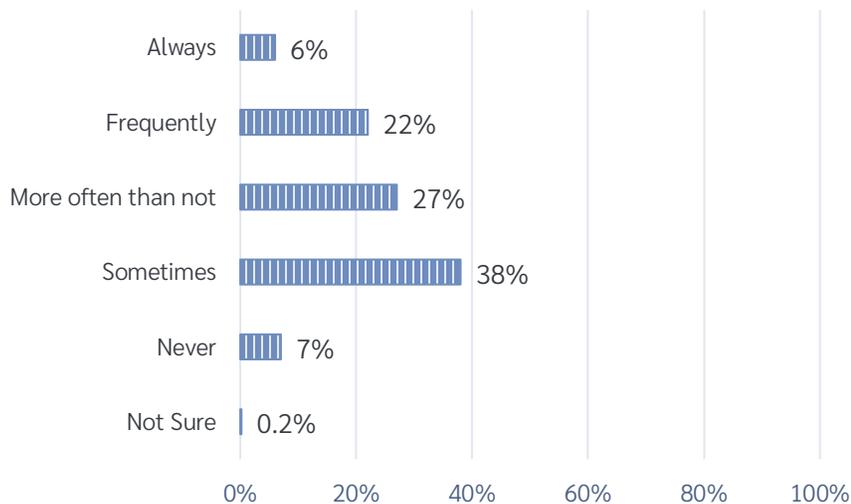
Similarly, 97% of providers indicated agreement or strong agreement in their ability to manage the behavior of children in a positive and effective way (Figure 53).

Figure 53. 'I am confident that I can manage children's behavior in a positive and effective way' on Provider Survey (N = 426)



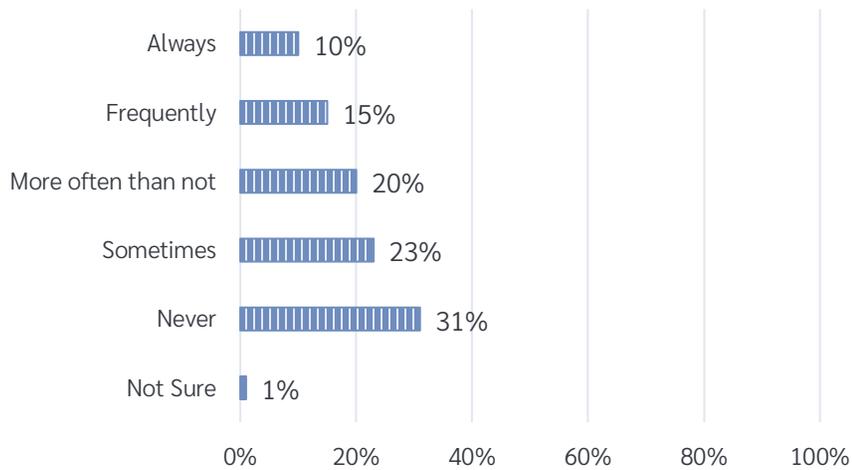
As seen in Figure 54, a small percentage indicated they always feel 'bursting with energy' when at work (6%). A slightly higher percentage indicated they never feel this way (7%). The majority indicated more variability between sometimes (38%) and frequently (22%).

Figure 54. 'At my work, I feel that I am bursting with energy' on Provider Survey (N = 430)



When providers were asked if they felt enthusiastic about their job, only a small percentage of respondents chose always (10%) or frequently (15%), as shown in Figure 55. Most respondents selected never (31).

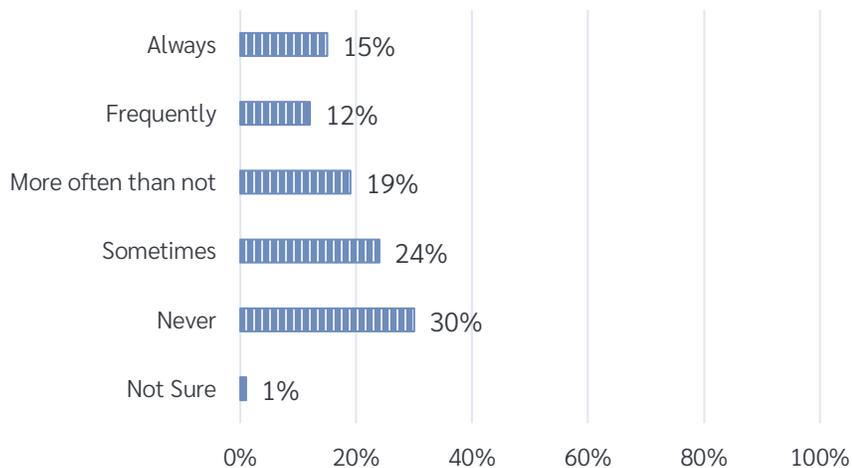
Figure 55. 'I am enthusiastic about my job' on Provider Survey (N = 428)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Providers were also asked to respond to the sentiment, “My job inspires me.” As shown in Figure 56, most respondents selected never (30%).

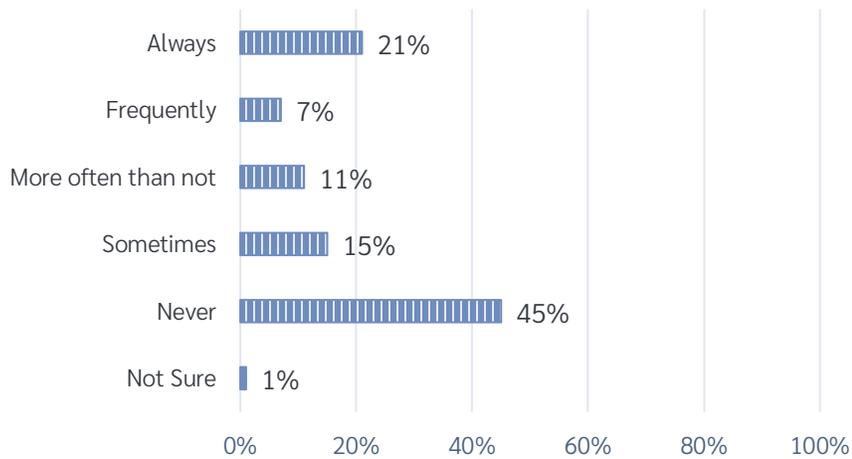
Figure 56. 'My job inspires me' on Provider Survey (N = 428)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

When providers were asked if they are proud of the work that they do, 45% of respondents selected never (Figure 57). The negative provider responses to sentiments about their job indicate a need to support and understand the needs of ECCE staff across Idaho.

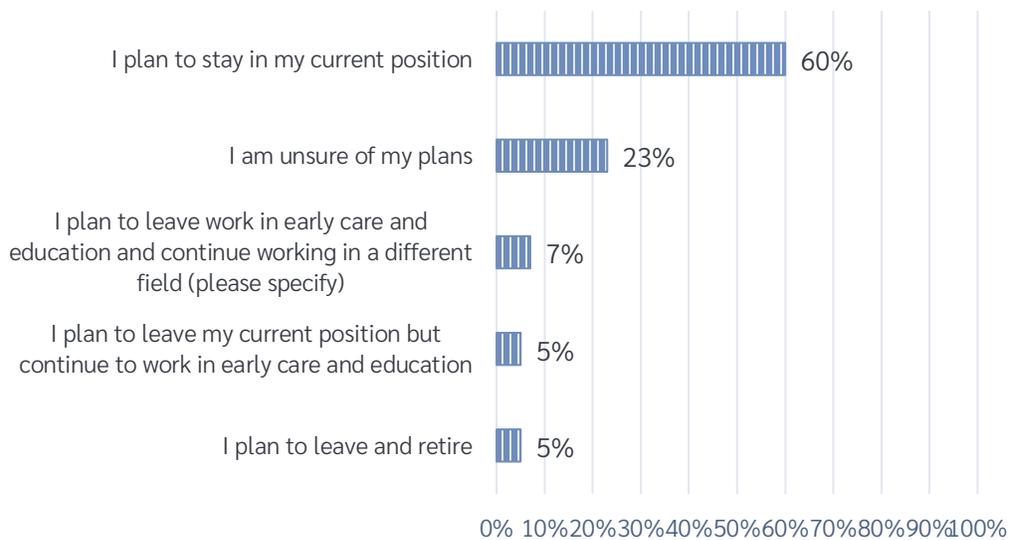
Figure 57. 'I am proud of the work that I do' on Provider Survey (N = 428)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

When asked about their plans for future employment in ECCE, almost 60% indicated they planned to stay in their current position (Figure 58). Almost a quarter were unsure of their plans for the upcoming year. The percentage who indicated they planned to retire in the next year was 5%, while 7% indicated their intention to leave the ECCE field in the coming year.

Figure 58. 'How likely is it that you will leave your current position teaching/supporting children ages 0–5 in the next year?' on Provider Survey (N = 429)

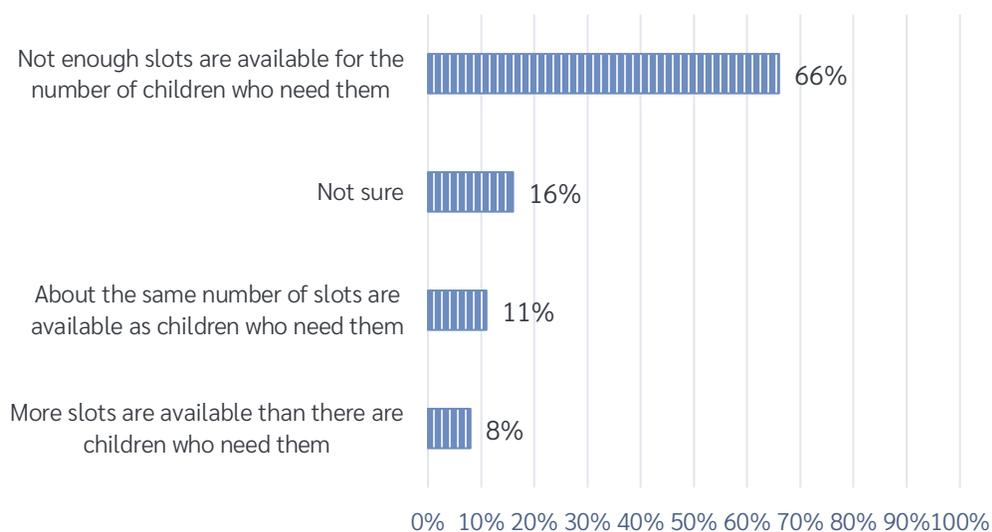


Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

ECCE Facility Perceptions and Characteristics

All Provider Survey respondents were asked questions regarding their feelings about the status of early child care and education (ECCE) in Idaho. Concerning availability, 66% indicated there are not enough slots available for the children who need them (Figure 59).

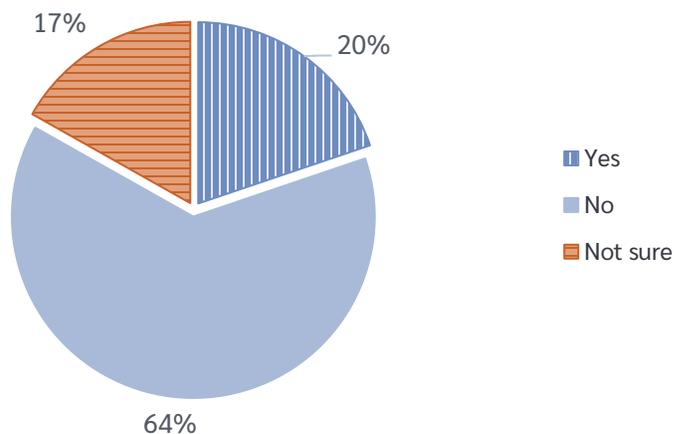
Figure 59. 'Which of the following best fits with your view of early care and education availability in your community?' on Provider Survey (N = 438)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

A majority of respondents (64%) indicated ECCE is not affordable in their area (Figure 60).

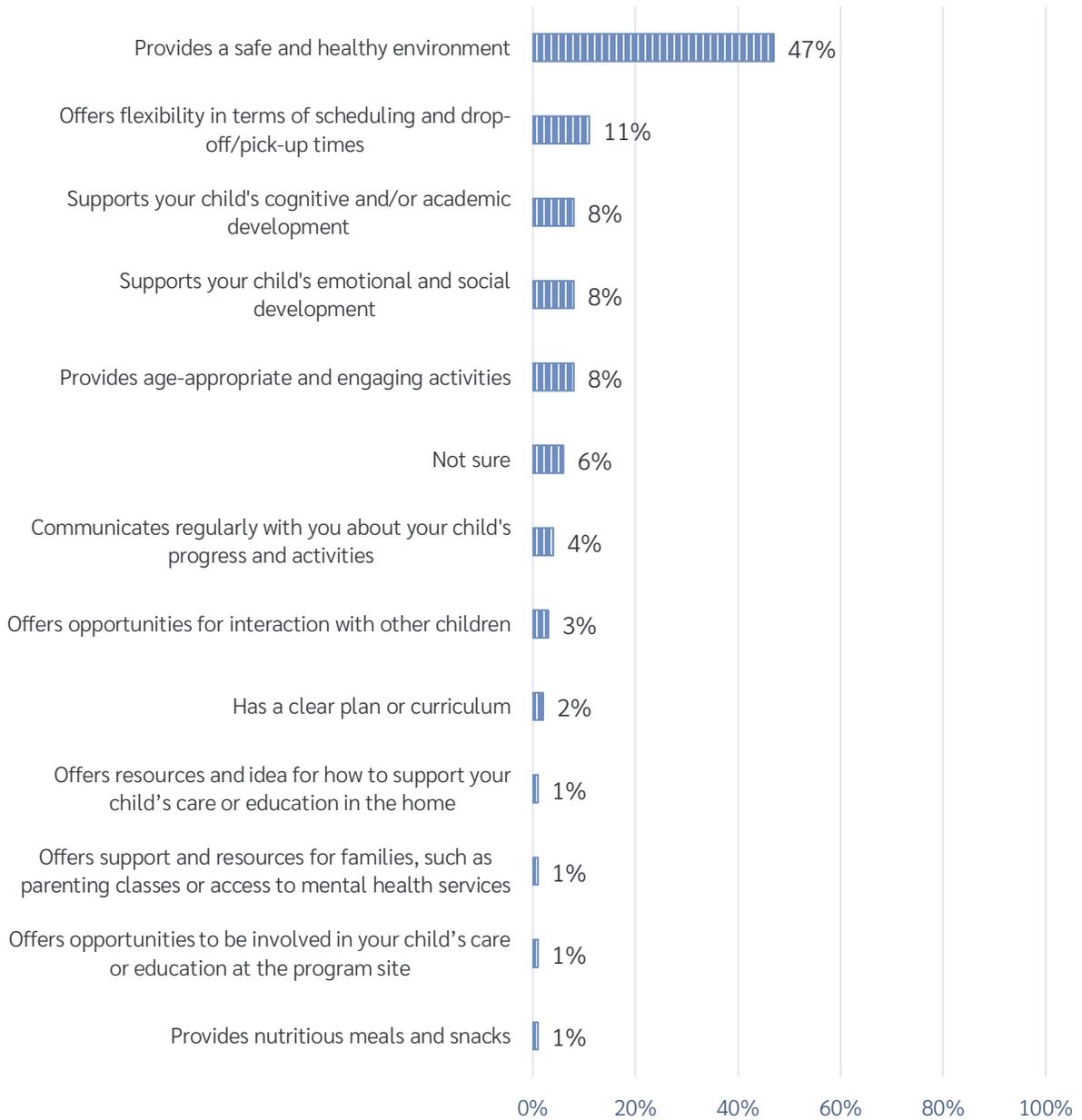
Figure 60. 'Do you think that early care and education is affordable for the families in your area?' on Provider Survey (N = 439)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

When asked what, as a provider, they believed families were looking for in child care services, the most frequent response was to provide a safe and healthy environment (47%), as seen in Figure 61. Another 11% indicated flexibility in terms of scheduling and drop-off was a top concern. Offering resources and support to the child or family outside of the facility and opportunities to be involved in the child’s care were all rated as the least important to families by providers.

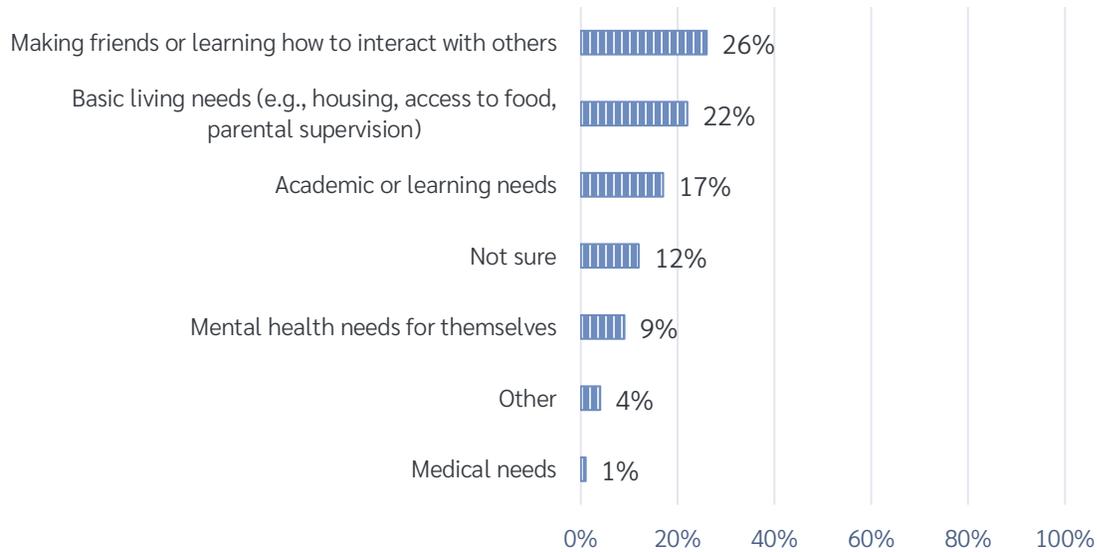
Figure 61. ‘What do you think families are looking for most in their early childhood care and/or education provider?’ on Provider Survey (N = 439)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Providers were asked to consider the biggest challenges facing the children they serve. As shown in Figure 62, the most frequent response was related to making friends or learning how to interact with others (26%). Running a close second, providers indicated the basic living needs of the child to be a significant challenge (22%). The educational or academic needs of the child were cited as a challenge by only 17% of the providers.

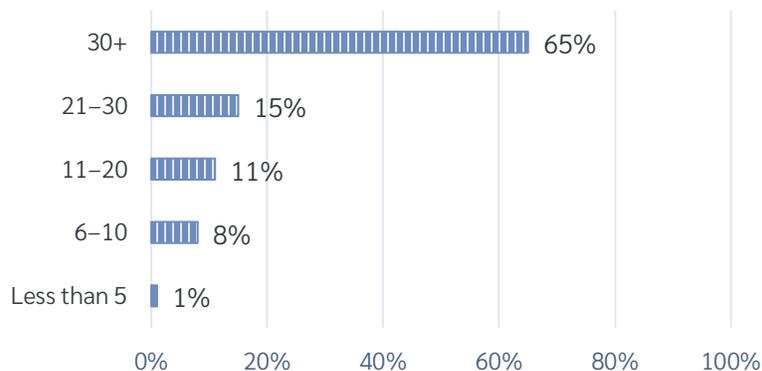
Figure 62. ‘What do you think is the biggest challenge facing the children you serve?’ on Provider Survey (N = 424)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

The Provider Survey included questions related to the facility’s operation and the characteristics of children served. These questions were asked only of respondents who indicated their role within the facility was an administrator or director ($n = 130$). Of these administrators and directors, 65% indicated their facility served more than 30 children (Figure 63).

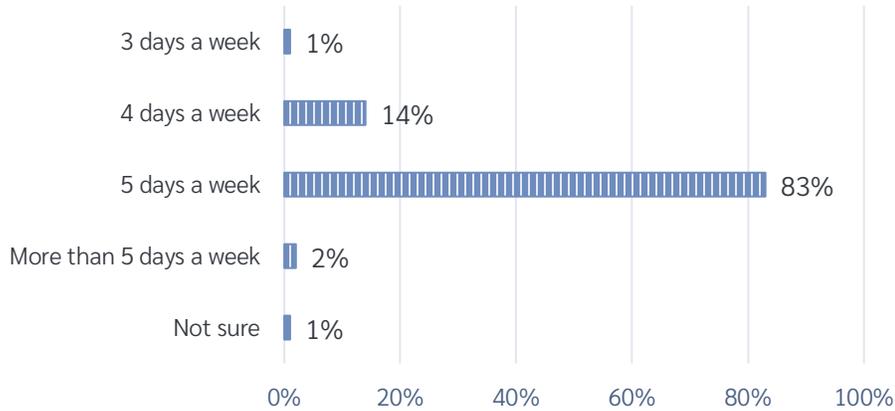
Figure 63. ‘Approximately how many children are enrolled in your program?’ on Provider Survey (N = 130)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

As seen in Figure 64, a majority of respondents reported that their facilities were open five days a week (83%).

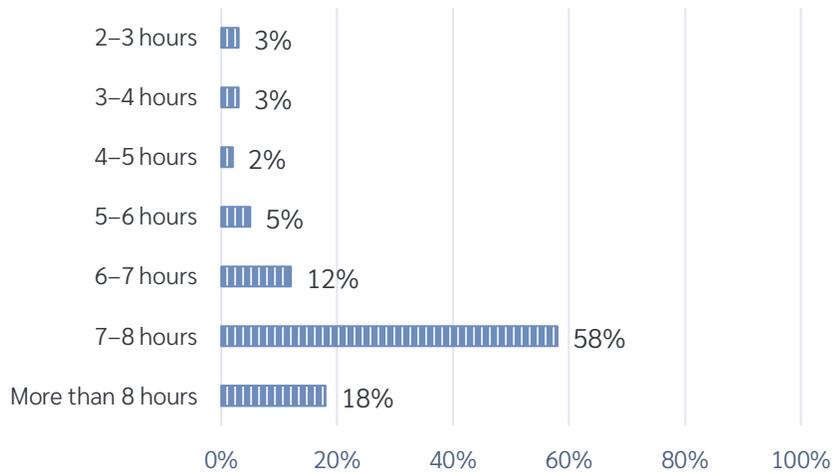
Figure 64. 'Days open a week' on Provider Survey (N = 130)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

The percentage of respondents who indicated their operating hours were between 7–8 hours a day was 58%, while another 18% indicated their operating hours exceeded 8 hours per day (Figure 65).

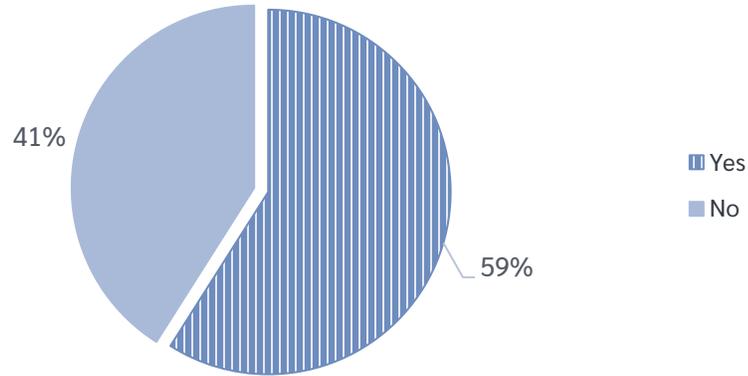
Figure 65. 'Hours open daily' on Provider Survey (N = 130)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Nearly 60% of respondents indicated their facility had a waiting list (Figure 66).

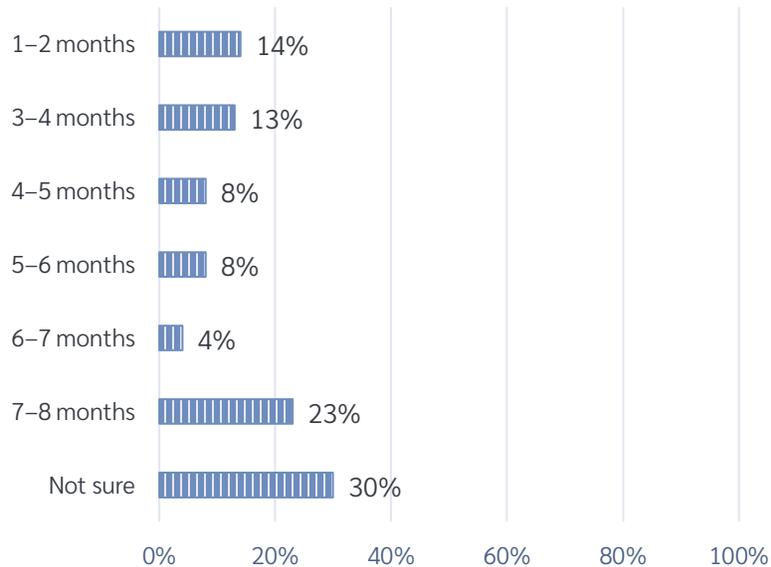
Figure 66. ‘Does your program currently have a wait-list?’ on Provider Survey (N = 130)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Regarding the waiting list timeframe, 30% indicated they were unsure how long a typical family waits (Figure 67). Nearly a quarter of respondents (23%) said the wait time was 7–8 months, while 14% indicated it was fewer than two months.

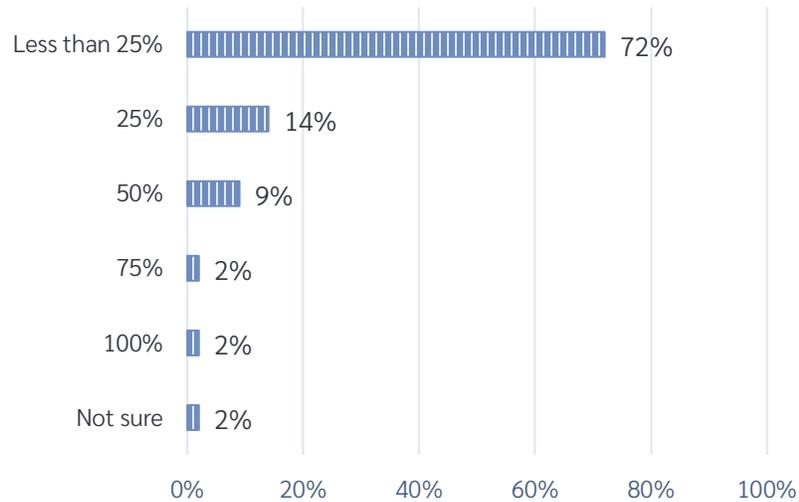
Figure 67. ‘On average, how long is a child on the wait list before a spot opens?’ on Provider Survey (N = 119)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Administrators and directors were asked about the percentage of staff that spoke a language other than English. More than 70% indicated that less than 25% of their staff spoke a language other than English (Figure 68).

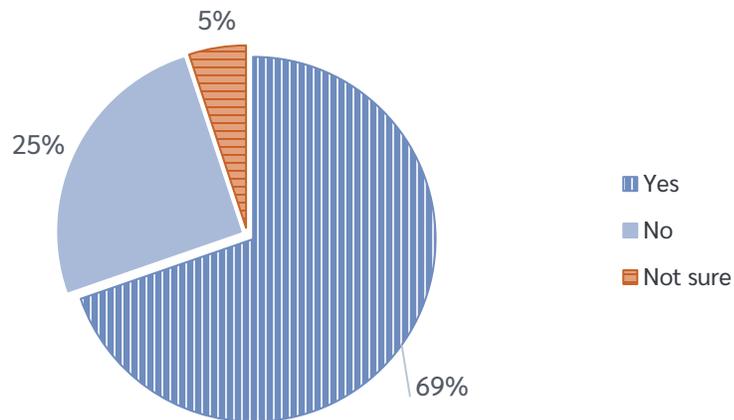
Figure 68. ‘What is the approximate percentage of staff (including yourself) that speak more than one language?’ on Provider Survey (N = 130)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

More than 69% of the facilities represented by this sample serve children respondents identified as English language learners (Figure 69).

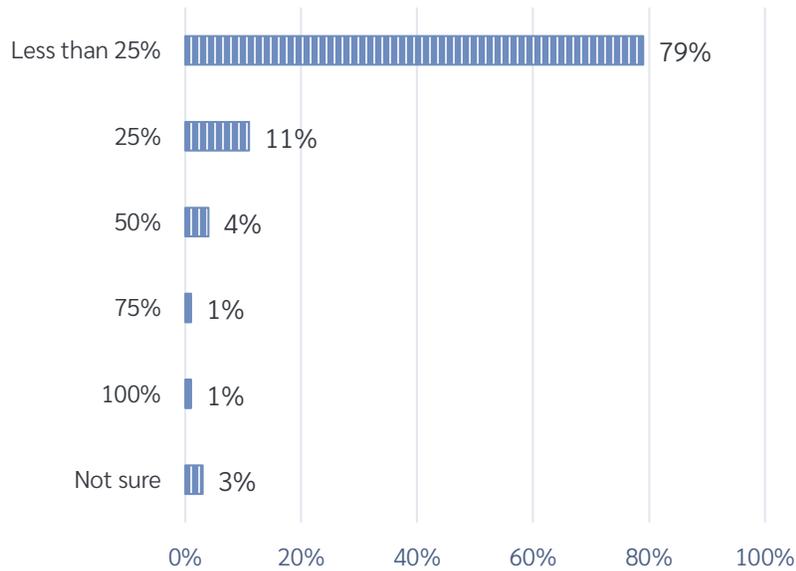
Figure 69. ‘Does your early childhood care and/or education program serve bilingual children or children learning English as a second language?’ on Provider Survey (N = 130)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Approximately 79% of respondents indicated that less than 25% of the students they serve are bilingual children learning English as a second language (Figure 70).

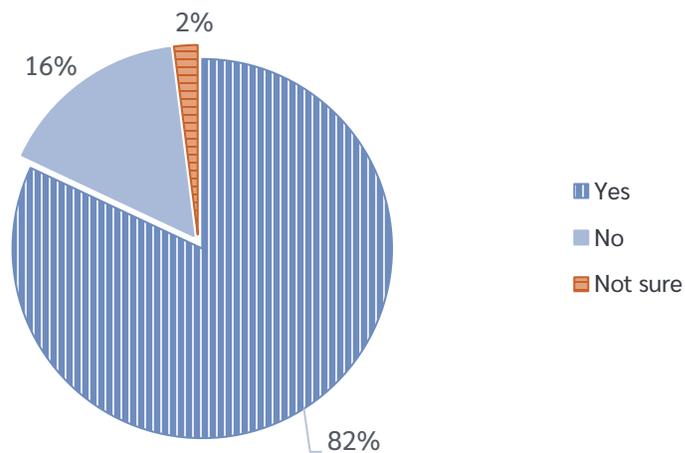
Figure 70. ‘What is the approximate percentage of bilingual children learning English as a second language in your early childhood care and/or education program?’ on Provider Survey (N = 90)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

More than 80% of respondents indicated their facility served children with developmental delays or requiring special education (Figure 71).

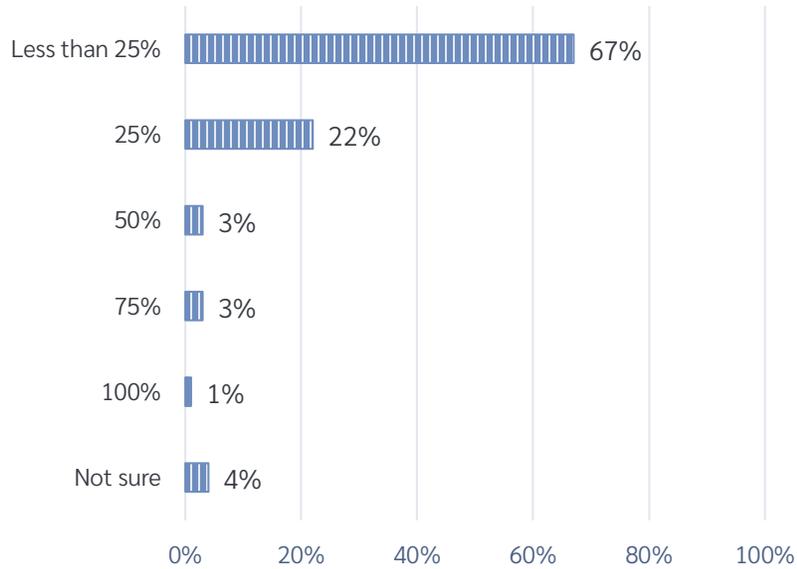
Figure 71. ‘Does your early childhood care and/or education program serve children identified as having developmental delays and/or receiving special education?’ on Provider Survey (N = 130)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

A majority of respondents (67%) indicated that less than 25% of the students they serve are children identified as having developmental delays or receiving special education (Figure 72).

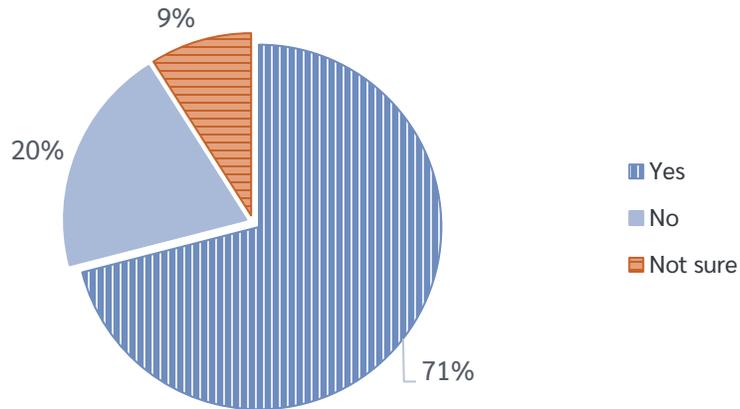
Figure 72. ‘What is the approximate percentage of children within your early childhood care and/or education program identified as having developmental delays and/or receiving special education services?’ on Provider Survey (N = 107)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

As seen in Figure 73, 71% of respondents indicated that their facility serves children who qualify for subsidies based on socioeconomic status.

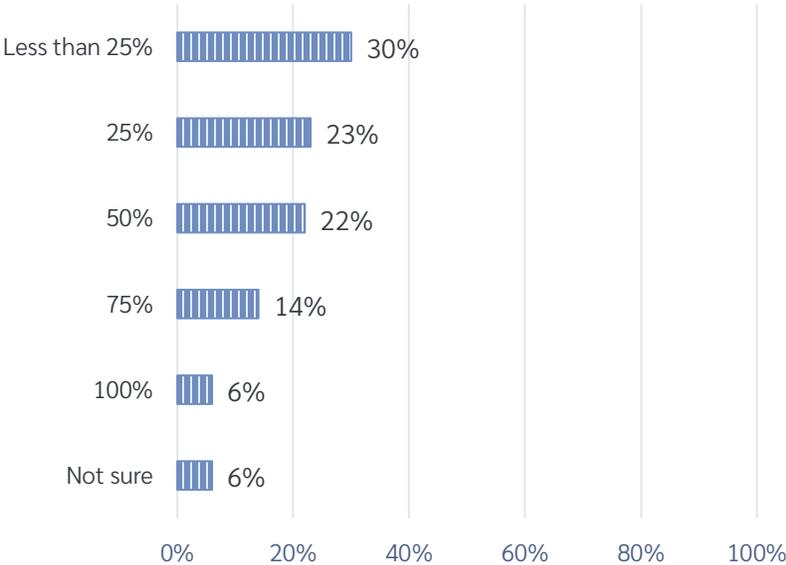
Figure 73. ‘Does your early childhood care and/or education program serve children that qualify for subsidies based on socioeconomic status?’ on Provider Survey (N = 130)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Most respondents indicated that less than 25% (30%), 25% (23%), or 50% (22%) of the students they serve qualify for subsidies based on socioeconomic status (Figure 74).

Figure 74. ‘What is the approximate percentage of children within your early childhood care and/or education program that qualify for subsidies based on socioeconomic status?’ on Provider Survey (N = 91)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Pandemic Impact and Response

The child care industry was heavily affected by the pandemic, losing enrollment as families sheltered in place while also fulfilling the important role of essential service providers, supporting frontline workers in the health care industry and other critical service sectors. Idaho supported child care providers through a number of grant opportunities. While it is not possible to attribute change in child care slots to this funding alone, it can be viewed as an important contributor to stability in the industry. This funding data, as well as data from the Census Household Pulse Survey, the needs assessment survey of parents and providers, and analysis of early childhood care and education (ECCE) enrollment and slot data, are used to assess the impact of the pandemic on families and the child care sector.

Impact of Idaho's Response in Using Federal COVID-19 Relief Funds

Idaho provided targeted COVID-19 relief funds to support child care providers and encourage continued operation during the pandemic.

The **Idaho Child Care Emergency Grant** was available for licensed or Idaho Child Care Program (ICCP) certified providers who administered full-time care and were in operation during the months of their funding request. Eligible expenses covered under the grant included staffing costs or hazard pay, consumable supplies, cleaning expenses, and general business operations. The grant continued as the **Idaho Child Care Grant** with a second, third, and fourth phase, which ended in June 2023. The total amount disbursed through the grant was **\$126,925,023** (Public Records Request response KL-00016, 2023).

The **Wage Enhancement Grant** was a temporary wage supplement for Idaho child care staff to augment provider income and help providers recruit and retain employees. Eligible expenses through the grant included staffing costs, wages, typical payroll expenses, staff taxes and withholdings, and any costs associated with grant participation, including state and federal taxes. Applications were accepted at multiple times throughout the year during the grant period. The Wage Enhancement Grant totaled **\$27,276,510** throughout funding.

The **Idaho Community Program Grant** supported organizations that provided activities addressing student learning, learning loss, and behavioral health support. The grant was open for applications multiple times throughout each year over the two-year course of the grant, with all funds from the final phase disbursed by September 2023. Throughout funding, **\$75,526,274** was disbursed to 82 applicants.

Table 11 provides further detail on the timing, funding source, total expenditures, scale, and award for each child care grant.

Table 11. COVID-19 Relief Grants to Idaho Child Care Providers

Grant	Pay Period	Payment Type	Funding Source	Total Paid	Participating Providers	Maximum Grant Amount
Idaho Child Care Emergency Grant: Phase 1	May–June 2020	One-time payment	CARES Act Funds	\$4,591,796	459	Family/Relative: \$2,000 Groups: \$4,000 Small Centers: \$8,000 Large Centers: \$15,000
Idaho Child Care Grant: Phase 2	August 2020–January 2021	Monthly payments	CARES Act Funds	\$14,146,500	759	Family/Relative: \$500 Groups: \$1,000 Small Centers: \$2,500 Large Centers: \$5,000
Idaho Child Care Grant: Phase 3	February 2021–December 2021	Monthly payments	CRRSAA Funds	\$24,356,500	758	Family/Relative: \$500 Groups: \$1,000 Small Centers: \$2,500 Large Centers: \$5,000
Idaho Child Care Grant: Phase 4	January 2022–June 2023	Monthly payments	ARPA Funds	\$83,830,227	778	Family/Relative: \$1,000 Groups: \$2,500 Small Centers: \$5,000 Large Centers: \$10,000 Extra Large Centers: \$20,000
Wage Enhancement Grants	May 2021–June 2023	Monthly payments	CRRSA and ARPA Funds	\$27,276,510	530 Providers 3,500+ staff per month	\$300 each eligible staff \$30 to provider for each staff
Community Program Grants	June 2021–June 2023	Quarterly payments	CRRSA and ARPA Funds	\$75,526,274	82	Local Programs: \$20,000 Regional Programs: \$250,000 Statewide Programs: \$500,000

Source: Idaho Department of Health and Welfare, Public Records Request response KL-00016, 2023

ECCE providers were also eligible to participate in additional COVID-19 funding grant opportunities. The **Rebound Idaho Small Business Grant**, which received funding from the federal COVID-19 CARES Act, provided loans of \$10,000 or less to small businesses impacted by the pandemic. The program had a budget of \$300 million, with about \$1.4 million going to businesses self-described as “educational services.” About \$202,700 (14.5%) of the education-specific funds went to businesses offering early childhood education and care, who most frequently cited using the funds for rent and utilities.

Additionally, the **Return-to-Work Grant** was created to encourage individual employees to return to the workplace, particularly those making a greater income from unemployment payments than at work, by offering one-time payments to those returning. The State of Idaho made Return-to-Work grant payments totaling \$373,096 to 270 employees of confirmed ECCE providers, representing about 1.3% of all funds given out, with the most common payment amount being the maximum of \$1,500. This accounted for more than 58% of funds granted under the “educational services” industry.

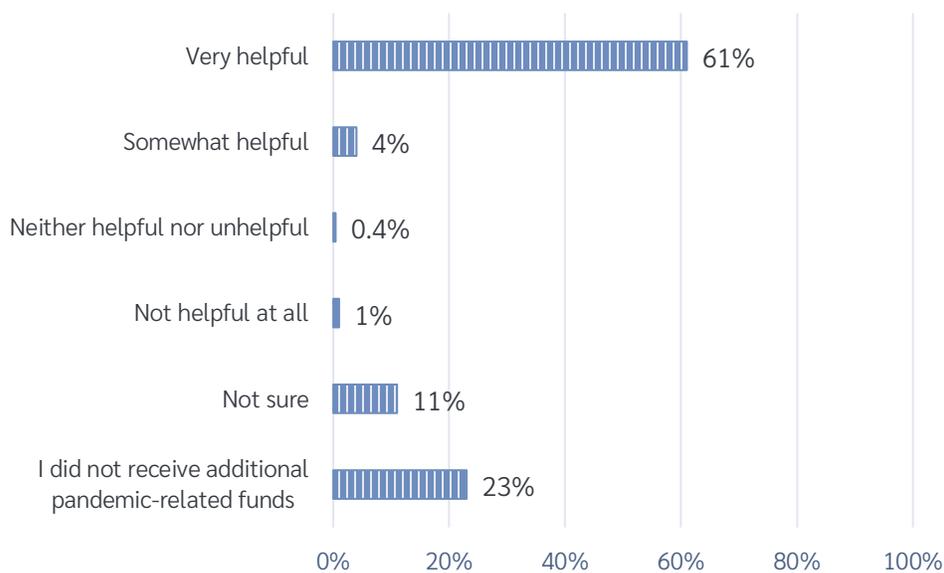
The Idaho First Steps Alliance released *Unstable Footing: Child Care Funding Crisis in Idaho* in December 2022, reporting on COVID-19 relief grants' impact. This report stated that 78% of child care providers in 39 of the state's 44 counties had utilized COVID-19 funding grants (*Unstable Footing*, 2022). Child care centers that received stabilization payments most commonly used them to pay for personnel costs and staffing, whereas child care family homes that received funding most commonly used them to pay for rent and mortgage (*Idaho ARP Child Care Stabilization Fact Sheet*, 2022). According to the report:

- Every provider received grant funding in nine Idaho counties,
- 564 programs and 24,110 child care spots were saved in Idaho by the grants (Kashen & Malik, 2022), and
- up to 47,700 children in Idaho were impacted by the grants.

Provider Input on Pandemic Emergency Funding

The Provider Survey also included questions related to the additional funding provided for ECCE programs during the pandemic. All providers were asked these questions regardless of employment level. As seen in Figure 75, a majority of respondents (61%) indicated the additional funding they received from grants during the pandemic was very helpful. While 11% indicated they were unsure if they had received additional funding, 23% indicated they did not receive any additional funding.

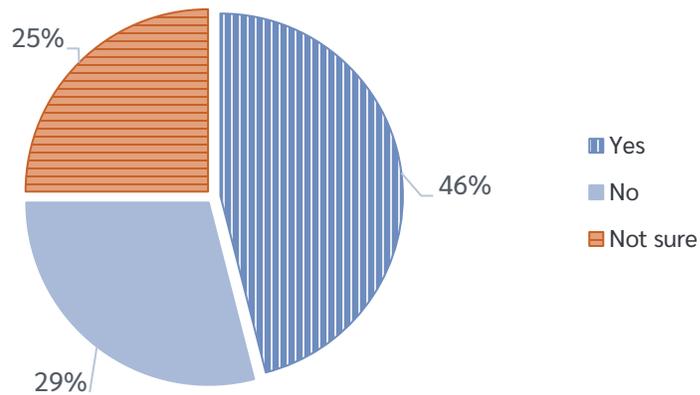
Figure 75. 'If you received grant funding for your early childhood care and/or education program or as an ECCE educator during the pandemic, how helpful was it?' on Provider Survey (N = 241)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Of those who indicated that they had received funding (N = 182), 29% indicated that the level of funding was not enough (Figure 76). Just under half, however, indicated that the funding they received was sufficient (46%).

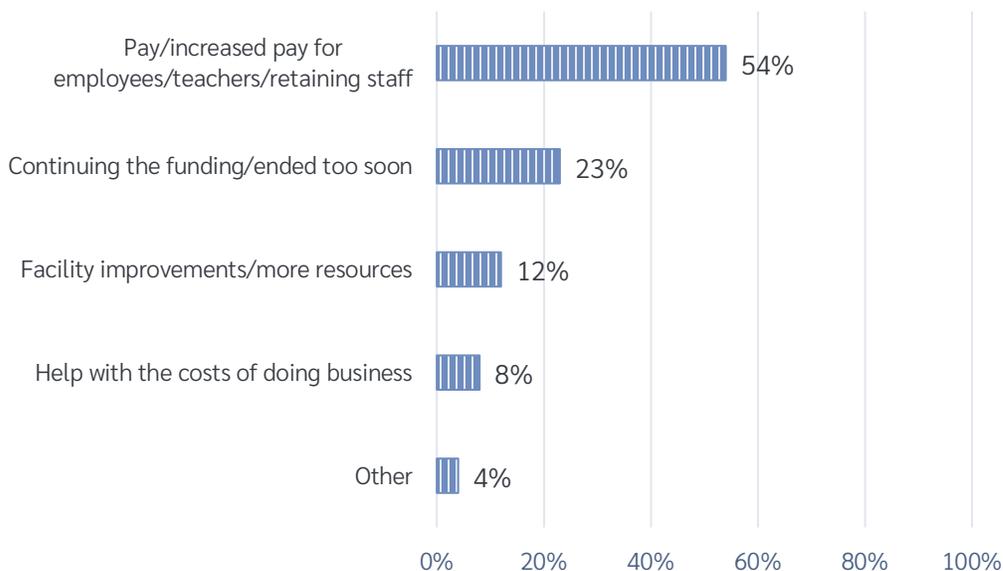
Figure 76. ‘Did you feel that the funding was enough?’ on Provider Survey (N = 183)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

When asked how the additional funding should be allocated in their facility, 54% indicated the funding should be applied to increasing teacher retention and salary increases (Figure 77). Nearly a quarter indicated the funding was ending too soon and should be extended (23%).

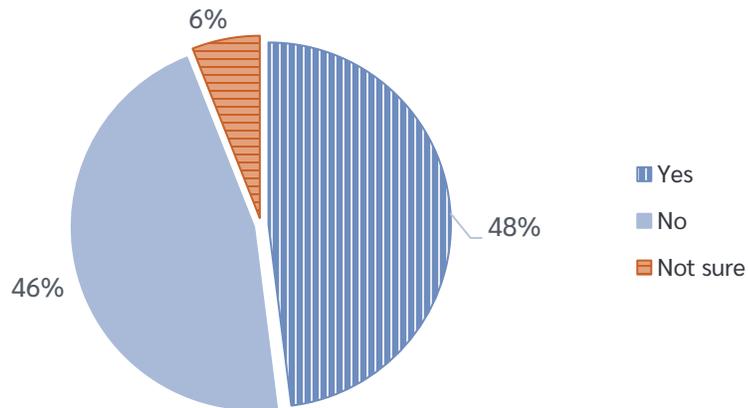
Figure 77. ‘What would have been the best use of additional funds at your facility or program specifically?’ on Provider Survey (N = 26)



Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

The respondents were split on whether there is sufficient staff in their facility to meet the needs of their program, with 48% asserting there is enough staff and 46% indicating there is not (Figure 78).

Figure 78. ‘Do you feel there are enough staff to cover the basic needs of your program?’ on Provider Survey (N = 128)



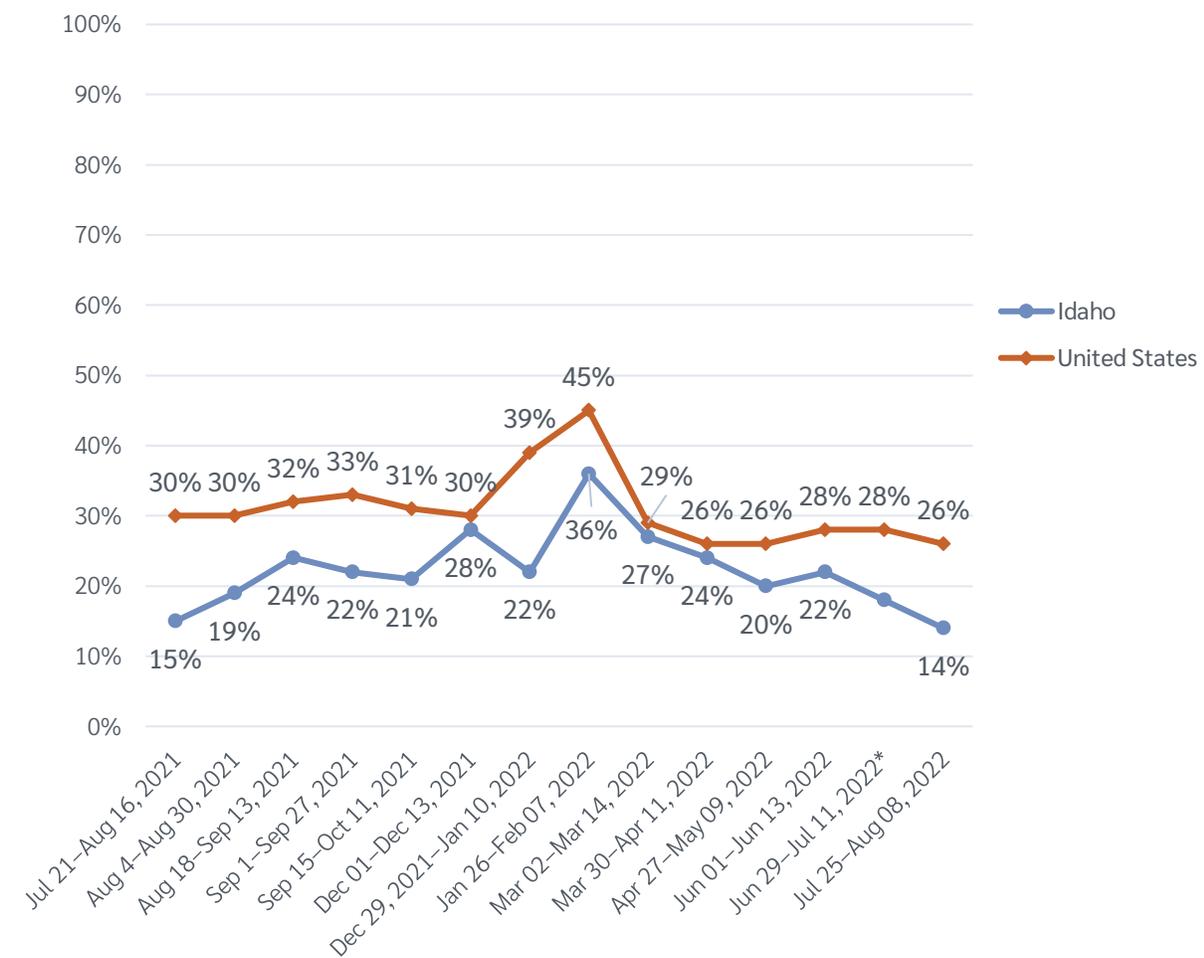
Source: Author analysis of survey data collected from Parents, Families, and Providers in Idaho

Pre- to Post-COVID-19 Change for ECCE in Idaho

Changes in ECCE availability in Idaho during the COVID-19 pandemic can be partially tracked using data from the United States Census Bureau Household Pulse Survey. The semi-weekly questionnaire gathered household responses on the pandemic’s impact on child care arrangements over the past 28 days. Age ranges and wording of questions changed over time, requiring data from this source to be split into three separate sets. However, patterns across available data show that child care disruption due to the pandemic was less prominent in Idaho than in the rest of the United States. One contributor to this finding may be that slightly more Idaho families rely on informal care (such as a babysitter or family member) than formal care (such as a child care center or other out-of-home care).

For approximately a year, from July 2021 to August 2022, the Household Pulse Survey asked families with children if one or more of their children were unable to attend child care due to the coronavirus pandemic. As shown in Figure 79, which displays the percentage of households with children under age 5 who were unable to attend child care arrangements due to the coronavirus pandemic, Idaho families’ child care was consistently less disrupted by the pandemic than the United States average (Households with children under age 12, n.d.). In Idaho, the percentage of families with young children with disrupted child care arrangements ranged from a low of 14% of families in July–August 2022 to a high of 36% of families in January–February 2022.

Figure 79. Households with Children Under Age 5 Unable to Attend Child Care due to the Coronavirus Pandemic, July 2021 – August 2022



Note: No data for Idaho for the June 29, 2022–July 11, 2022 survey.

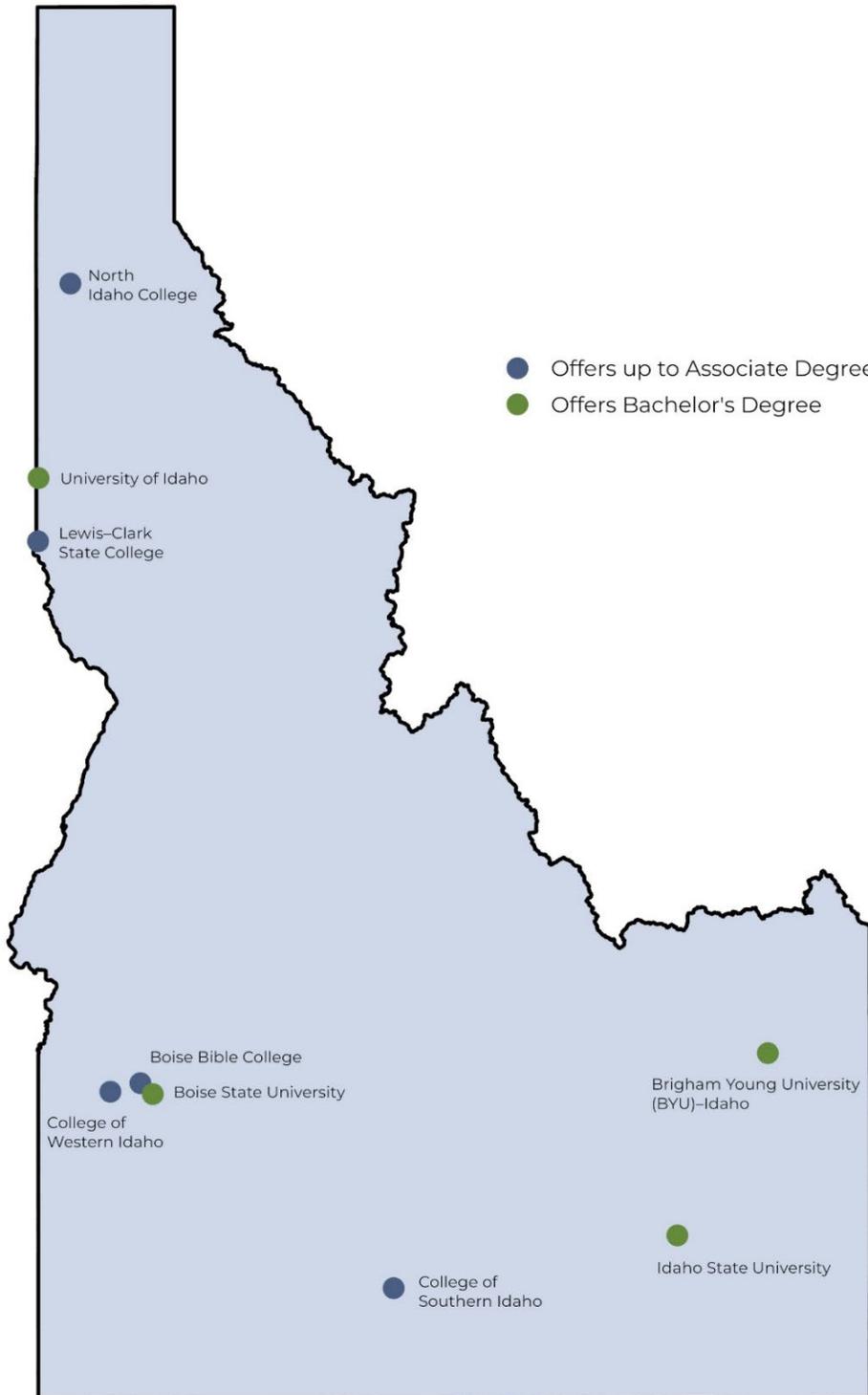
Source: Annie E. Casey Foundation Kids Count Data Center, *Households with children under age 12 whose childcare arrangements were disrupted because of the coronavirus pandemic by age of children in United States, 2021–22*

Higher Education Data

The preparation and training of early childhood care and education (ECCE) providers is crucial for ensuring a qualified workforce to support young children's development. In Idaho, there are multiple pathways into the ECCE field, primarily through certificate and degree programs offered at institutions of higher education across the state. An examination of nine Idaho colleges and universities revealed 35 different early childhood-related programs, including certificates and associate's, bachelor's, and master's degrees. The most common are certificate programs, followed by bachelor's degree options. These programs aim to equip students with the necessary coursework, hands-on practicums/internships, and sometimes pathways to earn credit for prior learning and experience.

While the array of offerings points to accessible routes into the ECCE workforce, survey data from faculty highlight some key challenges and barriers. Practicum sites being unavailable, difficulties attracting diverse students and faculty, lack of financial support for students, and insufficient preparation for the realities of low wages and poor working conditions in the field were cited as issues impacting enrollment, retention, and graduation rates. At the same time, most programs incorporate internship requirements, offer online courses, provide academic advising, and collaborate with other institutions—positive attributes that could strengthen the professional pipeline. Overall, the landscape suggests Idaho has a foundation for developing its ECCE workforce, but opportunities likely exist to address programmatic challenges and better align the training pathways with workforce needs. Nine Institutions of Higher Education (IHE) were identified as having early childhood certificate or degree programs through an online scan of 15 IHEs in Idaho (Figure 80).

Figure 80. Institutes of Higher Education with Early Childhood Programs



Source: Author analysis of IHE Faculty Survey

Across the nine IHEs, 35 early childhood-related certificate, minor, associate degree, bachelor's degree, or master's degree programs were identified (Table 12). The most common type of program is a certificate with 11 options offered across the IHEs, followed by a bachelor's degree with nine options offered.

Table 12. Early childhood certificate and degree programs in Idaho

IHE	Certificate /Degree	Name of Certificate/Degree	Credits Required
Boise Bible College	Associate	Early Childhood Education 2-Year Associate Degree	64
Boise State University	Certificate	Inquiry-Based Early Childhood Education	24
Boise State University	Certificate	Intervention Specialist Certificate	24
Boise State University	Bachelor's	Blended Early Childhood/Early Childhood Special Education	129
Boise State University	Bachelor's	Inclusive Early Childhood Education	120
Boise State University	Bachelor's	Special Education	120
Boise State University	Master's	Early and Special Education Master of Education	Unknown
Boise State University	Master's	Special Education (P–8, P–12, Or K–12) Master in Teaching	Unknown
Brigham Young University–Idaho	Minor	Early Intervention	21
Brigham Young University–Idaho	Associate	Professional Preschool Education	60
Brigham Young University–Idaho	Bachelor's	Child Development—Early Childhood Development Emphasis	120
Brigham Young University–Idaho	Bachelor's	Early Childhood Education/Early Childhood Special Education	120
College of Southern Idaho	CDA	Child Development Associate Credential	Unknown
College of Southern Idaho	Certificate	Early Childhood Education, Basic Technical Certificate	9
College of Southern Idaho	Certificate	Early Childhood Education, Intermediate Technical Certificate	30
College of Southern Idaho	Associate	Early Childhood Education, Associate of Applied Science	60
College of Western Idaho	CDA	Child Development Associate Credential	10
College of Western Idaho	Certificate	Early Childhood Education—Basic Technical Certificate	16
College of Western Idaho	Associate	Early Childhood Education—Associates of Applied Science Degree	60
Idaho State University	Certificate	Early Childhood Care and Education Basic Technical Certificate	12
Idaho State University	Certificate	Early Childhood Care and Education Intermediate Technical Certificate	35

IHE	Certificate /Degree	Name of Certificate/Degree	Credits Required
Idaho State University	Associate	AAS—Early Childhood Care and Education	62–63
Idaho State University	Bachelor's	Bachelor of Arts In Early Childhood Education	138
Lewis-Clark State College	Minor	The Early Childhood Special Education Minor	20
Lewis-Clark State College	Certificate	The Early Childhood Development Basic Technical Certificate	10
Lewis-Clark State College	Certificate	The Early Childhood Development Intermediate Technical Certificate	30
Lewis-Clark State College	Certificate	The Early Childhood Development Advanced Technical Certificate	52
Lewis-Clark State College	Associate	The Paraprofessional Education Program	38–42
Lewis-Clark State College	Associate	The Early Childhood Development Associate of Applied Science Degree	60
North Idaho College	CDA	The Child Development Associate (CDA) Credential Program	10
North Idaho College	Certificate	Academic Certificate in Child Development	21
North Idaho College	Associate	The Child Development Program Child Development	60–62

Source: Author analysis of Idaho's IHE programs

IHE Faculty Survey

To gain a deeper understanding of the early childhood certificate and degree programs available to students, a survey was conducted among faculty members from Institutions of Higher Education (IHEs). This IHE Faculty Survey aimed to illuminate the academic infrastructure and support mechanisms in place to facilitate student success in early childhood education fields. The detailed survey instrument can be found in Appendix C of the report.

Responses were received from twelve faculty members across eight distinct IHEs, highlighting a broad spectrum of insights into the academic offerings and support services provided. Notably, the College of Western Idaho and BYU-Idaho each contributed three faculty responses, indicating a strong representation from these institutions.

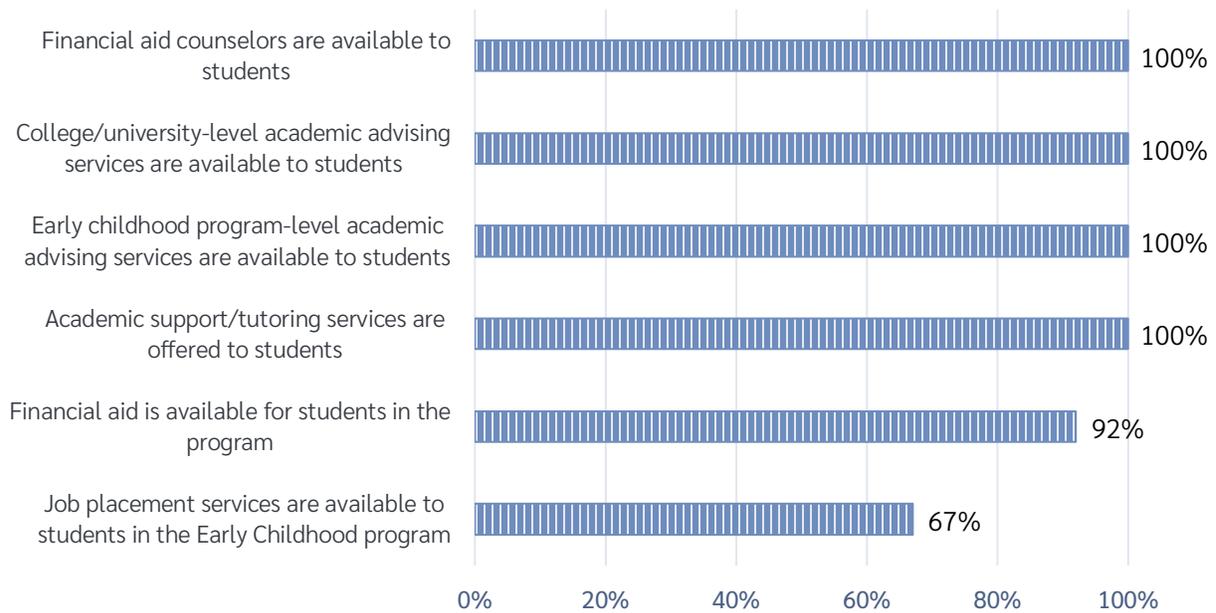
The faculty respondents held various positions within their respective institutions, encompassing roles from Assistant Professors to Program Coordinators. This diversity in positions underscores the depth of perspectives gathered in the survey, offering a comprehensive overview of early childhood education programs from different academic echelons.

Key findings from the survey reveal a unanimous commitment among the represented institutions to comprehensively support early childhood education students. Every responding faculty member reported that their institutions offer online early childhood degree courses and require practicum/internships, ensuring practical experience is a cornerstone of their academic programs.

Additionally, a robust support system is in place, with financial aid counselors, college/university-level academic advising, early childhood program-level academic advising, and academic support and tutoring services available to students.

Furthermore, most faculty respondents (92%) reported that their institutions offer financial aid for students in the program (Figure 79). A majority of faculty respondents (67%) reported offering job placement services to students in their early childhood programs.

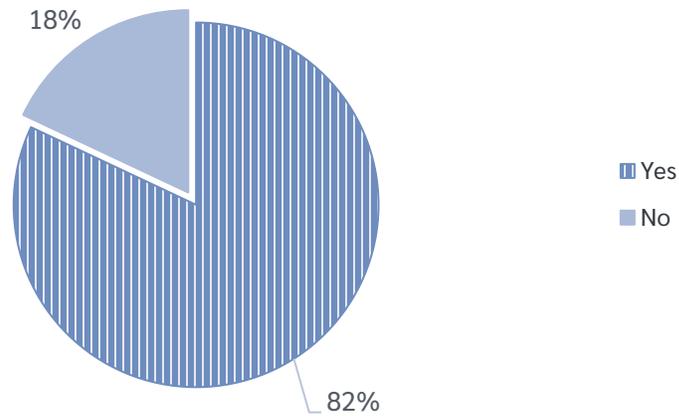
Figure 81. IHE Early Childhood Program Offerings, IHE Faculty Survey (N = 12)



Source: Author analysis of IHE Faculty Survey

The existence of articulation agreements with other institutions for early childhood programs is prevalent (82%), facilitating seamless transitions for students seeking to advance their education across educational institutions (Figure 82).

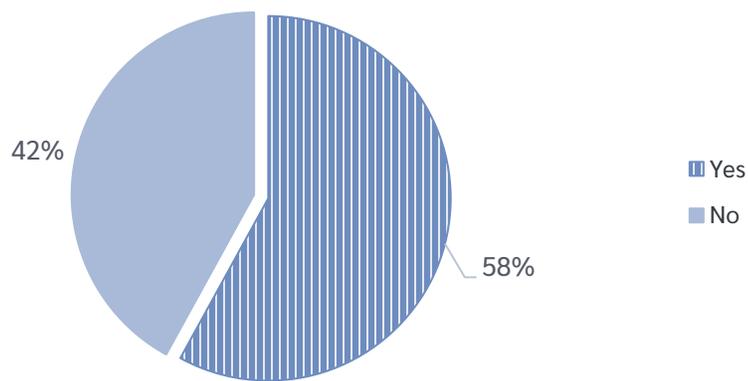
Figure 82. ‘Does your institution’s early childhood program have articulation agreements in place with any other institutions?’ on IHE Faculty Survey (N = 12)



Source: Author analysis of IHE Faculty Survey

More than half of faculty respondents (58%) reported using a formal process to award credit for prior learning (Figure 83). Institutions vary in their processes for awarding credit for prior learning. One institution reported offering Portfolio Assessments with written documentation of prior work experience that can be used to award credit for some courses, including Health, Safety and Nutrition, Introduction to Early Childhood Education, Infant Toddler Development, Curriculum Development, and/or Curriculum, Practicum. Other institutions report awarding credit for certain courses for students who have a Child Development Associate (CDA) Credential.

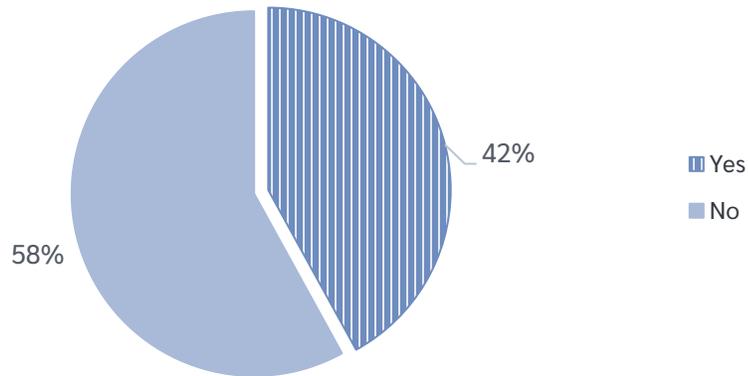
Figure 83. ‘Does your program use a formal process to award credits for prior learning (e.g., CDA, workshops, or non-college training)?’ on IHE Faculty Survey (N = 12)



Source: Author analysis of IHE Faculty Survey

Having satellite or branch campuses where students can receive their degree or credential was reported by 42% of faculty (Figure 84).

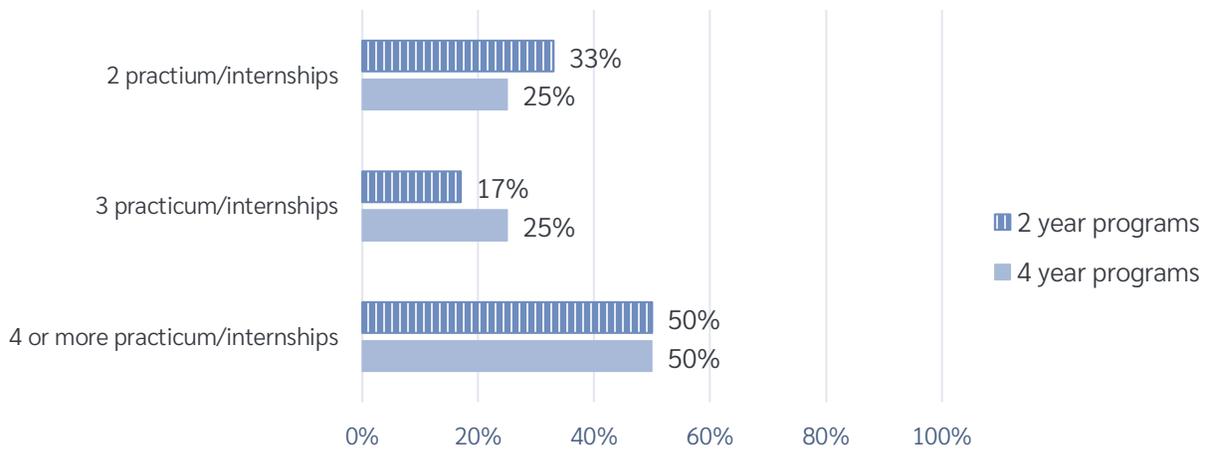
Figure 84. 'Are there any satellite or branch campuses affiliated with your institution where students can take courses in person or online, but still receive their degree or credential from your institution?' on IHE Faculty Survey (N = 12)



Source: Author analysis of IHE Faculty Survey

Of both 2- and 4-year program faculty, half reported that students in their early childhood programs are required to complete four or more practicum/internship experiences (Figure 85).

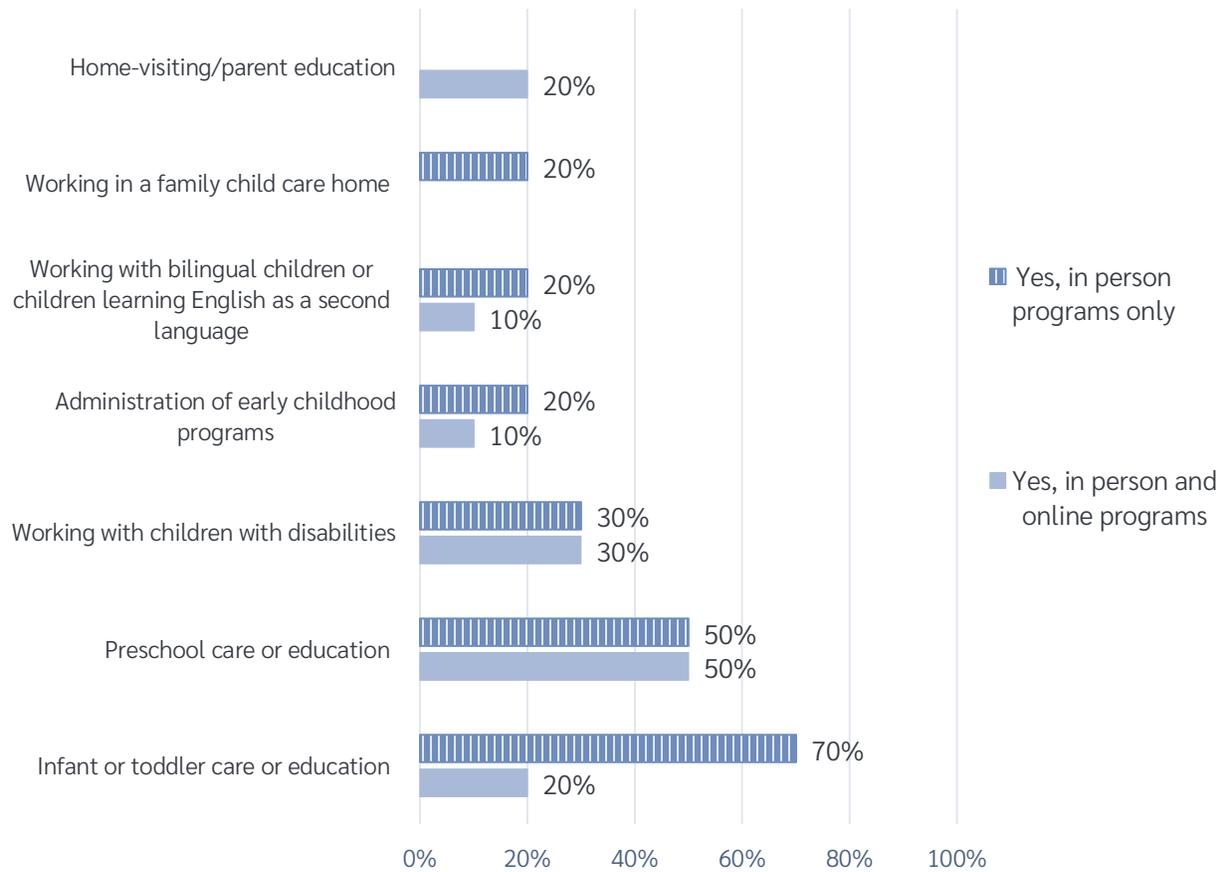
Figure 85. 'How many practicum/internships are students required to complete?' on IHE Faculty Survey (N = 12)



Source: Author analysis of IHE Faculty Survey

Regarding the availability of in-person practicum, 70% of faculty reported practicum related to infant and toddler care or education being available in person (Figure 86). The other practicum/internship areas were reported as preschool care or education (50%), working with children with disabilities (30%), working with bilingual children or children learning English as a second language (20%), and working in a family child care home (20%). Many of these practicums were also reported as being available online, with practicums related to home-visiting/parent education being exclusively offered as an online program.

Figure 86. Practicum/internship areas, IHE Faculty Survey (N = 12)

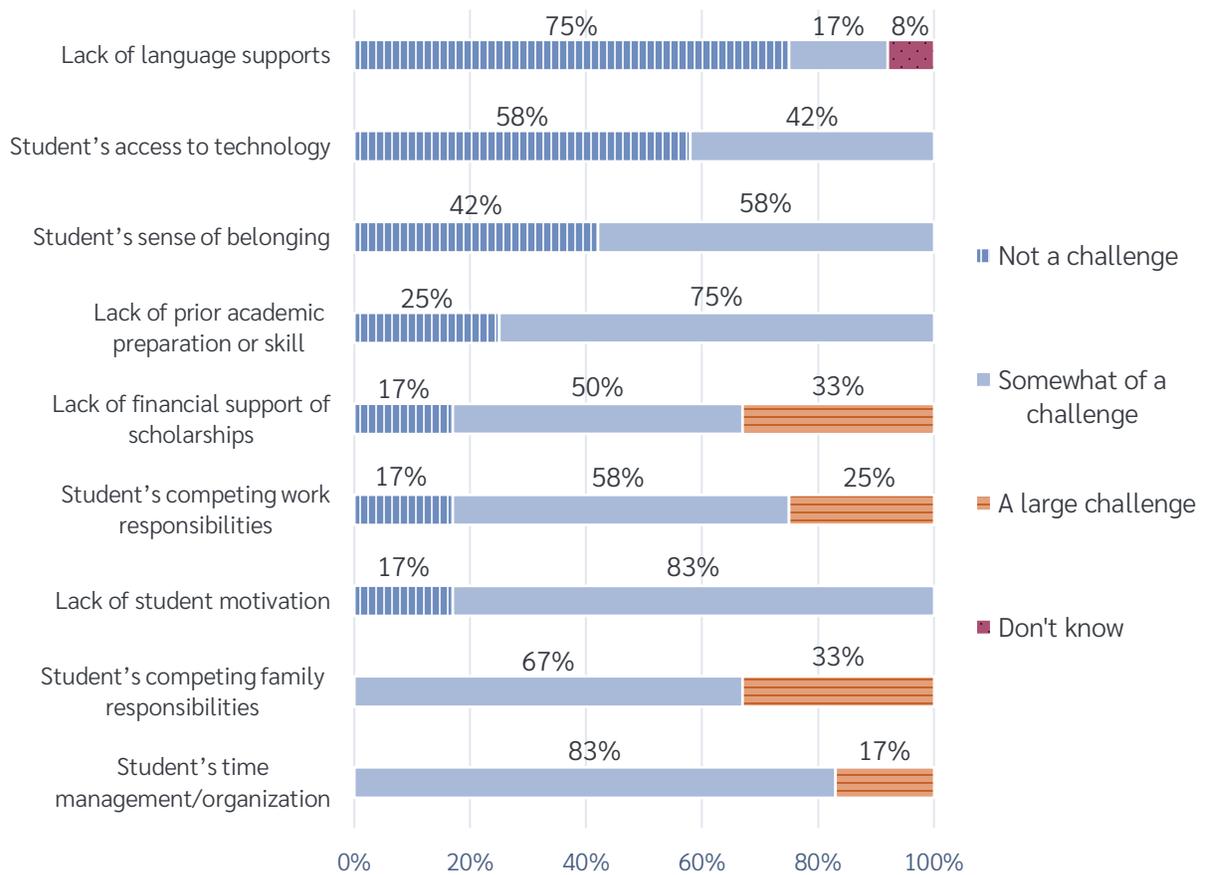


Source: Author analysis of IHE Faculty Survey

Challenges

When it came to challenges that could impact enrollment, retention, and/or graduation from their early childhood programs, 33% of faculty reported students' competing family responsibilities and lack of financial support (Figure 87). Additionally, 75% or more of faculty reported students' time management/organization, lack of student motivation, and lack of prior academic preparation or skill as somewhat of a challenge.

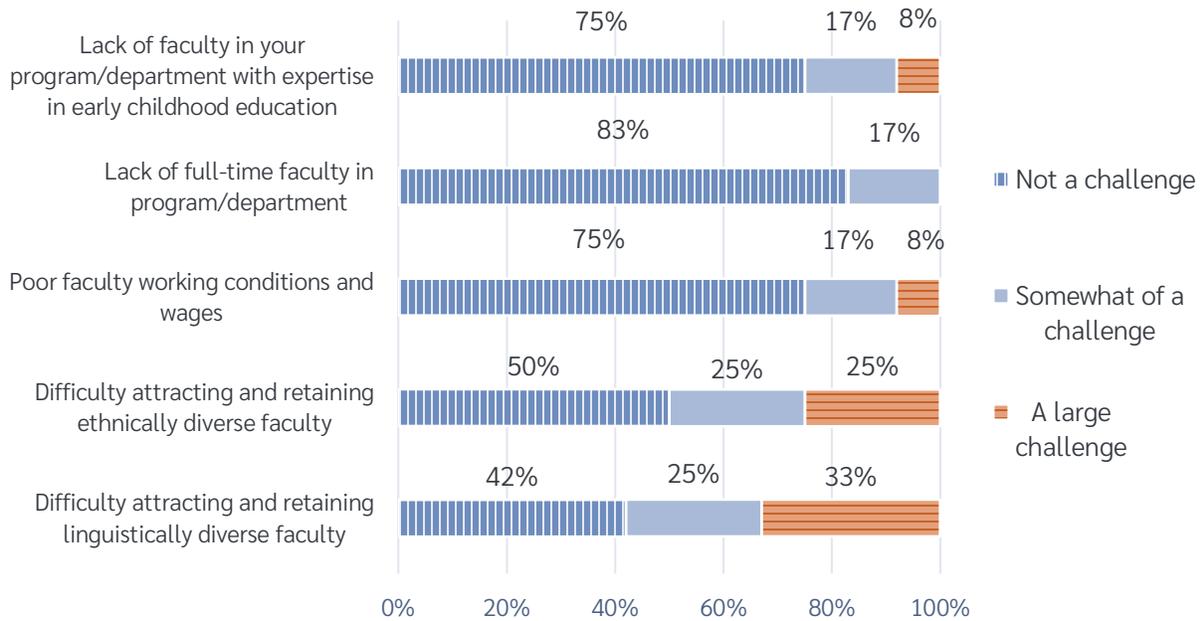
Figure 87. 'Thinking about the students in your early childhood program, please indicate the extent to which the following are a challenge to enrollment, retention, and/or graduation' on IHE Faculty Survey (N = 12)



Source: Author analysis of IHE Faculty Survey

When asked to consider challenges to enrollment, retention, and/or graduation as it relates to faculty, 83% of faculty respondents reported a lack of full-time faculty in the program/department (Figure 88). Other challenges reported were a lack of faculty with expertise in early childhood education (75%), poor faculty working conditions and wages (75%), difficulty attracting and retaining ethnically diverse faculty (50%), and difficulty attracting and retaining linguistically diverse faculty (42%).

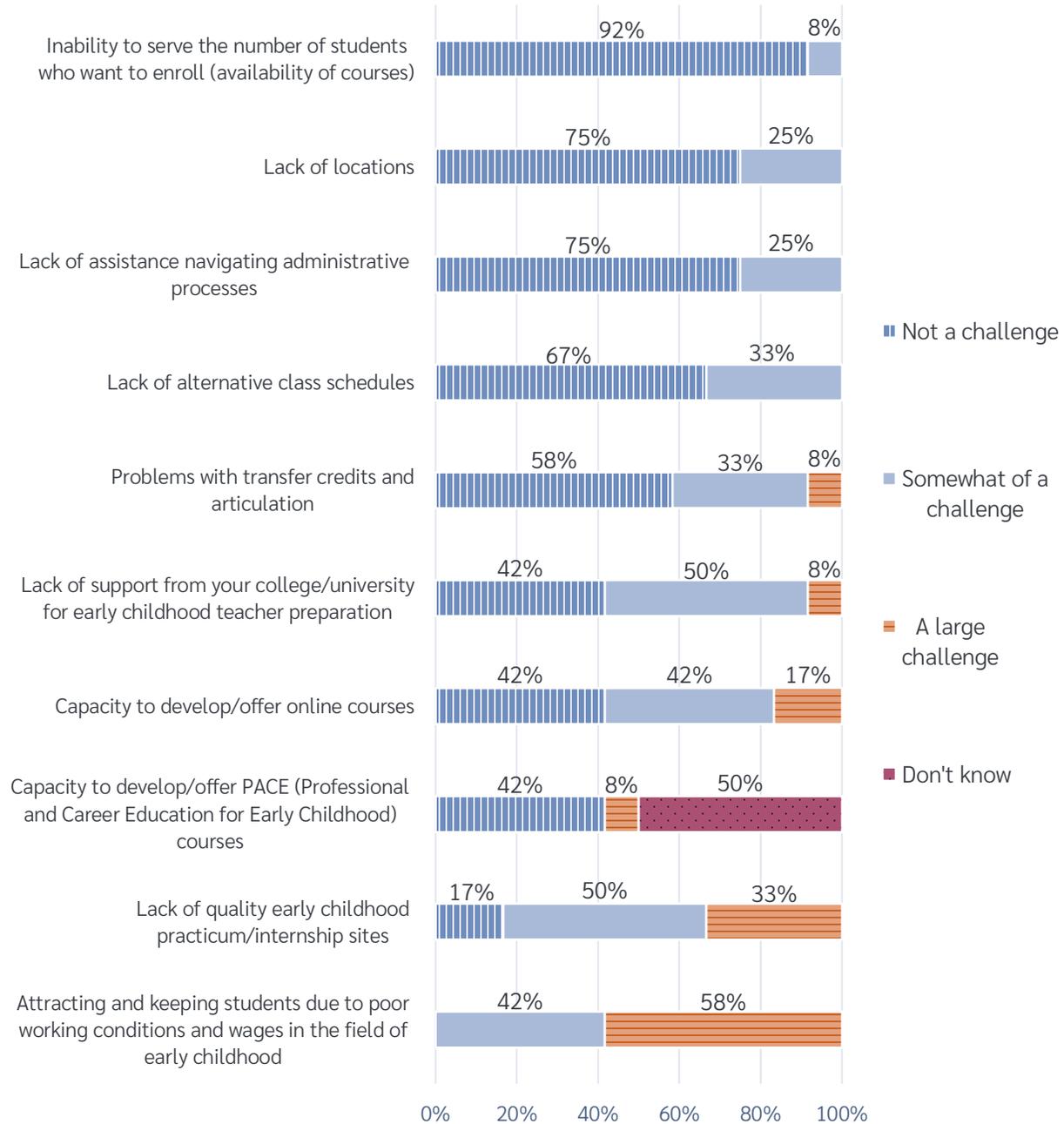
Figure 88. ‘Thinking about the faculty in your early childhood program, please indicate the extent to which the following are a challenge to enrollment, retention, and/or graduation’ on IHE Faculty Survey (N = 12)



Source: Author analysis of IHE Faculty Survey

Faculty respondents were also asked to consider challenges to enrollment, retention, and/or graduation from an overall IHE perspective (Figure 89). Notably, 100% of faculty reported attracting and keeping students due to poor working conditions and wages in early childhood, and 83% reported a lack of quality early childhood practicum/internship sites as challenges.

Figure 89. ‘Thinking about your IHE early childhood program overall, please indicate the extent to which the following are a challenge to enrollment, retention, and/or graduation’ on IHE Faculty Survey (N = 12)



Source: Author analysis of IHE Faculty Survey

ECCE Wage Comparability

This section summarizes key findings from a comprehensive report that analyzed labor market conditions and wage dynamics for Idaho's early childhood care and education (ECCE) staff. The report examined ECCE wages through three distinct lenses—how Idaho compares to national averages and neighboring states, how ECCE occupations compare to other professions within Idaho itself, and how wages vary across different regions of the state.

The data reveal that ECCE staff in Idaho are underpaid across the board compared to their counterparts nationally and ECCE staff in surrounding states like Montana, Oregon, and Washington. Preschool teachers, child care workers, and center directors all have median wages that trail the national medians by 12% to 27%, with the gaps widening to 39% to 60% when compared to top-paying nearby states. This difference in wages suggests Idaho may face challenges in attracting and retaining qualified ECCE staff when employment options are more lucrative elsewhere.

Within Idaho's labor market, the disparities for ECCE staff are just as stark. Their median earnings amount to only about 60% of the overall state median wage. Preschool teachers with similar or greater educational attainment earn just 60% of kindergarten teacher wages and only slightly more than teaching assistants. The data illuminate how ECCE staff are significantly undervalued and underpaid versus other professions in Idaho, both within and outside the education sector.

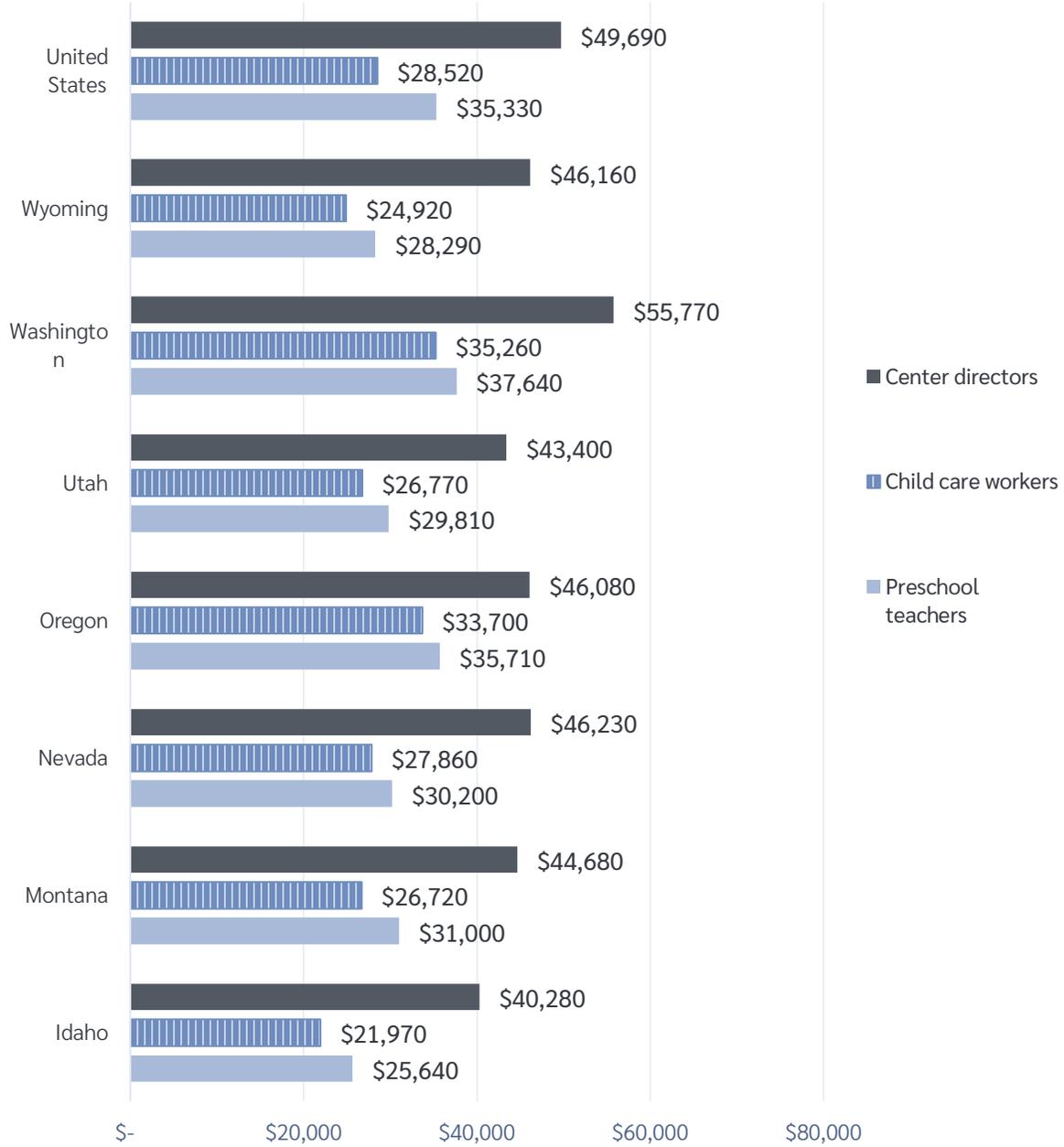
While statewide wage gaps are concerning, the report also uncovered regional variations that could exacerbate hiring and retention issues in certain areas. The following sections explore these dimensions in greater depth, painting a comprehensive picture of the financial pressures and inequities facing Idaho's ECCE workforce.

Overall, the study concludes that the ECCE sector in Idaho faces challenges in terms of competitive wages both at the national level and across different regions in the state. This disparity suggests potential difficulty in attracting and retaining qualified ECCE staff in Idaho.

Section 1: Comparing ECCE Wages in Idaho and Other States

This section examines how wages for preschool teachers, child care workers, and center directors in Idaho compare to national averages and those in neighboring states (Montana, Oregon, Nevada, Utah, Washington, and Wyoming). The median annual wage data come from the Occupational Employment and Wage Statistics (OEWS) Survey conducted by the United States Bureau of Labor Statistics (BLS). The data from May 2022 are the most recent available. Figure 90 shows that median wages in Idaho for ECCE staff are significantly lower than the national median and lower than all adjacent states, with gaps ranging from 12% to 60% (May 2022 Occupational Employment and Wage Statistics, 2023). Regionally, Idaho's wages for all three ECCE occupations are below those of every neighboring state, with gaps of at least \$3,000 in all cases. The smallest gaps are with Wyoming (10% to 15% lower), and the largest are with Washington (39% to 60% lower).

Figure 90. Median Annual Wages of Early Childhood Education Workers, May 2022

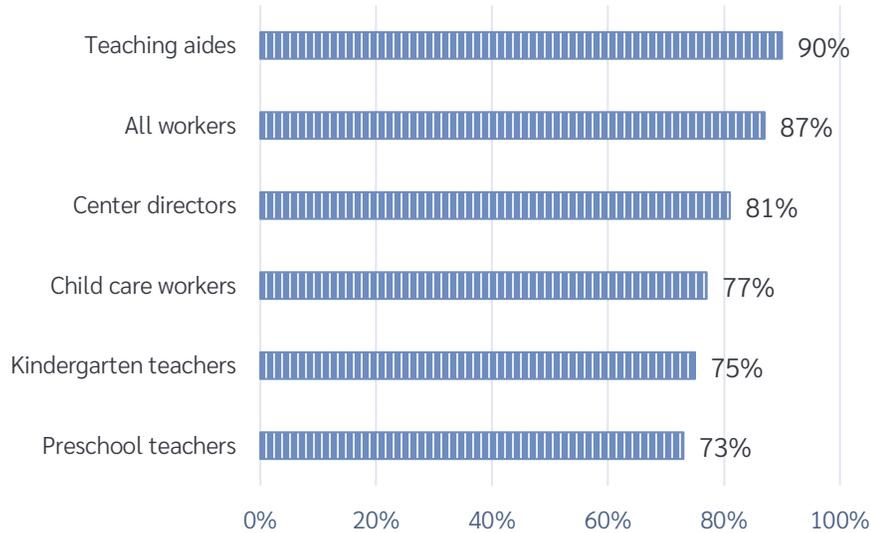


Note. Center director median wages in Idaho were reported in 2021 but not in 2022. The 2022 wage was estimated using the 2021 wage and the growth in wages for preschool workers in Idaho from 2021 to 2022.

Source: U.S. Bureau of Labor Statistics, May 2022 Occupational Employment and Wage Statistics

As seen in Figure 91, preschool teachers in Idaho had an annual median wage of \$25,640, about 73% of the national median. This represents a gap of approximately \$10,000. Child care workers in Idaho earn a median wage of \$21,970, or 77% of the national average. Center directors have a median wage of \$40,280, about 81% of the national average.

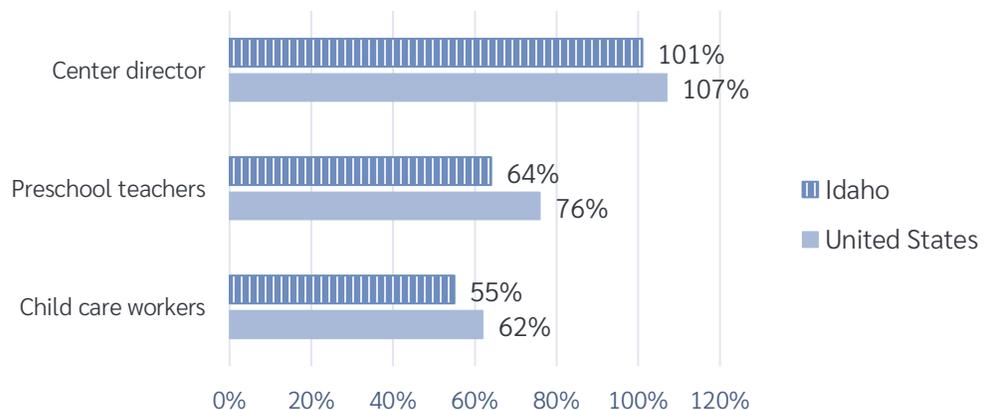
Figure 91. Idaho median wages represented as a percentage of the median wage in the U.S., May 2022



Source: U.S. Bureau of Labor Statistics, May 2022 Occupational Employment and Wage Statistics

Figure 92 reports the ratio of ECCE pay to median worker pay in Idaho and the United States. In Idaho and the United States, preschool teachers and child care workers make less than the median worker. However, the pay gap is consistently larger in Idaho than in the United States for preschool teachers and child care workers. The median annual pay for center directors is about 7% more than all workers in the United States, but only 1% more in Idaho. For all three occupations, ECCE staff are relatively lower paid.

Figure 92. ECCE Wages as a Percentage of Median Wages in Idaho and the U.S.

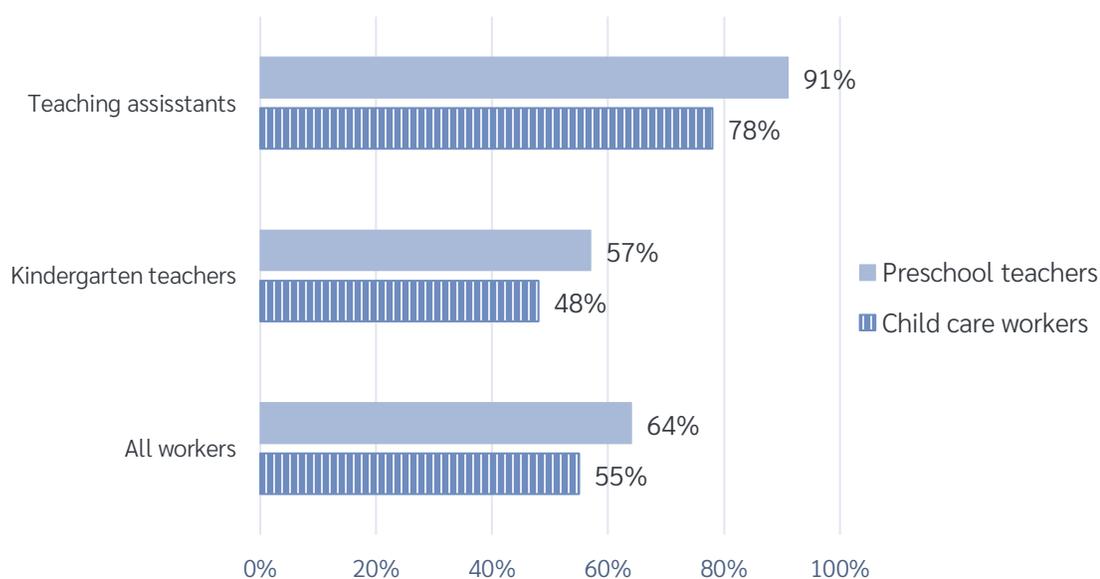


Source: U.S. Bureau of Labor Statistics, May 2022 Occupational Employment and Wage Statistics

Section 2: Comparing Wages for ECCE Staff to Other Workers in Idaho

This section explores the wages of ECCE staff in Idaho compared to other occupations within the state, such as kindergarten teachers, teacher aides, and the state median wage (Figure 93). The findings suggest that ECCE staff have median wages of about 60% of the Idaho state median. Despite often having more education than a teacher assistant, preschool teachers earn about 60% of a kindergarten teacher's wage and about 90% of a teacher assistant's wage. Nationally, the median wage in Idaho is lower than the national median for many specific occupations. However, the pay gap for preschool teachers compared to the nation is more than twice that of other workers in Idaho.

Figure 93. Median Annual Wages in ECCE Relative to other Occupations in Idaho, May 2022



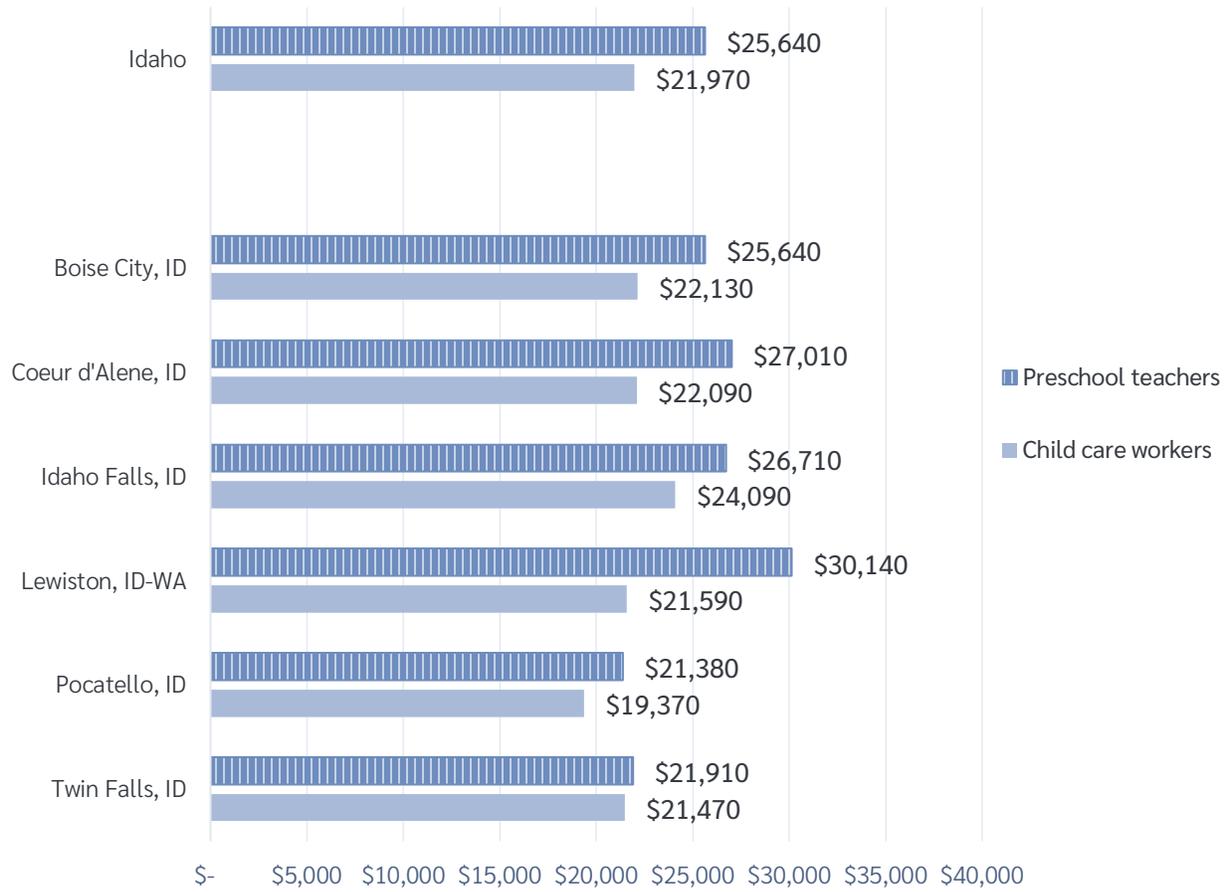
Source: U.S. Bureau of Labor Statistics, May 2022 Occupational Employment and Wage Statistics

Section 3: Comparing ECCE Wages Across Idaho

When looking at the variation in wages across different regions within Idaho, the wages for ECCE staff vary but generally align with other regional labor market differences. For example, child care staff have fairly consistent wages across the state, while preschool teachers show more geographic variation.

Figure 94 shows the median annual wages of child care workers and preschool teachers for the BLS-designated geographic areas. The figure includes the overall Idaho median wage for comparison. There are too few center directors in the data in several regions to make a reliable comparison, so this occupation is not included. The wages of child care workers are fairly consistent across the state, with slightly higher wages in Idaho Falls. Preschool teachers have more geographic variation in wages. Twin Falls and Pocatello have relatively low wages, while the Lewiston region, which straddles the Washington border, has some of the highest.

Figure 94. Regional Variation in Median Wages of Early Childhood Education Workers, May 2022



Source: U.S. Bureau of Labor Statistics, May 2022 Occupational Employment and Wage Statistics

Idaho Employer Business Climate Survey

In recent years, the issue of child care has emerged as a critical consideration for both employees and employers. With the evolving dynamics of the modern workforce and the increasing presence of dual-income households, the demand for accessible, affordable, stable, high-quality child care services has become more pronounced. Recognizing the profound impact of child care on workforce productivity, retention rates, and overall employee well-being, businesses across various industries are beginning to acknowledge the importance of integrating child care support into their organizational frameworks. Against this backdrop, this section explores the perspectives of businesses in Idaho regarding the significance of child care provisions for their employees. Like many other states, Idaho grapples with challenges related to child care accessibility, affordability, stability, and quality.

The following represents the insights gathered from the Idaho business leaders regarding the influence of the child care dynamic on both their businesses and their employees. The 2023 Idaho Employer Business Climate Survey navigated six main themes: company child care support, child care in Idaho, the importance of family-friendly policies in the workplace, lack of child care, the impact of child care on workforce turnover, and the role of government in child care.

Section Key Findings

Most respondents acknowledged the crucial role of child care access in employee success, but less than half of businesses provide any form of child care support. A substantial 85% of business leaders acknowledged the crucial role of child care access in employee success. However, only 44% of businesses currently provide any form of child care support, with 21% indicating no plans to offer such benefits in the near future.

While a majority of respondents were satisfied with child care quality, views on its accessibility and affordability were mixed. Though 60% of respondents were satisfied with the quality of child care in Idaho and 56% were positive about access to child care, a slight majority critiqued its affordability, with 25% rating it as poor. This sentiment was particularly pronounced among companies not offering child care support, 70% of whom rated affordability as fair or poor.

Nearly all respondents agreed that family-friendly policies enhance talent attraction, job fulfillment, and employee retention, but implementation cost is a barrier. An overwhelming 95% of business leaders agreed that family-friendly policies are important for attracting and retaining employees. However, cost was identified by 83% as a major barrier to implementing such policies.

More than three-fourths of respondents believe improving child care availability is crucial for increasing women's workforce participation. The survey revealed that 76% of business leaders believe improving child care availability is crucial for increasing women's workforce participation, with 81% identifying workforce turnover due to inadequate child care as a significant concern.

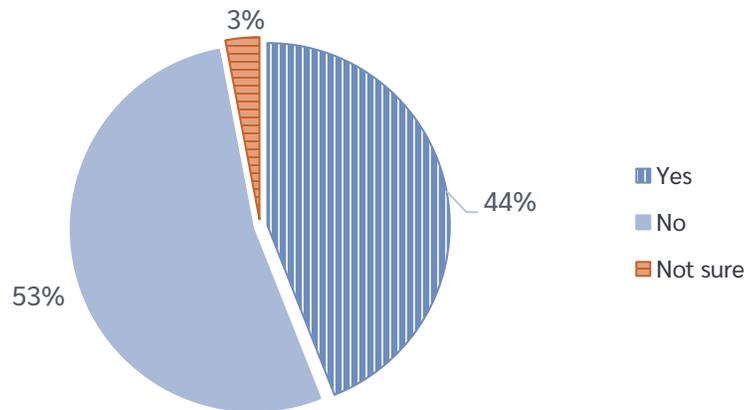
More than half of respondents cited high turnover or concerns about the cost and supply of workers as top priorities. Specifically, 71% recognized workforce turnover related to child care issues, with 64% noting its impact on employee productivity.

A strong majority of respondents say the government should play a role in child care. Of business leaders surveyed, 76% expressed that government policies should support families in affording child care and early learning costs. The most favored suggestion was the provision of government-run preschool for children ages 3 to 5, supported by 88% of respondents.

Company Child Care Support

As shown in Figure 95, Surveyed business leaders overwhelmingly agreed (85%) that access to child care is crucial for employees' success within their companies (Shaul et al., 2023).

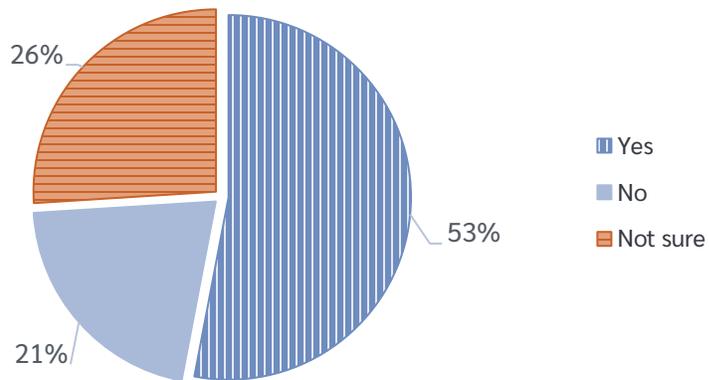
Figure 95. 'Does your company currently provide support for childcare?' on Idaho Employer Business Climate Survey, 2023



Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

Despite this acknowledgment, only 44% of these businesses currently provide any form of child care support (Figure 96). Only 21% indicated that they had no intentions of subsidizing or offering child care for their employees in the near future.

Figure 96. 'Do you have plans to either subsidize or offer childcare for your employees in the near future?' on Idaho Employer Business Climate Survey, 2023

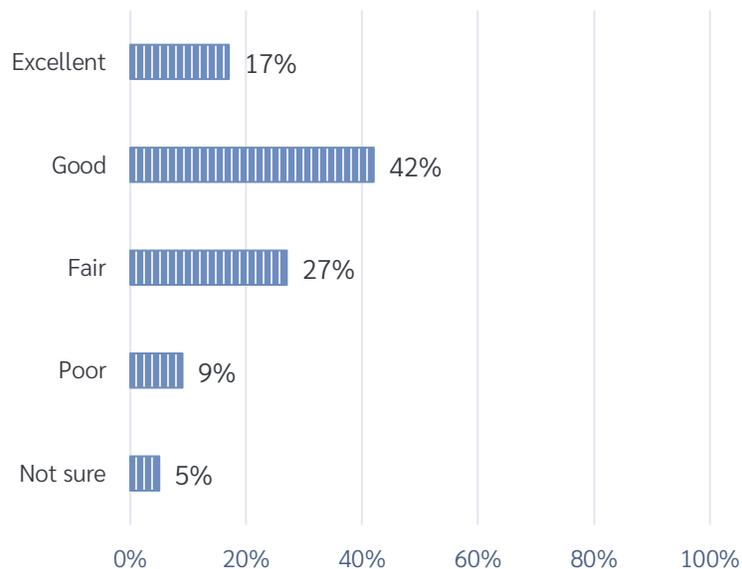


Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

Child Care in Idaho

A majority of surveyed business leaders (59%) expressed positive sentiments regarding the quality of child care in Idaho, with 9% indicating dissatisfaction with its quality (Figure 97).

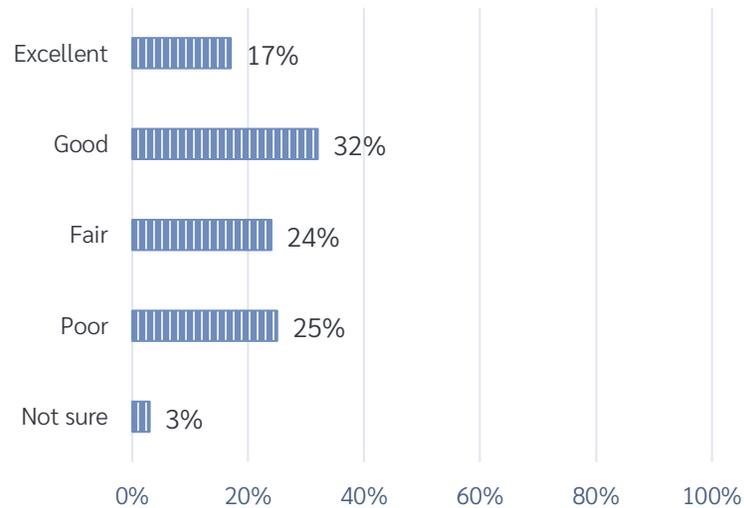
Figure 97. 'In general, how would you rate the quality of child care in Idaho?' on Idaho Employer Business Climate Survey, 2023



Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

However, opinions on accessibility and affordability were less resolute. Notably, a slight majority (49%) rated the affordability of child care in Idaho as either fair or poor, with a significant portion (25%) within this group specifying that affordability was poor (Figure 98). Further analysis revealed that among respondents who indicated their companies offered no support for child care, 70% assessed its affordability as fair or poor.

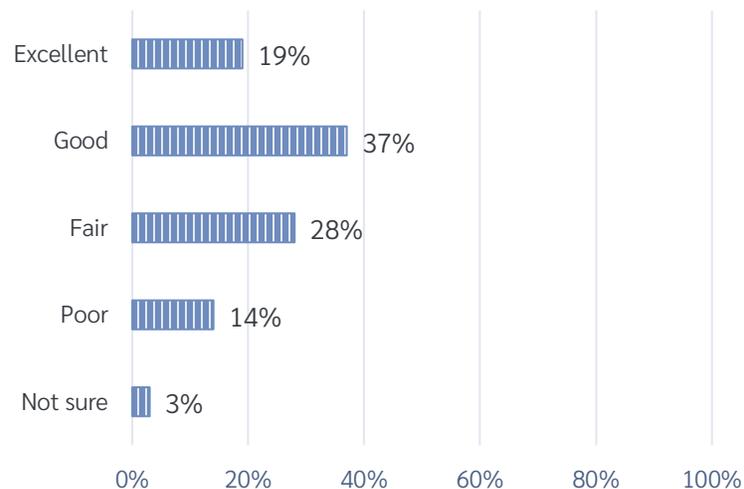
Figure 98. ‘In general, how would you rate the affordability of child care in Idaho?’ on Idaho Employer Business Climate Survey, 2023



Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

When asked about access to child care, 19% of respondents rated access as excellent and 37% rated access as good, while 14% of respondents rated access as poor (Figure 99).

Figure 99. ‘In general, how would you rate access to child care in Idaho?’ on Idaho Employer Business Climate Survey, 2023

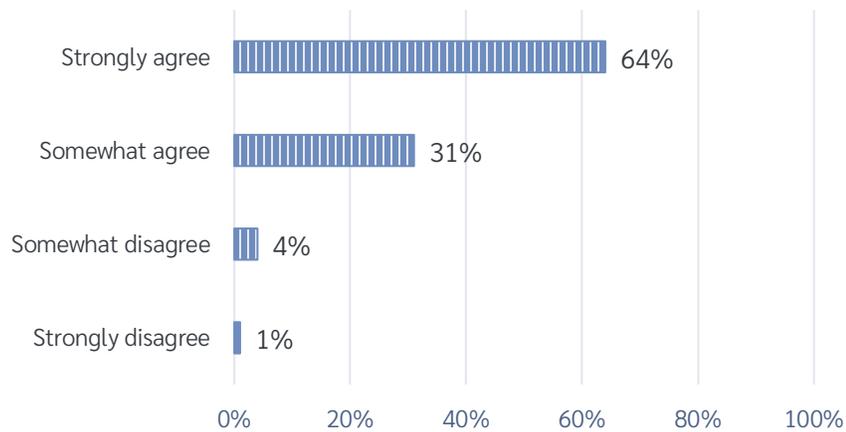


Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

Importance of Family-Friendly Policies in the Workplace

Business leaders overwhelmingly agreed on the positive impact of family-friendly policies in the workplace on job fulfillment and retention. A staggering 95% of respondents strongly or somewhat agreed that providing such policies and benefits aids in attracting and retaining superior talent (Figure 100).

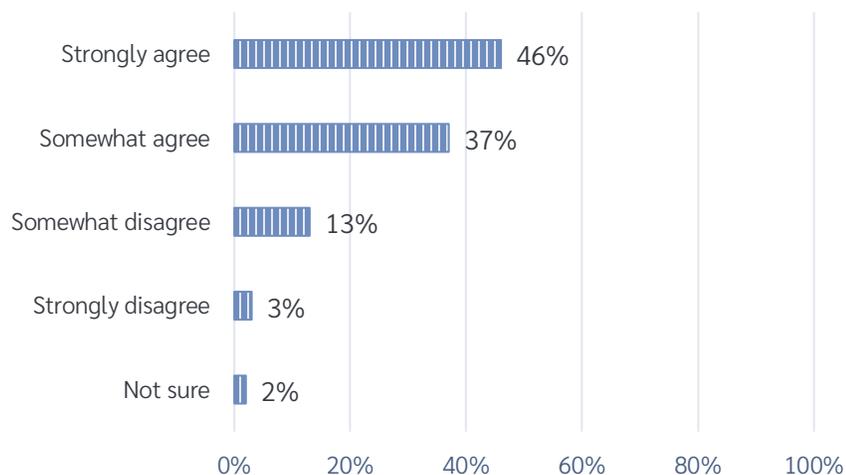
Figure 100. To what extent do you agree with the statement, ‘Offering family-friendly policies and benefits helps employers attract and retain better employees’? on Idaho Employer Business Climate Survey, 2023



Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

Cost emerged as a significant factor, mentioned by 83% of respondents, hindering them from offering similar policies and benefits (Figure 101).

Figure 101. To what extent do you agree with the statement, ‘Most employers would like to offer more family-friendly policies and benefits, but the cost prevents them from doing so’? on Idaho Employer Business Climate Survey, 2023

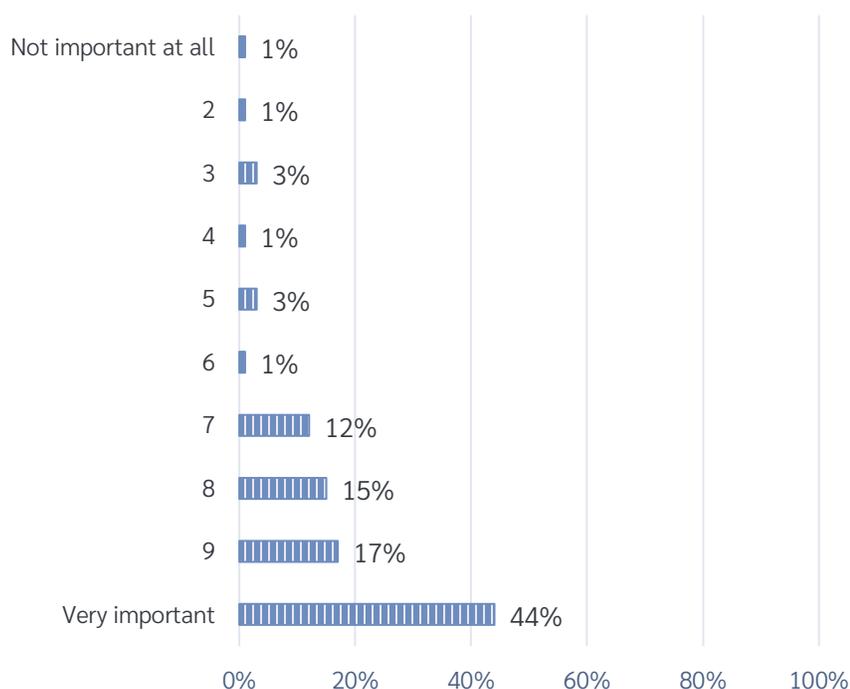


Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

Lack of Child Care is Seen as a Major Issue

Respondents were surveyed to assess various factors impacting the increased participation of women in the workforce. When questioned about the significance of enhancing child care availability on a scale of 1–10, with 10 representing the most important, 76% of business leaders responded with a rating of eight or higher (Figure 102). Among this same cohort, 81% identified workforce turnover resulting from inadequate child care as a significant concern. Surprisingly, maternity leave was not deemed pivotal in enhancing female workforce participation, with only 66% of respondents rating it at eight or higher. Nonetheless, 70% of this subset recognized workforce turnover due to insufficient child care as a pressing issue. Notably, the need for health care for employees' children was the only factor rated higher as a priority for employers than child care.

Figure 102. Percentage of respondents rating the significance of enhancing child care availability on a scale of 1–10, Idaho Employer Business Climate Survey, 2023



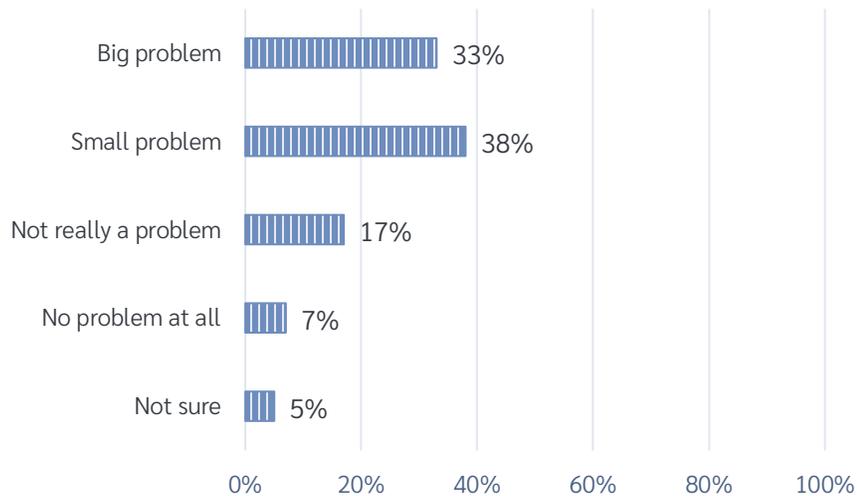
Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

Workforce Turnover

The 2023 Idaho Employer Business Climate Survey revealed that more than half of respondents identified high turnover or concerns about the supply and cost of workers as their top priorities. This sentiment was echoed among surveyed business leaders in Idaho. Specifically, 71% of respondents identified workforce turnover attributed to child care as a problem, with 33%

considering it a significant issue (Figure 103). Only 24% of those surveyed did not perceive it as problematic.

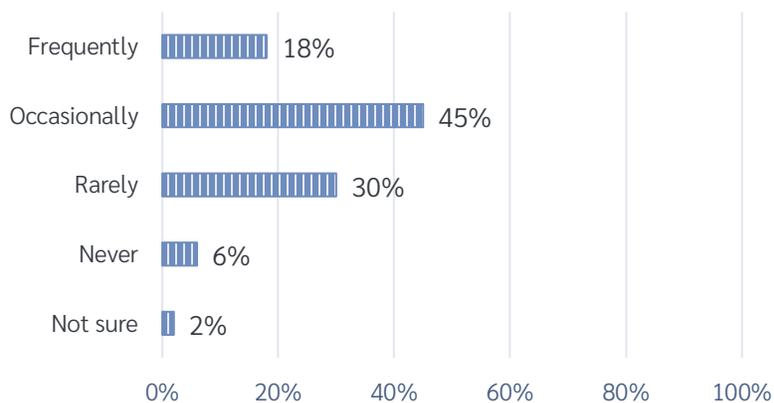
Figure 103. ‘How big a problem is the issue of workforce turnover because an employee decided to quit work due to lack of access to child care or education for their children ages 0–5?’ on Idaho Employer Business Climate Survey, 2023



Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

Within the same group, 63% reported challenges recruiting employees due to a lack of availability of child care (Figure 104).

Figure 104. ‘How often have you found it to be challenging to recruit or attract a skilled workforce due in part to the availability or access to child care or education for their children?’ on Idaho Employer Business Climate Survey, 2023

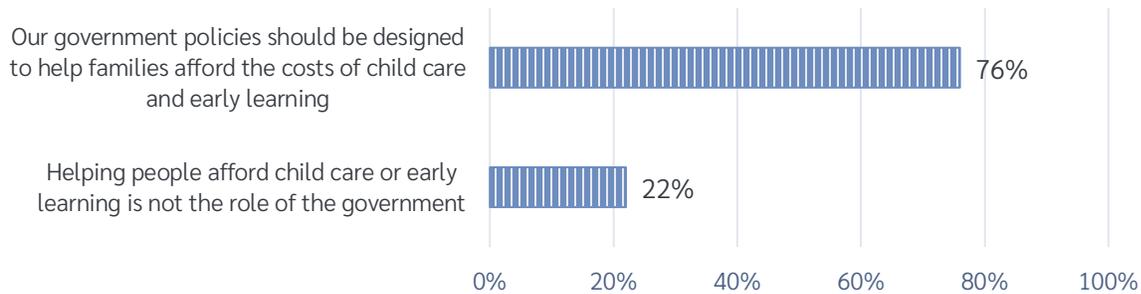


Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

The Role of Government in Child Care

Currently, 46 states and the District of Columbia offer some form of a state-funded pre-kindergarten program. When asked if Idaho government policies should be designed to help families afford the cost of child care and early learning, 76% of business leaders surveyed stated that the government should help (Figure 105).

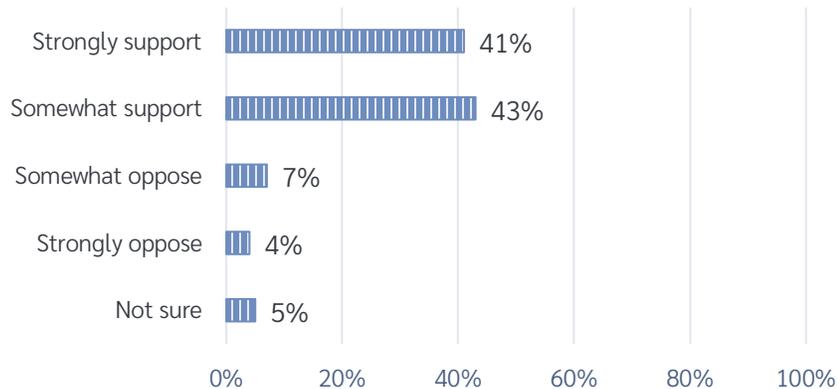
Figure 105. Respondents' opinion on the role of government in childcare, Idaho Employer Business Climate Survey, 2023



Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

Similarly, 84% of business leaders favored giving a tax credit to employers who either provide or assist their employees in affording child care and preschool education (Figure 106).

Figure 106. Respondents' level of support for giving a tax credit to employers who provide or help their employees afford child care and preschool education, Idaho Employer Business Climate Survey, 2023



Source: Idaho Department of Labor, Idaho Employer Business Climate Survey August 2023

The insights gleaned from Idaho business leaders underscore the pivotal role that child care provisions play in shaping the landscape of workforce dynamics and organizational success. As illuminated through the 2023 Idaho Employer Business Climate Survey's exploration of six key themes, it becomes evident that the issue of child care permeates various facets of business operations, from employee satisfaction and retention to productivity and overall well-being. The resounding acknowledgment of the importance of accessible, affordable, and high-quality child care services reflects a growing awareness among businesses of the intrinsic link between child care support and workforce vitality.

Pressing Needs and Potential Strategies

This report identifies six pressing needs within the realm of early childhood care and education (ECCE) in Idaho, highlighting areas that require attention for improvements in accessibility, affordability, stability, and quality of services.

Increase Preschool Enrollment: Idaho children ages 3 through 5 are less likely to be enrolled in preschool than the national average. This finding indicates a need to enhance access and encourage enrollment in early learning programs.

Address Head Start Underutilization: Head Start programs' notable underutilization, primarily due to staffing shortages, suggests a critical need for workforce development and support to ensure these programs reach full enrollment and capacity.

Improve Early Intervention Access: Mixed data on access to early intervention services indicate a pressing need for better identification and support mechanisms for children with disabilities or special needs, particularly for ages 3 through 4, where there appears to be declining identification.

Increase Affordability of Child Care: The high cost of child care in Idaho presents a significant barrier for many families, underscoring the need for strategies to make early childhood care and education more affordable to families across income levels.

Improve Support for ECCE Providers: The economic and operational challenges faced by ECCE providers, especially in light of the COVID-19 pandemic, highlight the need for sustainable support mechanisms to ensure the accessibility, affordability, stability, and quality of care available to young children.

Increase Early Learning Workforce Development: The preparation and training of ECCE providers are crucial for a qualified workforce. Challenges in attracting diverse students and faculty, financial support for students, and preparation for realities such as low wages and poor working conditions impact enrollment, retention, and graduation rates in early childhood programs. Addressing these challenges is necessary for building a robust and effective ECCE workforce in Idaho.

Implement a Data Agenda: The lack of licensed ECCE capacity (slot) data precluded the ability to analyze the adequacy of system capacity relative to potential ECCE demand. This is in part due to licensing rules that do not require providers to identify the ages served nor the intended program capacity outside of broad ranges (such as “up to 12 children” or “26 or more children”). More precise analysis of child care system capacity and so-called “child care deserts” require the ability to more accurately estimate slots by age.

These identified needs emphasize the importance of a comprehensive and multi-faceted approach to bolstering ECCE in Idaho, including policy reforms, investment in workforce development, enhancing program accessibility and affordability, and supporting children's holistic development through early learning opportunities.

Early Learning Collaboratives in Idaho

Within Idaho's complex early childhood care and education (ECCE) landscape, Early Learning Collaboratives (ELCs) are structures that are foundational in enhancing access to and quality of early learning experiences. Figure 107 shows the Early Learning Collaborative boundaries. Drawing upon the comprehensive Idaho Needs Assessment, this section delineates the indispensable role these collaboratives play in the state's ECCE framework and in addressing the diverse needs identified through the assessment process.

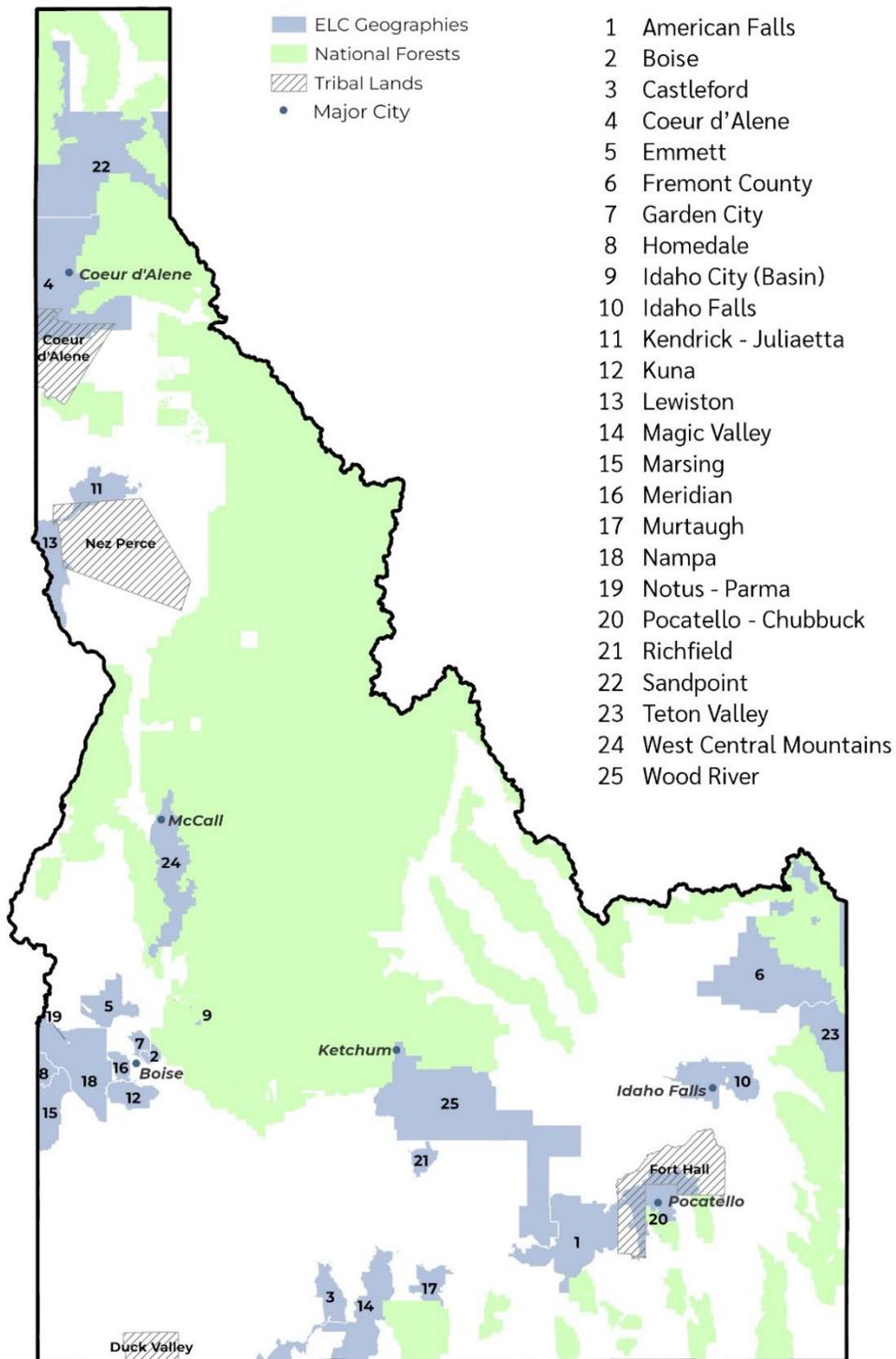
ELCs in Idaho are instrumental in fostering community-driven responses to the pressing needs in early childhood care and education. They epitomize a concerted effort to unite local stakeholders—including families, educators, community leaders, and businesses—towards the common goal of providing high-quality early learning opportunities. The collaborative model amplifies access to accessible, affordable, stable, high-quality early learning services and significantly contributes to the state's strategic priorities for ECCE, as outlined in the Idaho Association for the Education of Young Children's (IDAEYC) strategic plan.

Strategic Alignment and Impact

The strategic direction of the IDAEYC, with its emphasis on high-quality learning, professional excellence in early childhood care and education (ECCE), and organizational advancement, resonates through the work of ELCs. These collaboratives are essential in actualizing the goal of ensuring children from birth through age 8 have equitable access to developmentally appropriate, high-quality early learning. They serve as critical conduits for implementing National Association for the Education of Young Children accreditation systems and quality rating improvements, thereby elevating the overall quality of ECCE across Idaho.

ELCs also play a significant role in professional development and advocacy for early childhood educators, aligning with the IDAEYC's vision for a skilled and recognized early childhood care and education workforce. By fostering local expertise and leadership, ELCs contribute to a statewide ecosystem that supports educators' professional growth and acknowledgment.

Figure 107. Early Learning Collaborative Boundaries Shown with National Forest and Tribal Land Borders



Source: Author analysis of available boundary data

Community Engagement and Support Systems

The Idaho Needs Assessment highlights several areas where ELCs' contributions are particularly noteworthy:

Access and Affordability: ELCs have been pivotal in expanding access to and affordability of early learning programs. Community-based partnerships address local needs and preferences, ensuring that early learning opportunities are tailored to community contexts.

Family Engagement: ELCs enhance family engagement in early learning, providing parents and caregivers with resources and support to play an active role in their children's education. This aligns with findings from the assessment that underscore the importance of engaging families as partners in early childhood care and education (ECCE).

Workforce Development: By supporting professional development opportunities for educators, ELCs address a key need identified in the assessment—strengthening Idaho's early childhood education profession.

ELCs in Idaho are indispensable to the state's efforts to improve early childhood education. Their role transcends providing access to services; they are catalysts for quality enhancement, professional development, and community engagement in ECCE. The findings from the assessment underscore the critical need for continued support and investment in ELCs as they are central to achieving the strategic goals set forth by IDAEYC and meeting the diverse needs of children and families across the state.

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Appendix A. Demographic Data Tables

This appendix contains tables with detailed demographic information to support the understanding of the findings in this report. Table A1 shows the count and percentage of children under 6, broken down by those living 100% and 200% below the federal poverty level. This table also includes the state and national averages for comparison.

Table A1. Count and Percentage of Children Under 6 Years of Age Living Below Poverty and/or Below 200% of Poverty by Idaho County, State, and Nation, 2022

County	Children Under 6 Below 100% Federal Poverty Level Count	Children Under 6 Below 100% Federal Poverty Level Percent	Children Under 6 Below 200% Federal Poverty Level Count	Children Under 6 Below 200% Federal Poverty Level Percent
Ada County	3,378	10.8%	8,976	28.7%
Adams County	37	19.7%	104	55.3%
Bannock County	1,030	15.5%	3,342	50.4%
Bear Lake County	76	13.3%	266	46.4%
Benewah County	86	14.4%	371	61.9%
Bingham County	480	11.6%	1,971	47.6%
Blaine County	124	13.3%	332	35.6%
Boise County	39	10.9%	146	40.8%
Bonner County	617	21.7%	1,250	44.1%
Bonneville County	1,692	14.7%	5,232	45.5%
Boundary County	177	19.2%	578	62.6%
Butte County	65	38.5%	120	71.0%
Camas County	3	3.3%	29	31.5%
Canyon County	2,636	13.3%	9,726	49.0%
Caribou County	48	9.1%	185	35.0%
Cassia County	371	15.3%	1,502	61.9%
Clark County	4	6.2%	52	80.0%
Clearwater County	60	16.0%	178	47.6%
Custer County	31	16.1%	81	42.0%
Elmore County	338	14.1%	1,231	51.2%
Franklin County	161	13.4%	673	56.2%
Fremont County	191	20.0%	506	53.0%
Gem County	256	21.9%	520	44.5%
Gooding County	245	23.3%	633	60.1%
Idaho County	103	10.2%	533	52.7%
Jefferson County	507	17.5%	1,586	54.7%
Jerome County	483	22.9%	1,303	61.8%
Kootenai County	1,835	15.0%	4,417	36.2%
Latah County	210	9.1%	859	37.3%

County	Children Under 6 Below 100% Federal Poverty Level Count	Children Under 6 Below 100% Federal Poverty Level Percent	Children Under 6 Below 200% Federal Poverty Level Count	Children Under 6 Below 200% Federal Poverty Level Percent
Lemhi County	25	6.7%	176	46.9%
Lewis County	50	25.4%	111	56.3%
Lincoln County	120	27.7%	249	57.5%
Madison County	1,153	27.4%	2,755	65.4%
Minidoka County	435	21.4%	960	47.2%
Nez Perce County	626	22.7%	1,009	36.6%
Oneida County	75	21.2%	137	38.7%
Owyhee County	186	21.2%	401	45.7%
Payette County	273	14.4%	1,104	58.2%
Power County	93	15.6%	428	71.8%
Shoshone County	236	23.1%	652	63.8%
Teton County	142	13.2%	407	37.8%
Twin Falls County	1,839	25.1%	3,293	45.0%
Valley County	4	0.7%	156	28.4%
Washington County	215	31.4%	524	76.5%
Idaho	20,755	15%	59,064	44%
United States	4,038,051	18%	8,796,231	39%

Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2022, Table B17024

Table A2 shows the count and percentage of children enrolled in preschool by Idaho county, including the state and national average for comparison.

Table A2. Count and Percentage of Children Enrolled in Preschool by Idaho County, State, and Nation, 2022

County	Count	Percent
Ada County	6,298	36.7%
Adams County	19	33.9%
Bannock County	1,136	33.4%
Bear Lake County	110	29.9%
Benewah County	96	31.7%
Bingham County	778	34.3%
Blaine County	264	56.7%
Boise County	54	33.5%
Bonner County	424	23.9%
Bonneville County	1,947	31.6%

County	Count	Percent
Boundary County	143	31.9%
Butte County	45	38.5%
Camas County	0	0.0%
Canyon County	3,007	26.3%
Caribou County	77	30.9%
Cassia County	523	36.9%
Clark County	13	34.2%
Clearwater County	26	16.0%
Custer County	64	41.6%
Elmore County	129	12.6%
Franklin County	155	36.5%
Fremont County	148	26.3%
Gem County	222	29.4%
Gooding County	185	39.8%
Idaho County	217	39.4%
Jefferson County	522	35.3%
Jerome County	284	27.8%
Kootenai County	2,203	32.3%
Latah County	449	36.1%
Lemhi County	109	53.4%
Lewis County	31	43.7%
Lincoln County	53	21.9%
Madison County	610	32.8%
Minidoka County	294	29.3%
Nez Perce County	660	46.0%
Oneida County	72	33.6%
Owyhee County	51	13.9%
Payette County	331	34.5%
Power County	126	49.0%
Shoshone County	97	15.6%
Teton County	213	32.4%
Twin Falls County	1,162	29.3%
Valley County	130	56.8%
Washington County	106	27.1%

County	Count	Percent
Idaho	23,583	32.3%
United States	4,634,033	40.4%

Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2022, Table S1401 and B09001

Table A3 shows the count and percentage of children under age 6 with all parents in the labor force in Idaho counties. This table also includes the state and national averages for comparison.

Table A3. Count and Percentage of Children Under Age 6 with All Parents in the Labor Force, 2022

County	Count	Percent
Ada County	19,438	63%
Adams County	52	28%
Bannock County	3,840	59%
Bear Lake County	351	64%
Benewah County	219	37%
Bingham County	2,252	56%
Blaine County	782	84%
Boise County	217	61%
Bonner County	1,552	59%
Bonneville County	5,677	50%
Boundary County	425	47%
Butte County	67	41%
Camas County	42	46%
Canyon County	12,060	62%
Caribou County	216	42%
Cassia County	1,317	55%
Clark County	18	28%
Clearwater County	238	64%
Custer County	93	48%
Elmore County	1,510	65%
Franklin County	362	30%
Fremont County	409	44%
Gem County	731	63%
Gooding County	637	62%
Idaho County	602	60%
Jefferson County	1,205	42%
Jerome County	1,324	63%

County	Count	Percent
Kootenai County	7,996	67%
Latah County	1,216	54%
Lemhi County	287	77%
Lewis County	115	59%
Lincoln County	245	57%
Madison County	1,744	41%
Minidoka County	1,357	69%
Nez Perce County	1,930	75%
Oneida County	162	49%
Owyhee County	319	38%
Payette County	1,273	67%
Power County	246	41%
Shoshone County	462	48%
Teton County	751	71%
Twin Falls County	4,039	55%
Valley County	293	55%
Washington County	314	46%
Idaho	78,385	59%
United States	14,763,552	67%

Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2022, Table B23008

Appendix B. Idaho Local Needs Assessment Project Manager Survey Instrument

The Idaho State University (ISU), in close collaboration with Idaho Association for the Education of Young Children (IDAEYC), are guiding the development of an updated statewide needs assessment and strategic plan. The needs assessment is part of the larger Idaho School Readiness Project that works to build Idaho's early childhood care and education (ECCE) system, increase capacity, and support ECCE workers. Staff from ISU and IDAEYC, as well as evaluation and research partners, have been meeting regularly and have engaged a consultant, Marzano Research, to implement the needs assessment.

An important first step is for you to complete an online survey about the early care and learning needs in your community from your Early Learning Collaborative (ELC) leader perspective.

Thank you, in advance, for your willingness to provide information on this important topic. If you have questions, please contact the Marzano Research Project Director, Chris Wolfe, christopher.wolfe@marzanoresearch.com.

1. Which ELC are you responding for?
 - a. American Falls
 - b. Boise
 - c. Castleford
 - d. Emmett
 - e. Fremont County
 - f. Garden City
 - g. Homedale
 - h. Idaho City (Basin)
 - i. Idaho Falls
 - j. Kendrick-Julietta
 - k. Kuna
 - l. Lewiston
 - m. Magic Valley
 - n. Marsing
 - o. Meridian
 - p. Murtaugh
 - q. Nampa
 - r. North Idaho
 - s. Notus-Parma
 - t. Pocatello-Chubbuck
 - u. Sandpoint
 - v. Teton Valley
 - w. West Central
 - x. Wood River
 - y. Other

Display This Question: If Q1 = Other

1. (a) Please enter the name of the ELC you are responding about.
 - a. _____
2. What is your role at the ELC?
 - a. _____
3. How long have you been in your role with the ELC? If less than a year, please enter the number of months.
 - a. Number of Years _____
 - b. Number of Months _____

In the next series of questions, we want to describe the area that your ELAC serves. You will be able to fill out the following question up to 5 times to provide this information. If your ELC serves more than 5 areas, you will have the option to write in the counties, cities, and zip codes for the remaining areas you were not able to report.

4. What area of the state does your ELC serve?
 - a. County _____
 - b. City _____
 - c. Zip Code _____
5. Does your ELC serve another area of the state?
 - a. Yes
 - b. No

Skip To: Q5 If Q15 = No

6. What other area of the state does your ELC serve?
 - a. County _____
 - b. City _____
 - c. Zip Code _____
7. Does your ELC serve another area of the state?
 - a. Yes
 - b. No

Skip To: Q5 If Q15 = No

8. What other area of the state does your ELC serve?
 - a. County _____
 - b. City _____
 - c. Zip Code _____
9. Does your ELC serve another area of the state?
 - a. Yes
 - b. No

Skip To: Q5 If Q15 = No

10. What other area of the state does your ELC serve?
- a. County _____
 - b. City _____
 - c. Zip Code _____

11. Does your ELC serve another area of the state?
- a. Yes
 - b. No

Skip To: Q5 If Q15 = No

12. What other area of the state does your ELC serve?
- a. County _____
 - b. City _____
 - c. Zip Code _____

13. Does your ELC serve another area of the state?
- a. Yes
 - b. No

Skip To: Q5 If Q15 = No

14. Please provide the counties, cities, and zip codes for **all other** areas of the state your ELC serves. _____

15. Do you consider your ELC to have distinct “regions” with differing needs?
- a. Yes
 - b. No

Display This Question: If Q15 = Yes

16. Please describe the regions

17. What are the strategies your ELC implements to support the ECCE system? (select all that apply)
- a. ECE teacher professional development
 - b. Reviewing and awarding grants to ECE providers
 - c. Develop opportunities for peer-to-peer mentoring and communities of practice
 - d. Supporting development of Family Child Care networks

- e. Provide tools, information, and resources to empower parents and caregivers to succeed as their child's first teacher
- f. Develop/promote school readiness initiatives
- g. Collaborate to facilitate smooth transitions for children and families from birth/early care to elementary school
- h. Promoting and awarding child care scholarships to ALICE families
- i. Create access to early childhood mental health services
- j. Expand family engagement in early intervention service
- k. Expand/leverage community schools framework as a resource hub for families
- l. Launch multi-media marketing campaign to educate employers in ECE
- m. Cultivate partnerships with businesses to identify and develop family-friendly workplace policies
- n. Engage business community in supporting ECE systems locally and statewide
- o. Other, please describe _____

18. What is the **top** challenge to serving more children in ECCE programs in your ELC area? (select one only)

- a. Recruitment and retention of qualified staff
- b. Need for more or improved space
- c. Expensive rent and utilities costs
- d. I'm not sure
- e. Other, please describe _____

19. What additional resources or support do ECCE programs in your ELC area need to continue to improve the quality of care and education? (Select all that apply)

- a. Classroom materials
- b. Outdoor play spaces
- c. Professional development for staff
- d. Access to mental health supports for staff
- e. Funding, please describe _____
- f. I'm not sure
- g. Other, please describe _____

20. Which of the following **best** fits with your view of ECCE availability in your ELC area?

- a. More slots are available than there are children who need them
- b. About the same number of slots are available as children who need them
- c. Not enough slots are available for the number of children who need them

21. To what extent do you agree that ECCE is affordable for the families in your ELC area?

- a. Strongly agree
- b. Agree
- c. Disagree
- d. Strongly disagree

22. Please select the **TOP 3 challenges** families face in accessing early childhood care and education services in your ELC area. (Select 3 only)

- a. Availability of services
- b. Affordability of services

- c. Transportation to and from services
- d. Quality of services
- e. Price
- f. Location
- g. Educational offerings
- h. Hours of operation not aligned with work/shift hour
- i. No available appointments or providers
- j. Not knowing who to contact
- k. Trust in educators
- l. Concerns about getting COVID-19
- m. Other, please specify _____
- n. Not Applicable/Do Not Need Services

23. What do you think are the **TOP 3** needs faced by families in your ELC area? (Select 3 only)

- a. Housing insecurity
- b. Food insecurity
- c. Mental health or social/emotional wellbeing
- d. Substance abuse
- e. Lack of access to medical services
- f. Lack of economic opportunity
- g. Job loss
- h. Other, please describe _____
- i. None of the above

24. How do families find out about services (WIC, child care, Early Intervention, etc.) to address their needs in your ELC area? (Select all that apply)

- a. Pediatrician
- b. Home visitor
- c. Friends and/or family
- d. Idaho Public Television
- e. Library, magazines
- f. School
- g. Social media
- h. ELC
- i. Websites
- j. Unsure
- k. Other, please describe _____

25. To what extent do you agree with the statement "Families in the community our ELC serves have access to the services to address their needs."

- a. Strongly agree
- b. Agree
- c. Disagree
- d. Strongly disagree

25. (a) Please describe how families in your community do not have access to the services to address their needs _____

26. In what ways has the pandemic affected ECCE programs in your ELC area ability to provide services for children and families? (Select all that apply)
- a. Fewer programs are open
 - b. More programs are open
 - c. Fewer children who need care
 - d. More children who need care
 - e. Harder to fill open staff positions
 - f. Poorer staff mental health/wellness
 - g. I'm not sure
 - h. Other, please describe _____
27. Rank how families in your ELC area have been **most** impacted by the COVID-19 pandemic?
- a. Loss of employment
 - b. Loss of housing
 - c. Health incident or hospitalization
 - d. Difficulty making ends meet
 - e. Increased stress and worry
 - f. Other, please describe _____
 - g. None of the above
28. What supports exist in the community to help young children and families who are dealing with these challenges? (Select all that apply)
- a. Mental health support
 - b. Financial support for families
 - c. Housing assistance
 - d. Food assistance
 - e. Safe houses for domestic violence survivors
 - f. Job training for parents
 - g. Transportation and provision of medical services
 - h. Unsure
 - i. Other, please describe _____
 - j. None of the above
29. What gaps do you see in your ELC area's ECCE system?

30. To what extent do you agree with the statement, "Businesses in our ELC area are impacted by parents' ability to access ECCE (early childhood care and education) for their children."
- a. Strongly agree

- b. Agree
- c. Disagree
- d. Strongly disagree

Display This Question: If Q30 = Strongly agree

30. (a) Please describe how businesses in your ELC area impacted by parents' ability to access ECCE (early childhood care and education) for their children

31. In your opinion, where should preschool services be delivered in your ELC area? (Select all that apply)

- a. Public school district
- b. Licensed child care
- c. Private or faith-based
- d. Home-based private child care
- e. Head Start
- f. Other, please describe _____

32. Is there anything else you would like to share related to ECCE in Idaho and its impact on the community in your ELC area?

Appendix C. Institute of Higher Education Survey Instrument

The Idaho State University (ISU), in close collaboration with the Idaho Association for the Education of Young Children (IDAEYC), is guiding the development of an updated statewide needs assessment and strategic plan. As part of this needs assessment, they are conducting a survey to better understand the training and pathways available for educators focused on early childhood education. This survey is an important opportunity to capture valuable information about the needs of early childhood care and education programs across the state. This survey is appropriate for faculty members of higher education institutions who lead, teach, or have contact with early childhood education programs or students.

1. Please select the institute of higher education (IHE) you are associated with.
 - a. Boise Bible College
 - b. Boise State University
 - c. Brigham Young University–Idaho
 - d. College of Southern Idaho
 - e. College of Western Idaho
 - f. Idaho State University
 - g. Lewis-Clark State College
 - h. North Idaho College
 - i. Northwest Indian College
 - j. University of Idaho
 - k. Treasure Valley Community College
 - l. Tribal College/TCU
 - m. Other, please describe

2. Please provide your role/position/title at the IHE.
 - a. _____

Articulation

The following questions are related to articulation agreements in place that impact those in your early childhood degree program.

3. Does your institution's early childhood program have articulation agreements in place with any other institutions?
 - a. Yes
 - b. No

4. Are there any satellite or branch campuses affiliated with your institution where students can take courses in person or online, but still receive their degree or credential from your institution?
 - a. Yes
 - b. No

Display This Question: If Are there any satellite or branch campuses affiliated with your institution where students can ta... = Yes

5. Please describe the satellite or branch campuses affiliated with your institution where students can take courses in person or online, but still receive their degree or credential from your institution.
 - a. _____
6. Does your program use a formal process to award credits for prior learning (e.g., CDA, workshops, or non-college training)?
 - a. Yes
 - b. No

Display This Question: If Does your program use a formal process to award credits for prior learning (e.g., CDA, workshops,... = Yes

7. Please describe the process for awarding credits for prior learning.
 - a. _____

Program and Offerings

The following questions are related to the Early Childhood Education program(s) offered at your college or university.

8. Please select the degree or credential options related to early childhood education available to students at your institution (select all that apply)
 - a. Child Development Associate Credential (CDA)
 - b. Associate's in Early Childhood Education
 - c. Bachelor's in Early Childhood Education
 - d. Master's in Early Childhood Education
 - e. Other certificate(s) related to Early Childhood Education (please describe)
 - f. Other degree(s) related to Early Childhood Education (please describe)

9. Please select the statement which best describes early childhood education program enrollment at your institution (select one)
 - a. Enrollment is steadily declining each year.
 - b. Enrollment is steady year over year.
 - c. Enrollment is steadily increasing each year.
 - d. I am not sure how enrollment trends have changed.
10. Does your institution's early childhood degree program offer online courses?
 - a. Yes
 - b. No

Display This Question: If Does your institution's early childhood degree program offer online courses? = Yes

11. How many online courses are offered?

a. _____

12. Does your early childhood program offer optional practicum/internships?

- a. Yes
- b. No

Display This Question: If Does your early childhood program offer optional practicum/internships? = Yes

13. Are the practicum/internships required by your programs?

- a. Yes
- b. No

Display This Question: If Are the practicum/internships required by your programs? = Yes

14. How many practicum/internships are students required to complete?

a. _____

Display This Question: If Does your early childhood program offer optional practicum/internships? = Yes

15. Are there typically enough practicum/internship opportunities available for students each semester?

- a. Yes
- b. No

Display This Question: If Does your early childhood program offer optional practicum/internships? = Yes

16. Does your institution offer a practicum/internship in the following areas:

Area	Yes, in person programs only	Yes, in person and online programs	No
Infant or toddler care or education			
Preschool care or education			
Home-visiting/parent education			
Working in a family child care home			
Working with children with disabilities			
Working with bilingual children or children learning English as a second language			
Administration of early childhood programs			

17. Does your department offer any in-service training or professional development for the preschool workforce?
- Yes
 - No

Display This Question: If Does your department offer any in-service training or professional development for the preschool... = Yes

18. Please describe the in-service training or professional development offered
- _____

19. Thinking about the students in your early childhood program, please indicate the extent to which the following are a challenge to enrollment, retention, and/or graduation:

Potential Challenges	Not a Challenge	Somewhat of a Challenge	A Large Challenge	Don't Know
Student's competing work responsibilities				
Student's competing family responsibilities				
Lack of student motivation				
Lack of language supports				
Lack of prior academic preparation or skill				
Lack of financial support of scholarships				
Student's access to technology				
Student's sense of belonging				
Student's time management/organization				
Student's access to resources (e.g., computer, printer, internet, place to study),				

20. Thinking about the faculty in your early childhood education program, please indicate the extent to which the following are a challenge to enrollment, retention, and/or graduation:

Potential Challenges	Not a Challenge	Somewhat of a Challenge	A Large Challenge	Don't Know
Lack of faculty in your program/department with expertise in early childhood education				
Lack of full-time faculty in program/department				
Poor faculty working conditions and wages				
Difficulty attracting and retaining ethnically diverse faculty				
Difficulty attracting and retaining linguistically diverse faculty				

21. Thinking about your HEI institution overall, please indicate the extent to which the following are a challenge to enrollment, retention, and/or graduation for the early childhood education program:

Potential Challenge	Not a Challenge	Somewhat of a Challenge	A Large Challenge	Don't Know
Problems with transfer credits and articulation				
Lack of support from your college/university for early childhood teacher preparation				
Lack of alternative class schedules				
Lack of locations				
Lack of assistance navigating administrative processes				
Inability to serve the number of students who want to enroll (availability of courses)				
Capacity to develop/offer online courses				
Capacity to develop/offer PACE (Professional and Career Education for Early Childhood) courses				

22. Thinking about the community your HEI supports, please indicate the extent to which the following are a challenge to enrollment, retention, and/or graduation for your early childhood program:

Potential Challenge	Not a Challenge	Somewhat of a Challenge	A Large Challenge	Don't Know
Lack of quality early childhood practicum/internship sites				
Attracting and keeping students due to poor working conditions and wages in the field of early childhood				

23. Do students in your program typically enter the early childhood workforce upon degree completion?

- Yes
- No

Display This Question: If Do students in your program typically enter the early childhood workforce upon degree completion? = No

24. Why do students typically not enter the early childhood workforce upon degree completion?

- _____

Display This Question: If Do students in your program typically enter the early childhood workforce upon degree completion? = No

25. What field do students who do not enter the early childhood workforce go to instead?

- _____

Accessibility & Student Support Services

The following questions are related to various student support services that are available to those enrolled in your early childhood degree program.

26. Please indicate whether your early childhood program includes the following:

Program Offerings	Yes	No
Financial aid is available for students in the program.		
Financial aid counselors are available to students.		
College/university-level academic advising services are available to students.		
Early childhood program-level academic advising services are available to students.		
Academic support/tutoring services are offered to students.		
Job placement services are available to students in the Early Childhood program.		

27. What other student support services are available to students in the early childhood program?

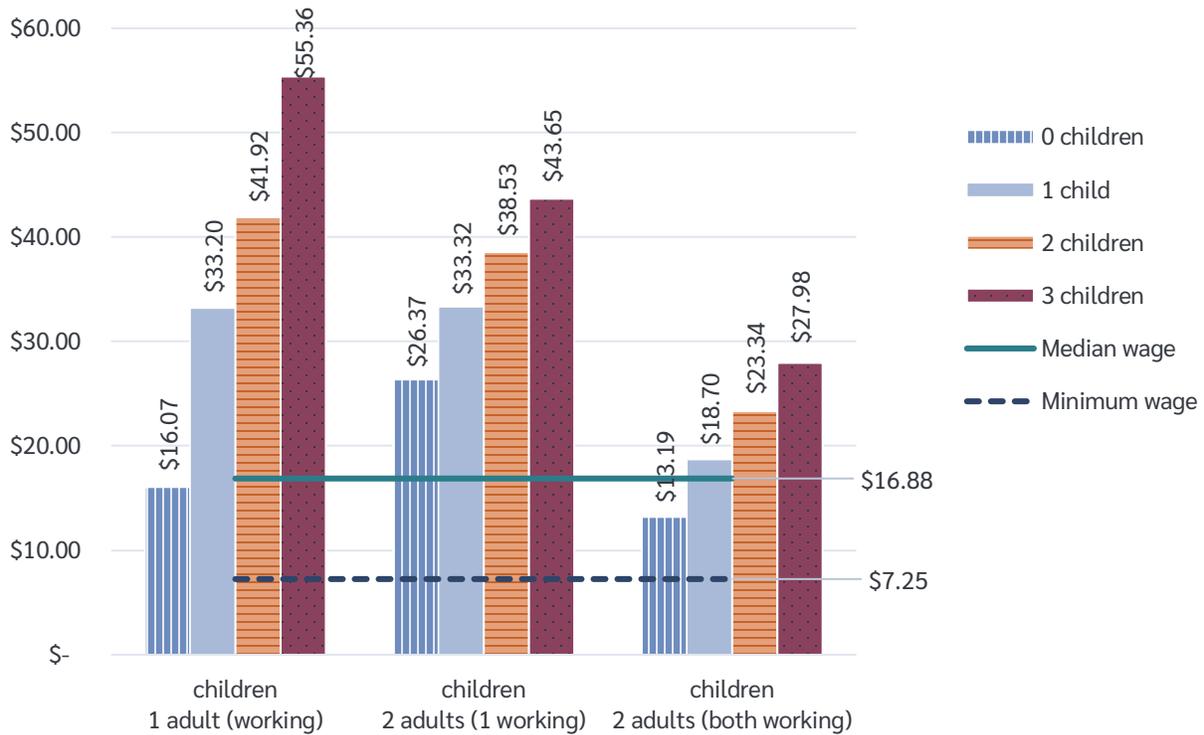
a. _____

Appendix D. MIT Living Wage Calculator: Median Income Compared to Typical Expenses

Research from the Massachusetts Institute of Technology (MIT) compiled an estimate of typical expenses for a family in Idaho, with variations by family size and whether one or both adults are working. Typical expenses include only necessities, like food, child care, medical, housing, civic, and transport. A sum of these expenses provides an estimate of the required annual income (before taxes) that households need to support themselves. Typical expenses are meant to be what is needed for ‘minimum subsistence’ and do not include additional everyday costs that many Americans have, such as prepared meals, meals eaten at restaurants, money for unpaid vacations, nor unexpected costs like a sudden illness, major car repair, and repair of household appliances. Money set aside for saving or investment for a secure financial future is also not accounted for.

Figure D1 compares the typical expenses for different family sizes to both the Idaho minimum wage and the median wage in the state. Working adults with children need to make a notably higher wage than the median wage to pay for their household's expenses. For example, one working adult with two children requires 2.5 times the median wage of \$16.88 to pay for living costs. In a two-adult household with one working family member, there is a need to make 1.9 to 2.6 times the median wage to cover living expenses for one to three children. In a two-working parent household with any number of children, both parents still need to each make above the median wage to cover typical living expenses.

Figure D1. Typical Expenses for Idaho Families Compared to Minimum and Median Wages



Sources: Living Wage Calculator, MIT (<https://livingwage.mit.edu/states/16>), 2023; 2018-2022 5-Year Estimates ACS

According to MIT calculations, and shown in Tables D1–D3, an Idaho family with one working adult and two children must make \$87,189 before taxes to cover basic expenses. Similarly, families with two adults, one working and one providing child care for three children, must make \$80,142 before taxes to account for basic costs. Both costs show a greater than \$10,000 difference between Idaho families’ median income and the estimated income required to cover basic costs. The data suggest that many Idaho families that earn the median family income or less have no funds for additional costs, leisure activities, unforeseen expenses, and future planning. The discrepancy is even greater for families with both adults working, where a family earning the median family income would fall short of covering basic expenses by \$26,880 for two children in care and \$46,202 for three children in care.

Table D1. Required Annual Income for Idaho Family by Family Size and Characteristics with 1 Working Adult

Items	0 Children	1 Child	2 Children	3 Children
Food	\$4,686	\$6,916	\$10,392	\$13,774
Child care	\$0	\$6,879	\$13,757	\$20,636
Medical	\$2,631	\$9,134	\$9,144	\$9,070
Housing	\$8,543	\$12,086	\$12,086	\$17,023
Transportation	\$5,316	\$9,561	\$11,691	\$14,058
Civic	\$2,920	\$5,801	\$6,480	\$8,835
Other	\$4,596	\$8,020	\$9,463	\$10,386
Required Annual Income After Taxes	\$28,825	\$58,529	\$73,145	\$93,913
Annual Taxes	\$4,597	\$10,526	\$14,044	\$21,233
Required Annual Income Before Taxes	\$33,422	\$69,055	\$87,189	\$115,146

Sources: Living Wage Calculator, MIT (<https://livingwage.mit.edu/states/16>), 2023; 2018-2022 5-Year Estimates ACS

Table D2. Required Annual Income for Idaho Family by Family Size and Characteristics with 2 Adults (1 Working)

Items	0 Children	1 Child	2 Children	3 Children
Food	\$8,591	\$10,702	\$13,802	\$16,795
Child care	\$0	\$0	\$0	\$0
Medical	\$6,436	\$9,144	\$9,070	\$9,223
Housing	\$9,616	\$12,086	\$12,086	\$17,023
Transportation	\$9,561	\$11,691	\$14,058	\$15,073
Civic	\$5,801	\$6,480	\$8,835	\$7,025
Other	\$8,020	\$9,463	\$10,386	\$11,617
Required Annual Income After Taxes	\$48,156	\$59,698	\$68,368	\$76,887
Annual Taxes	\$6,695	\$9,610	\$11,774	\$13,898
Required Annual Income Before Taxes	\$54,851	\$69,307	\$80,142	\$90,786

Sources: Living Wage Calculator, MIT (<https://livingwage.mit.edu/states/16>), 2023; 2018-2022 5-Year Estimates ACS

Table D3. Required Annual Income for Idaho Family by Family Size and Characteristics with 2 Working Adults

Items	0 Children	1 Child	2 Children	3 Children
Food	\$8,591	\$10,702	\$13,802	\$16,795
Child care	\$0	\$6,879	\$13,757	\$20,636
Medical	\$6,436	\$9,144	\$9,070	\$9,223
Housing	\$9,616	\$12,086	\$12,086	\$17,023
Transportation	\$9,561	\$11,691	\$14,058	\$15,073
Civic	\$5,801	\$6,480	\$8,835	\$7,025
Other	\$8,020	\$9,463	\$10,386	\$11,617
Required Annual Income After Taxes	\$48,156	\$66,576	\$82,125	\$97,523
Annual Taxes	\$6,695	\$11,207	\$14,969	\$18,893
Required Annual Income Before Taxes	\$54,851	\$77,783	\$97,094	\$116,416

Sources: Living Wage Calculator, MIT (<https://livingwage.mit.edu/states/16>), 2023; 2018-2022 5-Year Estimates ACS



**Workforce and Family
Experiences in Idaho's ECCE
Tribal Communities: Access to
Care, COVID-19, and Healing
from Trauma**

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Introduction

There are five federally-recognized Tribes with sovereign land within the state of Idaho: the Shoshone-Bannock, the Shoshone-Paiute, the Coeur d'Alene, the Kootenai, and the Nez Perce Tribe.¹ Based on U.S. Census data from 2020, there are an estimated 25,600 residents of Idaho identifying as American Indian or Alaska Native (AI/AN) alone, representing between 1 – 2% of Idaho's state population.²

Within the past few years, Idaho's Tribal early care and education providers and families with young children have faced the continuing impact from the pandemic, along with barriers in accessing care, difficulties in workforce recruitment and retention, and increased operational costs, among others. Though the solutions to these challenges may at first glance appear similar between Idaho's Tribal and non-Tribal communities, there are unique considerations for programs that provide care for Native families, necessitating a nuanced approach for programs that support early care and education for this population.

Methodology – Survey and Interviews

The goal of this needs assessment was to gain insight from childcare providers, administrators, and Native parents/guardians about their experience with early care and education in Idaho. To obtain this information, data was collected through mixed-methods approaches. First, information was gathered via two survey administrations in August through November 2023. These surveys were administered over the phone with participants and/or were completed online. The first survey focused on Idaho families with young children under the age of 6. The second survey was administered to both early care and education providers and families with young children.

From the broader survey sample, a subsample of 85 educators and 154 parents/guardians were selected for this analysis. Selection criteria included educators who identified as Native American or Alaska Native or who indicated they serve Native children, and parents or guardians living on or near Tribal lands. Survey participants did not receive an incentive for their survey response.

Next, from August through November 2023, eleven educators and administrators who either work directly with Tribal families or who work in early childhood roles that support Tribal communities participated in a single recorded 60-minute interview with the evaluation team. The interview questions explored perceptions of the impact of the pandemic, barriers to early care and education for Native families, and the impact of trauma within Tribal communities. The importance of culture, traditional healing, and inherent strengths of Native communities were also highlighted within the interviews. Participants were provided with an e-gift card following the interview in appreciation of their time.

Analysis

Based on survey responses, few participants initially identified as AI/AN parents or guardians of young children within the racial demographic question. As a proxy, geographic location was used to group families with young children who either live within or near Tribal lands. Once identified and grouped using a location approach, the sample was made up of 154 responses from parents and guardians living within reservations and/or neighboring communities.

¹ <https://www.justice.gov/usao-id/tribal-lands>

² <https://data.census.gov/profile/Idaho?q=040XX00US16#race-and-ethnicity>. Please note the US Census data may undercount the population of Native American residents in Idaho, and this information is presented as an approximation.

Due to the wide range in sample sizes across the regions, an aggregate approach was taken in the analysis of the parent/guardian data (see Table 1). Responses were verified through data cleaning, and descriptive analyses were applied to interpret the data.

Table 1. Geographic areas and corresponding sample size (n)

Geographic Area	Associated Tribe	Sample Size (n)
Region 1	Coeur D'Alene	24
Region 2	Shoshone Paiute	13
Region 3	Shoshone Bannock	69
Region 4	Kootenai	2
Region 5	Nez Perce	46
Total:		154

For qualitative interviews, all interview recordings were professionally transcribed. Transcripts were de-identified and analyzed by the evaluation team. Primary themes were developed, validated, and interpreted before analysis. Once the drafting process was complete, interview participants were given the option of member checking (e.g., reviewing the report to confirm accuracy and validate findings) in January of 2024, and were provided with an e-gift card in acknowledgement of their time.

Key Findings

The following list highlights the primary findings taken from the survey and interview outcomes, grouped by topic.

The Continued Impact of COVID

- Considering the disproportionate loss of life for Idaho's Tribal communities, programs and families experience ongoing concerns of contracting or transmission of COVID.
- Isolation and stay-at-home orders may have led to declines in academic and social/emotional learning for Native children.
- Vaccine hesitancy may impact recruitment and/or retention for the ECCE workforce.
- Families report increased stress and difficulty making ends meet due to the pandemic.
- Providers have experienced increased job stress as a result of the pandemic.
- COVID-related funding was especially important for Tribal programs, who utilized the funds to improve facilities and cover the increased cost of supplies.
- Tribal communities have rallied to provide access to cultural ceremonies and traditional healing through virtual events to ensure safety.

The Impact of Trauma

- Native children and families experience trauma from both current and historical events, including traumatic experiences with boarding schools, hostile educational systems, and the recent pandemic.
- Native families contend with behavioral health, socio-economic, and financial disparities due to systemic bias and lack of access to needed supports.
- ECCE providers and programs utilize a multi-generational approach to support children and their families who are dealing with trauma.

- Challenges with recruitment and staff coverage lead to increased stress and burnout for the Tribal ECCE workforce. Low pay and long commutes increase these challenges.
- Traditional teachings, ceremony, and connections to culture for Native families are profound ways to address trauma and promote healing in a multi-generational way.
- To promote culture and connection, ECCE programs employ Native teachers who focus on culture and language instruction in the classroom.
- Idaho's Tribes are continuing to build ECCE infrastructure and are committed to the health and wellbeing of Tribal families.

Access and Barriers to ECCE for Tribal Communities

- Access to childcare on Tribal lands may be limited, though this varies by program.
- Childcare may be unaffordable for many families, or may be located far away.
- Tribal childcare programs may be understaffed and must contend with challenging recruitment and retention landscapes.
- Some families may have difficulty finding a care provider and may not have access to necessary resources to overcome barriers to care.
- Many families feel that their child will be ready for kindergarten, though not all families intend to send their child to preschool and/or kindergarten programs.
- Families prioritize social/emotional learning and support for their children, safe and healthy environments, and support for cognitive and academic learning when seeking out childcare providers.
- Curriculum, cost, outdoor environments, and availability are important factors for parents who seek out preschool providers.

Quantitative Findings

Demographics³

For survey responses related to Tribal communities, a sub sample of 85 providers and 154 families were identified within the larger survey sample. The following information describes general characteristics found within these provider and family groups.

Location

Of the 85 providers who responded to the survey and identified as either Native and/or indicated that they serve Native children, about 24% worked in Bannock County, while 17% reported working in Twin Falls. Bonneville (13%), Ada (9%), Canyon (7%), and Kootenai (4%) were the next most frequently reported counties. The remaining 26% of respondents who provided their work location ($n = 18$) were spread out across the state in various counties.

Of the 154 families who were located in tribal communities, about 25% resided in Idaho County, with 19% in Bannock, 14% in Power, 12% in Kootenai and Bingham, respectively, and 8% in Owyhee County. An additional 10% of families ($n = 15$) were located in Nez Perce, Benewah, Boundary, and Clearwater counties.

Age/Gender/Income

For provider respondents, approximately 94% identified as female. The most frequently reported age range was 45 – 54 years of age (32%), followed by 35 – 39 (18%), 55 – 64 (14%), and 40 – 44 (11%). Overall, a majority of the providers who are Native and/or who provide care for Native children were over the age of 35.

For survey respondents with young children who were identified as living on or near tribal lands, the majority indicated that they are between the ages of 18 and 35. Most reported that they were either between the ages of 35 – 39 (32%), between 30 – 34 (26%), or between 18 – 29 (19%). The gender diversity of parent respondents was mixed, with 60% identifying as female, 39% as male, and 1% as nonbinary.

Parents in tribal locations were also asked about their household income. About 29% were in the \$75,001 - \$100,000 range. Approximately 22% reported household income over \$100,000, and 20% indicated income of \$50,001 – \$75,000. The remaining 25% reported income up to or less than \$50,001, with about 4% preferring not to provide this information.

Education/Career

Providers were asked to describe both their experience in early care and education and details about their current work setting. A majority of respondents had 7 or more years of experience in the field (75%), followed by 4 – 6 and 1 – 3 years (11%), respectively, and lastly less than 1 year of experience (3%). In terms of their level of education, about 23% reported having attended college courses, with 21% having obtained a four-year college degree, 20% holding a graduate degree, 11% having obtained a two-year degree, and 11% having attended a trade or technical school. About 9% had graduated high school but had not attended higher education, 3% reported some graduate school, and the remaining 3% indicated that they had less than a high school diploma/GED. Overall, 86% of the provider sample had obtained post-secondary education.

In regard to their workplace, 56% of providers reported that they work in a licensed care center. A school-system based preschool (14%), registered family childcare (8%), Head Start (8%), and privately owned preschool (5%) were the next most frequently

³ Please note that the survey sample size varies between demographic items, as not all participants responded to each question. All demographics reported in this section represent at least 80% of the overall sample of 85 provider and 154 family respondents.

reported options. Of the remaining 9%, about 1% of providers indicated that they work in a city or unregistered family daycare. In terms of their job roles, about 49% of respondents worked as administrators or directors, with 21% as teachers, and 12% as child care providers. About 5% identified as family child care providers. Additional selections included assistant teacher, early intervention provider, teaching aide, and support staff.

For providers who responded to questions about diverse learners in their programs, approximately 83% reported that their program serves children who are either bilingual and/or learning English as a second language, though the majority (75%) indicated that their classrooms are made up of less than 25% of diverse language learners.

Provider Perceptions

As part of the survey, tribal providers were asked to share their perceptions of the impact of the recent pandemic, the needs and priorities of the families that they work with, and their own perceptions of self-efficacy and intent to remain in the early care and education field.

Impact of Covid and Trauma

When asked about how they were affected by the pandemic and the impacts of trauma as an early childhood care and education provider, providers who are Native or who serve Native children and families were most likely to experience increased staffing challenges (53%) and challenges with child behavior (52%; see Figure 1). Providers also noted increased stress and anxiety (42%), increased cost of rent or utilities (42%), along with needing to put in more hours or experiencing extra work (32%) and feeling that there are more children who need care (24%). Conversely, about 18% felt that there were less children who needed care. The remaining responses were divided between additional challenges in the classroom, other types of impact, and/or no perceived impact.

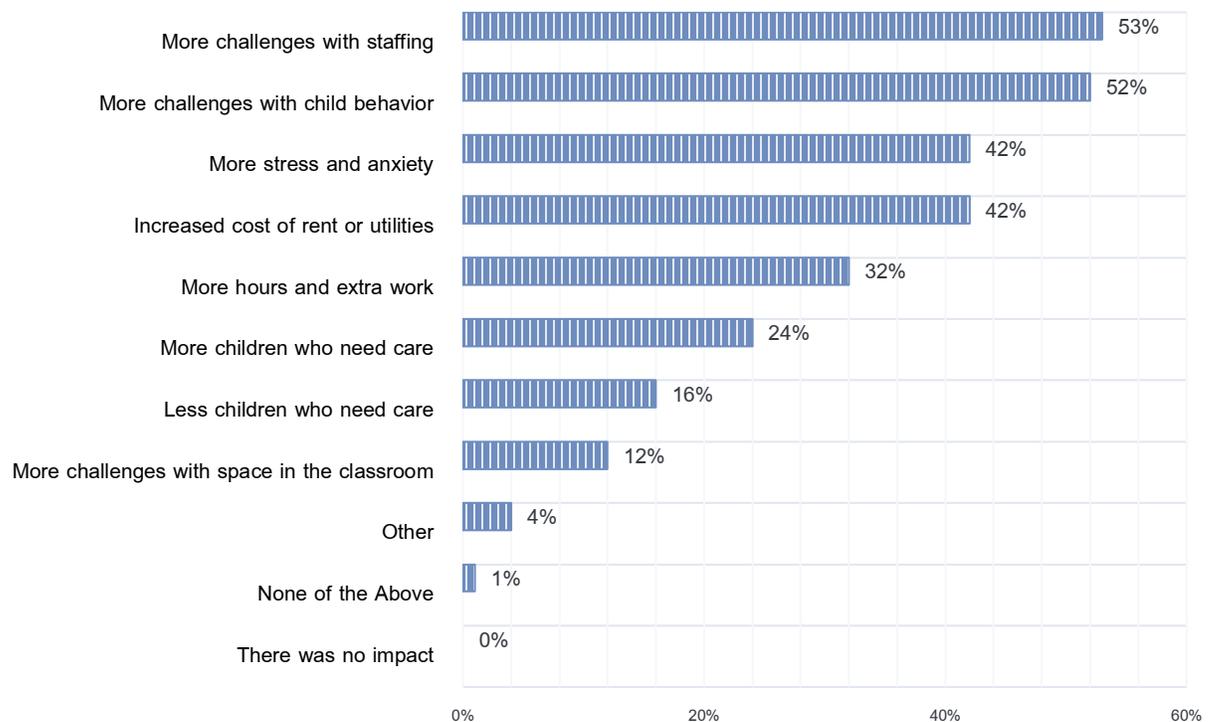


Figure 1. Percentage of providers experiencing job-related challenges as a result of the pandemic (*N* = 85)

Some of Idaho's Tribal early care and education programs received funding related to the pandemic, to support the increased costs of providing care and support operations during times of closure and low attendance. Providers who responded to the survey were asked about the impact of those funds on their program. A majority of providers who serve Native children felt that the pandemic-related funding that their ECCE facility received was very or somewhat helpful, while almost a fourth of respondents (22%) reported that their program did not receive pandemic related funding (see Figure 2). An additional 1% reported neutral feelings about the funding's impact, while 5% were unsure.

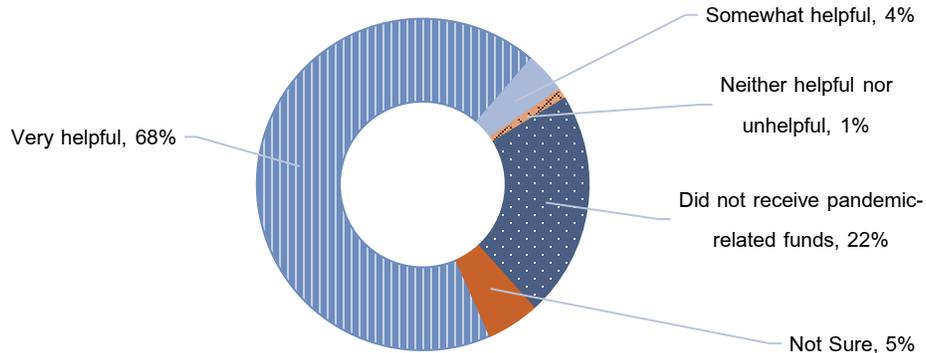


Figure 2. Helpfulness of COVID-19 Relief Funds (*N* = 81)

Of those who received pandemic related relief funds, a little over half (51%) felt that it was enough, while 35% felt it was not enough and 14% were not sure (see Figure 3).

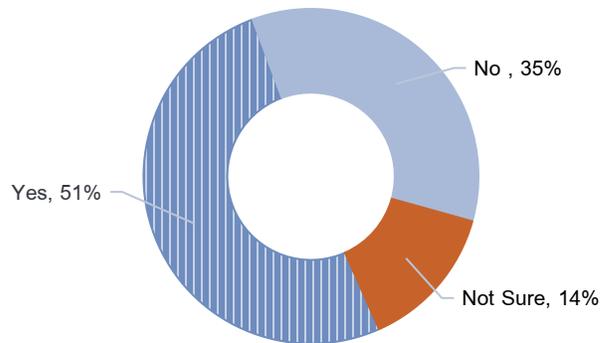


Figure 3. Percent of respondents who view the pandemic related relief funding was sufficient for their ECCE facility (*N* = 63)

When asked what would have been the best use of additional funds at their facility/program, providers who serve Native children were most likely to indicate “help with the costs of doing business” (20%), and pay/increased pay for staff retention (20%; see Figure 4).

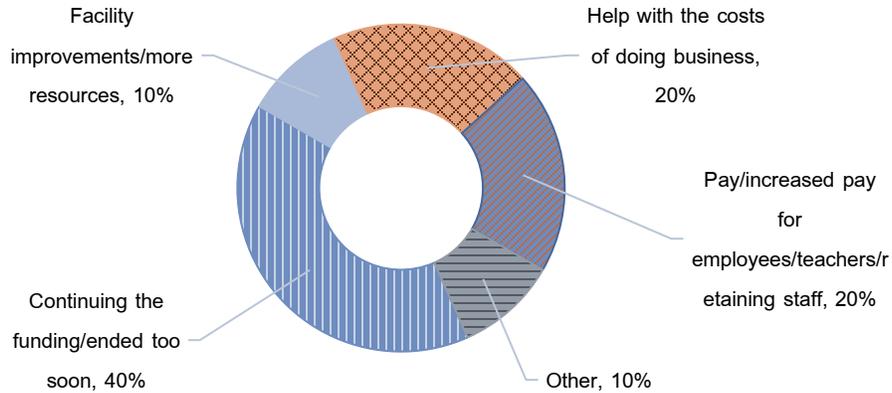


Figure 4. Providers' views of the best use of additional funds ($N = 10$)

"Other" open ended text responses included:

- *Employee wages to fill more slots*
- *Food, snacks*
- *Helping pay rent, give parents a sliding scale on their income, pay for curriculum and upgrade equipment*
- *Increase staff pay*
- *More staff*
- *Pay staff more money and for special education*
- *Supplies, items for children, books, teacher and staff wages*
- *Wage increase, and if it was allowed to help with improvements/updates*

Self-Efficacy and Intent to Stay

Providers were asked about their degree of confidence in their own skills and their feelings toward their job. First, providers answered questions about their ability to build a positive learning environment and to engage in effective classroom management skills. About 88% out of 80 respondents strongly agreed that they were confident in their ability to create a positive learning environment for the children in their care, with 12% feeling somewhat confident. Next, about 70% out of 78 providers strongly agreed that they were confident in their ability to manage behaviors in a positive and effective way, while 27% somewhat agreed. About 3% of providers somewhat disagreed, suggesting some concerns with classroom management skills or available supports.

In regard to how they feel at work, about 43% out of 80 providers reported that they were "bursting with energy" during their workday at least some of the time, with 28% feeling this way more often than not, 20% feeling this way frequently, and 6% always feeling this way. In contrast, 4% of respondents reported that they "never" felt as if they were full of energy at work. Next, providers were asked about their levels of enthusiasm toward their job. Results were mixed, with 29% out of 79 reporting that they felt enthusiasm more often than not, 20% reporting sometimes feeling this way, 15% frequently feeling this way, and 10% "always" feeling enthusiasm. However, about 25% reported that they "never" experienced enthusiasm about their job.

Providers were also asked about whether they felt inspired in their jobs, and whether they felt pride in their work. Out of 80 responses to both questions, providers most commonly indicated that they were sometimes (26%) or more often than not (26%) inspired by their work, while 21% felt that they were "never" inspired. About 18% "always" felt inspired by their job. In regard to

feeling pride for their work, educators reported notably mixed opinions, with 38% “never” feeling pride, and 35% “always” feeling this way. As a final question, providers were asked about their intent to remain in their current positions. Out of 80 responses, a majority (61%) intended to stay in their current role, though about 26% were unsure of their plans. About 6% planned to retire, 4% intended to leave their position but remain in the field, and only 3% intended to pursue work in an entirely different field.

Barriers to Care and Community Challenges

When asked about the biggest challenge facing the children they serve, providers who are Native or who serve Native children were most likely to indicate: basic living needs (e.g. housing, access to food, parental supervision; 28%); making friends or learning how to interact with others (26%); or medical needs (21%; see Figure 5).

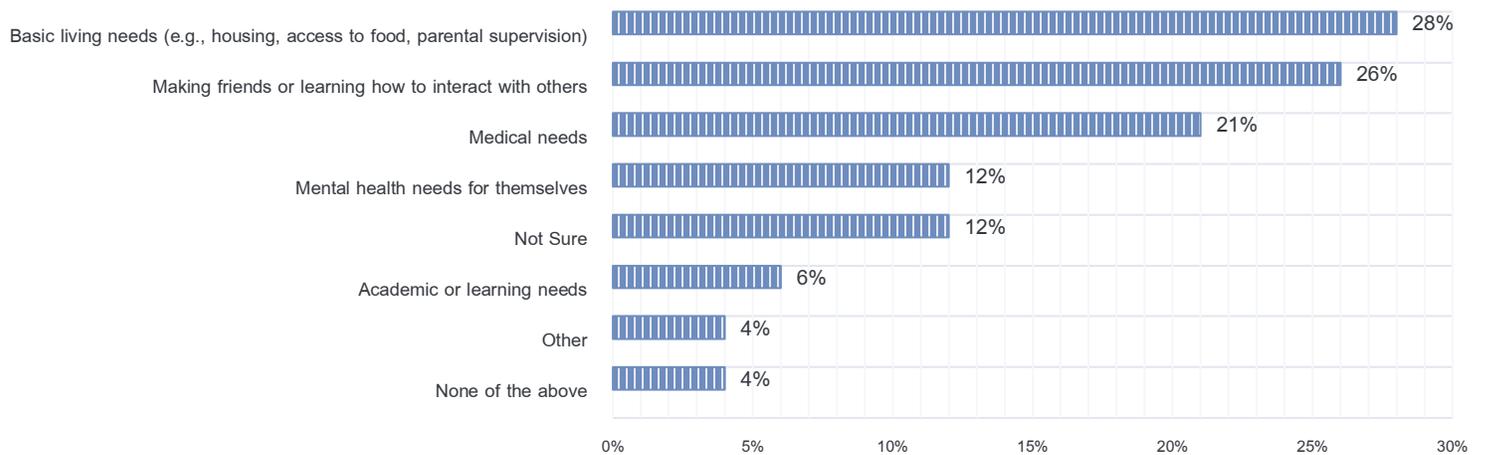


Figure 5. Providers' views of biggest challenge facing children they serve (N = 78)

Open-ended text responses included:

- *Emotional support at home because parents are stressed with expenses and have to work too much to make ends meet and are too tired when they get home*
- *Learning how to deal with life*

When asked if there are currently enough staff to cover the basic needs of their program, a little over half of providers indicated yes (55%; see Figure 6).

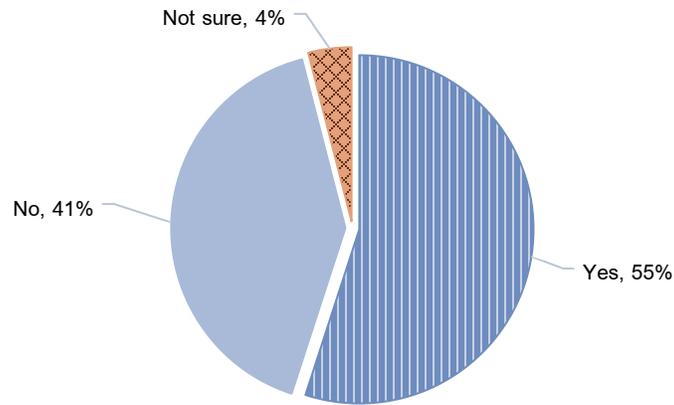


Figure 6. Respondents' views on whether current staffing covers basic needs of their program ($N = 51$)

When asked about the availability of ECCE slots in their communities, a strong majority (85%) indicated that there are not enough slots for the number of children who need them (see Figure 7).

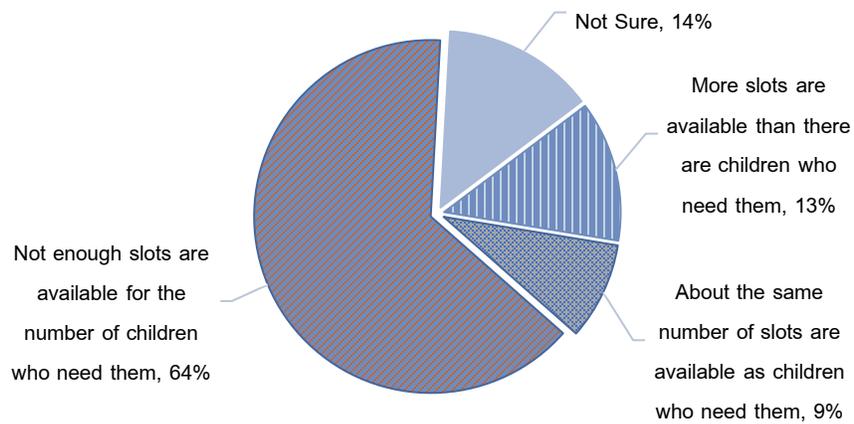


Figure 7. Providers' views on availability of ECCE in their communities ($N = 80$)

When asked about the cost of childcare for families in their area, 70% of providers responded that no, they do not think that it is affordable (see Figure 8).

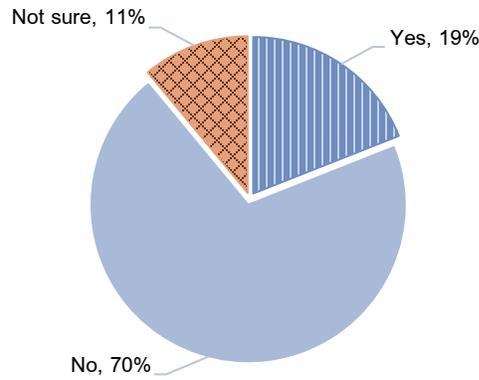


Figure 8. Providers' views on affordability of ECCE services in their area (N = 81)

Family Perceptions

Impact of Covid on Families

Respondents reported being impacted by the pandemic in a variety of ways. They were most likely to report experiencing increased stress and worry and difficulty making ends meet (see Figure 9).

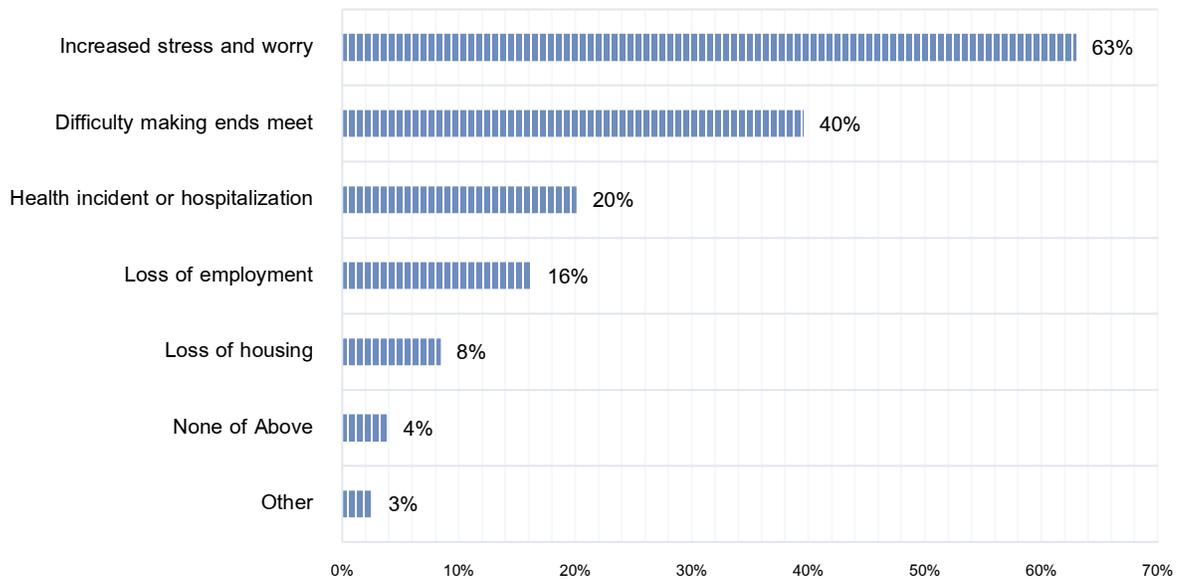


Figure 9. Percentage of respondents indicating the ways in which they personally were impacted by the pandemic (N = 154)

Next, parent respondents who live in tribal communities indicated that their children’s learning and development were impacted by the pandemic in a variety of ways. The most common impacts were challenges with school or learning and behavioral concerns (see Figure 10).

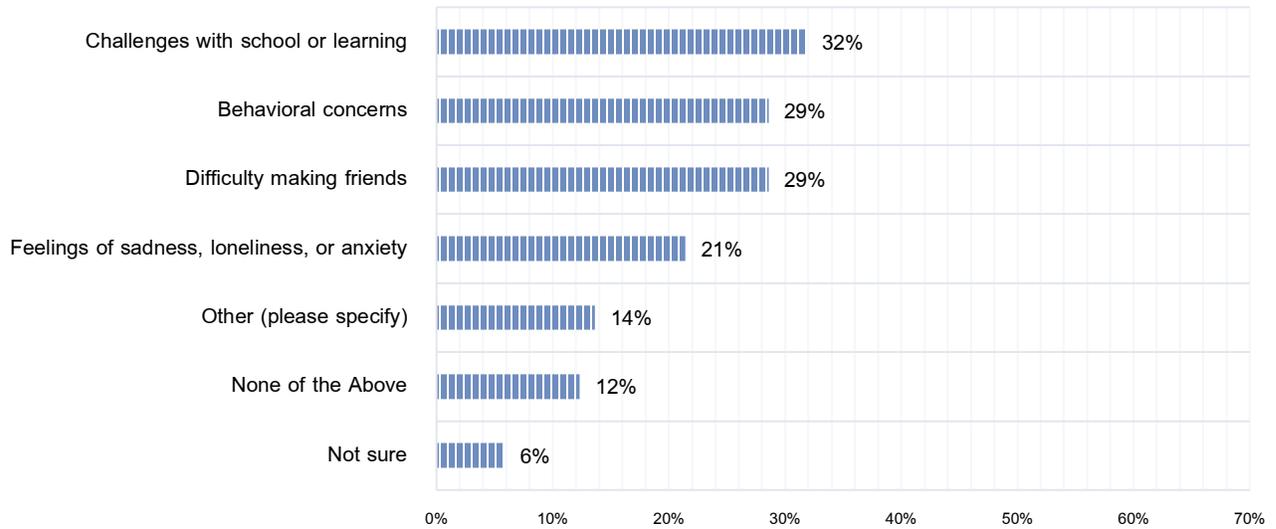


Figure 10. Percentage of respondents indicating the ways in which their children were impacted by the pandemic (*N* = 154)

Parent respondents also reported on how the pandemic impacted their communities. They were most likely to report that their communities experienced mental health struggles, loneliness and isolation, and food insecurity (see Figure 11).

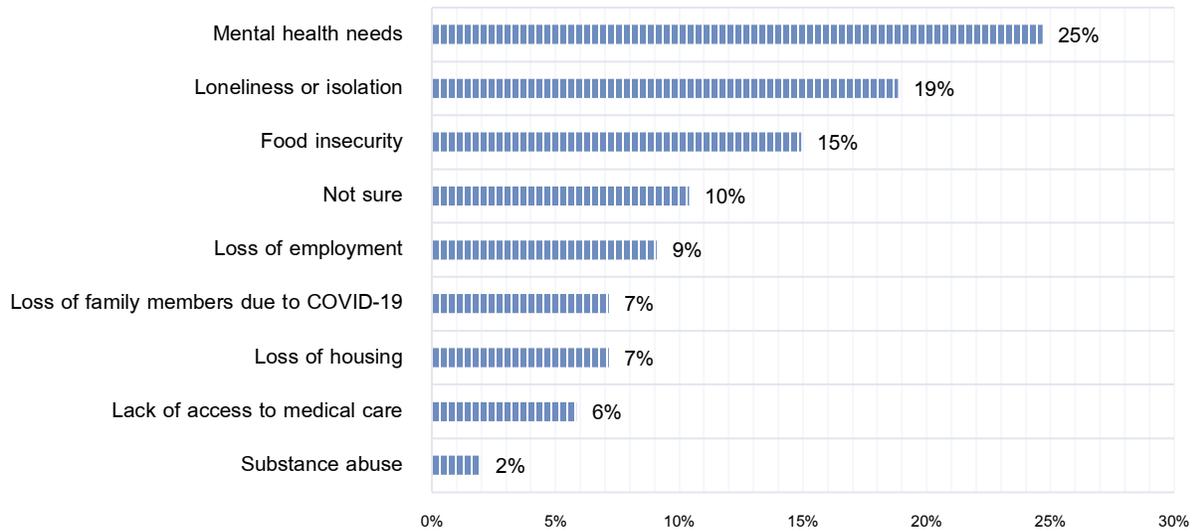


Figure 11. Percentage of respondents indicating the ways in which their communities were impacted by the pandemic (*N* = 154)

Family Strengths and Coping Strategies

Parent respondents reported using a variety of strategies to cope when their family faces problems, including talking together about what to do, working together to solve problems, drawing on strengths, and staying hopeful even in difficult times (see Figure 12).

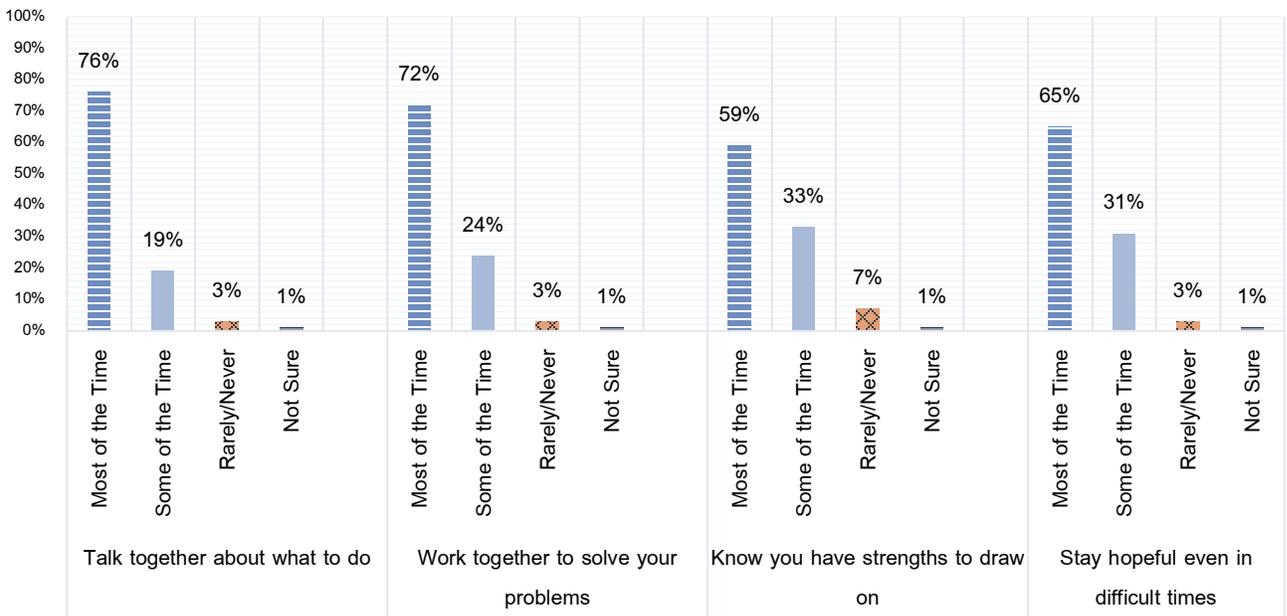


Figure 12. Reported likelihood of utilizing each of the following strategies when family faces problems ($N = 153-154$)

Priorities for and Access to Care

Families in tribal communities were asked to rate the level of importance of a variety of factors when choosing an early care and education program in Idaho. Factors that respondents perceived to be most important included providing environments that support social/emotional development, provides a safe and healthy environment, and support cognitive/academic development for their child (see Figure 13).

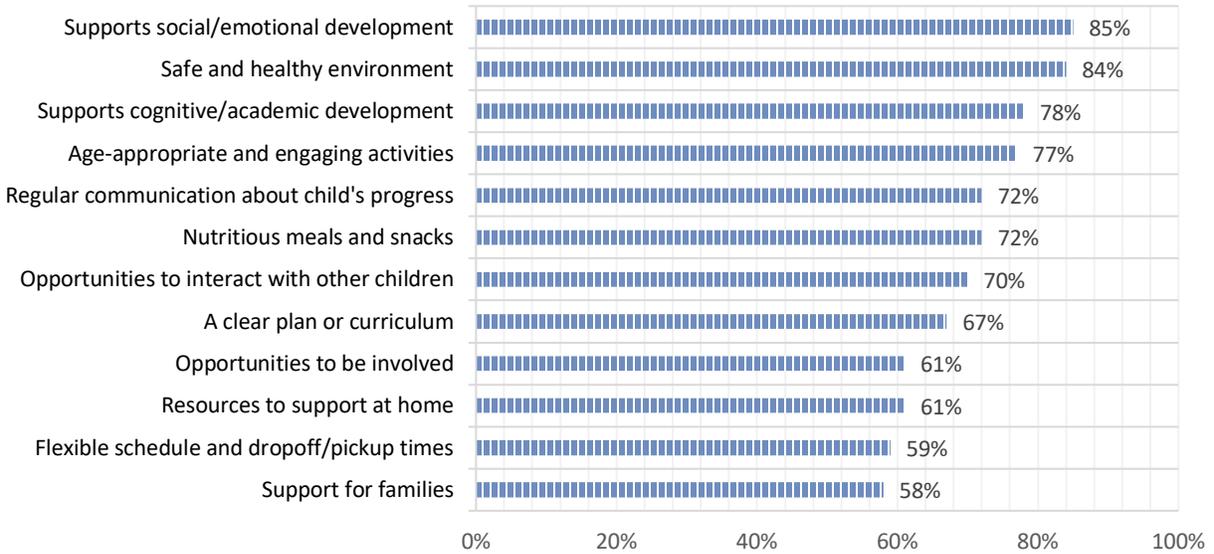


Figure 13. Families' priorities when choosing an early care and education program (*N* = 152-153)

Next, families in Idaho's tribal communities reported utilizing a wide range of resources to find information about helping children learning and development; in particular, family and friends and the doctor's office or health department were the most popular sources, followed by a childcare or preschool provider, resources such as libraries or magazines, and online/social media searches (see Figure 14).

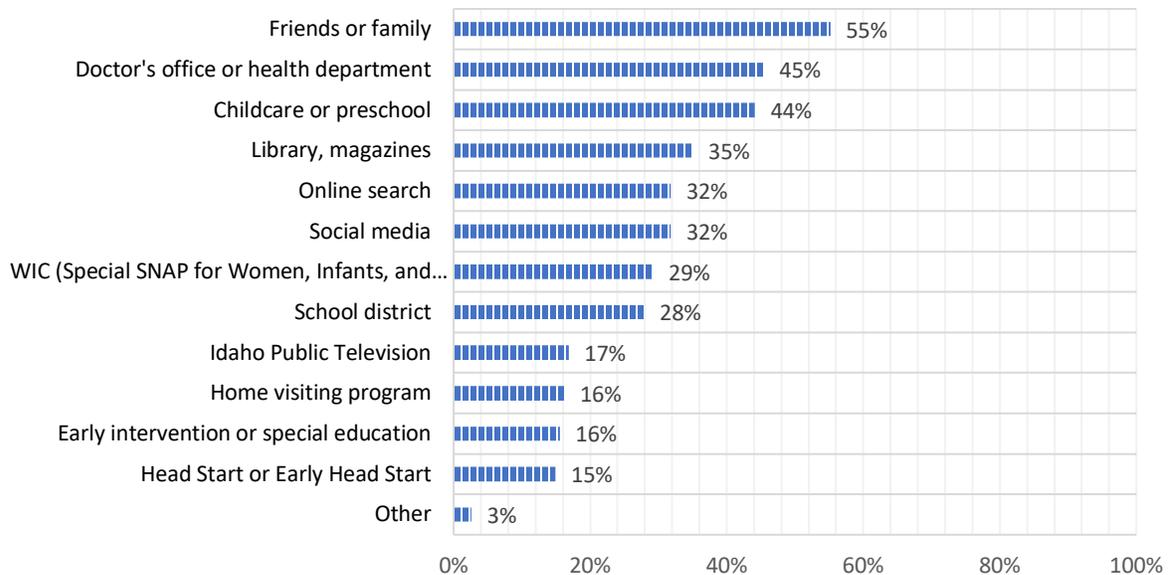


Figure 14. Resources families have used to find information about helping children learn and grow (*N* = 154)

Family Perceptions of Preschool and Current Care Settings

When asked to rate the importance of preschool for their child or children, most respondents considered preschool to be very or somewhat important (see Figure 15).

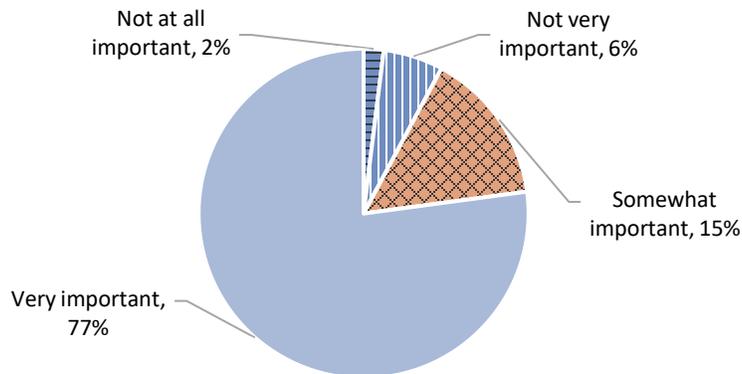


Figure 15. Perceived importance of preschool ($N = 154$)

When asked about which factors were most important to them when selecting a preschool program, curriculum, price, and indoor/outdoor environments were among the most frequently selected factors (see Figure 16).

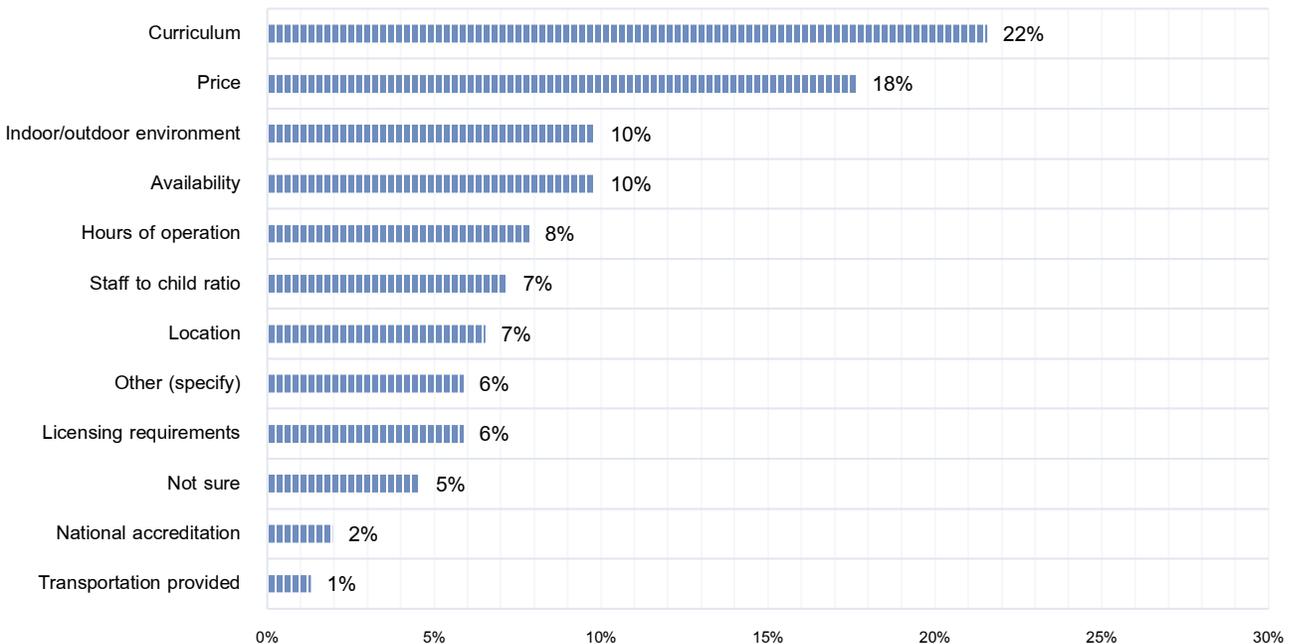


Figure 16. Percentage of respondents identifying factors that are most important when selecting a preschool program ($N = 153$)

Families were asked to describe their current preschool setting, in addition to whether they currently pay directly for their child's preschool care. About 71% of parents ($n = 109$) had already selected a preschool provider for their child, 21% had not yet decided on a provider, and 7% did not intend to send their child to preschool; less than 1% were unsure. For those families with a current provider, approximately 79% of parents currently pay or intend to pay for their child's preschool program, while 15% do not pay directly, and 6% were unsure. Out of 109 families with a current or selected preschool provider, 39% indicated that the program was a private program outside of their home, 22% were accessing care through a homeschool private program outside the home, 17% attended a public program run by a school district, 11% were enrolled in a faith-based program, and 1% selected a tribal program as the top 5 most common types of preschool providers.

Families were also asked about their perceptions of kindergarten, including preferences and perceptions of k-readiness. Out of 143 family respondents, approximately 93% intended to send their children to kindergarten. Of these families, 63% preferred full-day kindergarten, 29% preferred half-day, 4% had no preference, and 4% were unsure. The most preferred setting for kindergarten was a public school (49%), a private faith-based school (20%), and homeschool (14%) as the top three choices for parents. About 52% of families in tribal communities currently pay or plan to pay for kindergarten. Lastly, when asked about their child's k-readiness, about 97% expressed confidence that their child will have the skills necessary to succeed in kindergarten.

Barriers to Care and Experiences – Family Perspectives

Families were asked about barriers they have experienced in finding care that they need for their children. Survey respondents reported experiencing varying levels of difficulty finding high-quality early care and education in their area, and expressed mixed opinions about whether their care options meet their family's needs. Overall, about half of all families (31% and 21%, respectively) felt that it was somewhat or very difficult to find high quality care for their young children. In contrast, about 42% of families (26% and 16%) did not experience significant difficulty in securing needed care (see Figure 17). Further, about 76% of families felt that the overall options available for early care and education met their needs, in general.

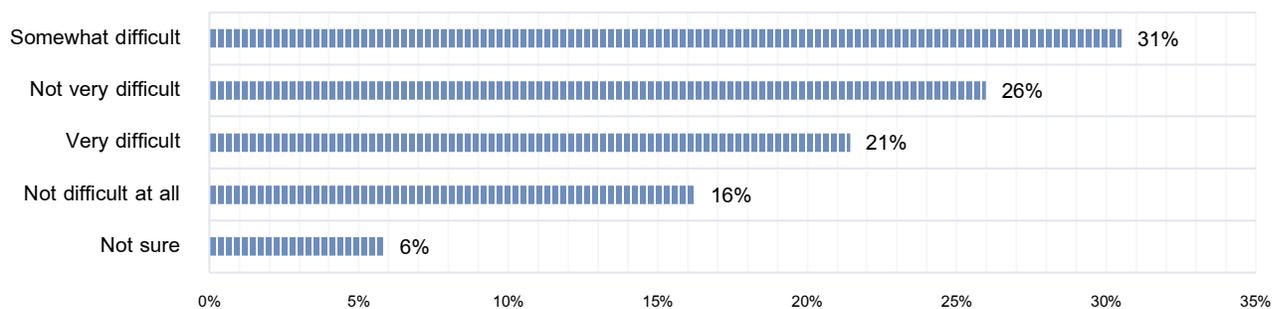


Figure 17. Respondents' views of the difficulty finding high-quality ECCE in their area ($N = 154$)

When asked to indicate the biggest challenge they face in accessing early care and education services for their children, a majority of respondents were most likely to select affordability of services, followed by quality of services, trust in educators, and hours of operation/lack of time (see Figure 18). When asked if parents felt that they had access to resources to overcome these obstacles, a significant majority (56% and 17%, respectively) of families were unsure about or did not feel that they knew of any programs or resources that could help them.

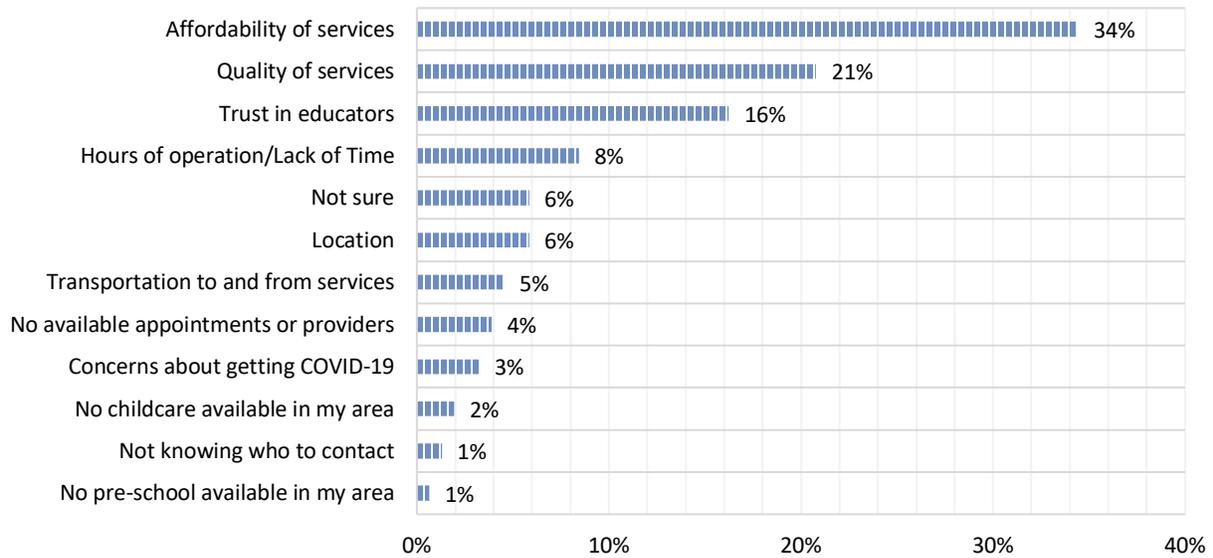


Figure 18. Respondents' views of their greatest challenge in accessing ECCE services (*N* = 154)

Parents were also asked about how childcare has impacted their employment in the past year. About 42% of respondents indicated that they or someone in their family have had to leave a job, not take a job, or greatly alter their job because of childcare.

Lastly, parents were asked about the support that they have sought for their children in the past 2 years. Families located on or near tribal lands were most likely to seek health services, childcare, full-day kindergarten, WIC, and newborn/infant screen as the top 5 programs and services for their young children (See Figure 19).

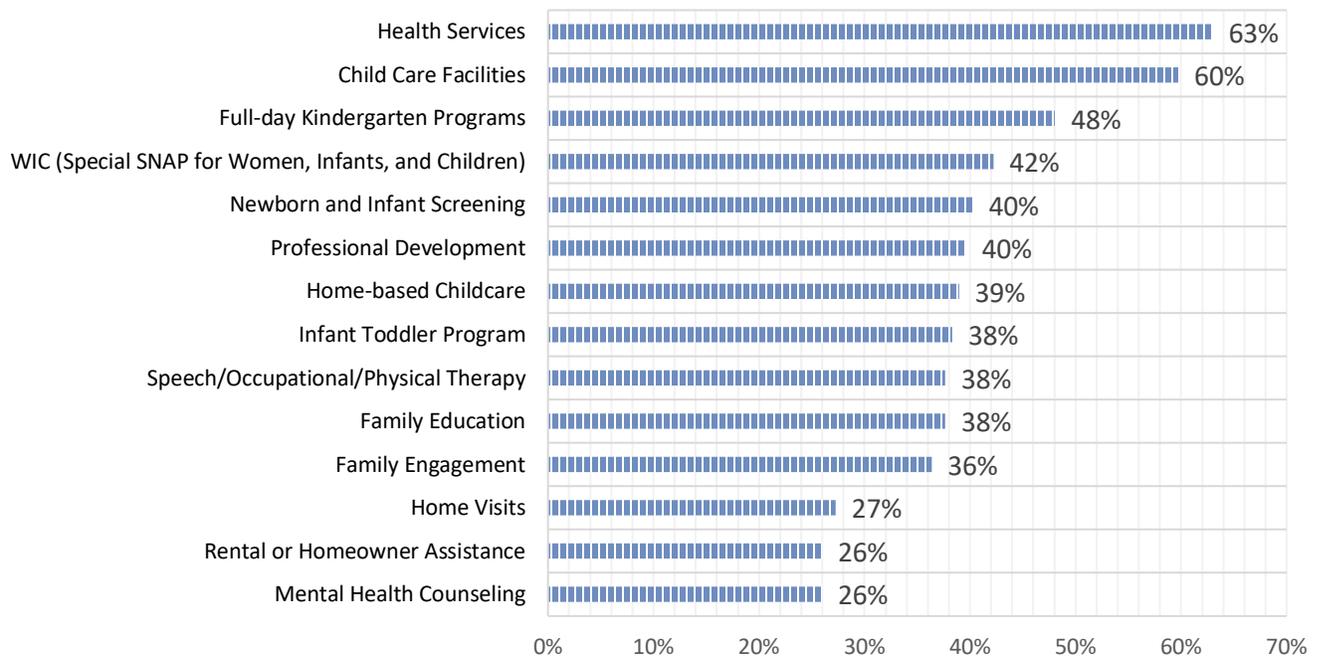


Figure 19. Areas of support sought out by families for their children ages 0-5 (*N* = 153)

Qualitative Brief 1 – The Impact of COVID-19

This brief outlines the impact of the COVID-19 pandemic on Idaho's tribal communities, tribal ECCE programs, and Native children and families. It explores the community strengths and practices that have supported tribal communities through the pandemic, and the availability and impact of the COVID-19 relief funds on childcare programs, including any gaps that remain.

The information provided in this brief was obtained via interviews with 11 ECCE administrators and providers, along with 85 survey responses from educators and staff who either identify as Native, provide care for Native children, and/or hold administrative roles that support Tribal communities.

Impact of COVID-19 on Idaho's Tribal Communities

Interviewees from state and tribal roles described the impact the COVID-19 pandemic has had on many of Idaho's tribal communities. They gave examples of how the grief, loss, and disruption caused by the pandemic has had ripple effects on almost all aspects of life, from the inability to gather as a community for events and ceremonies, the reduced availability of the caregiver network, caregivers' inability to transport children to and from school, and the overall sense of isolation experienced by community members. One of the most devastating impacts tribal communities faced was the loss of community elders who were spiritual leaders and keepers of language and cultural practices. According to one tribal administrator:

"It affected our community because it took a lot of our elders. I myself had lost [family] and then a lot of elders here on our reservation had succumbed to COVID or due to COVID complications. Not only our elders, but our middle-aged, too. And a lot of our elders are our language speakers. Our cultural spiritual leaders, a lot of them had passed due to COVID. And I think what really hit worst was the fall of 2021 is when majority of our older tribal people had passed due to COVID."

As a result of this cultural loss, many tribal communities have renewed efforts to teach language and cultural practices in educational settings. As one administrator remarked:

"And so, now, moving forward, almost two years coming, it's who do we turn to for our language? We do have a language program here, we do have a couple elders. We have one elder that's employed that does the [language instruction] for us and so we're really holding on and I know our tribe is really trying to get as much knowledge and to get our language so it can continue for the future. And with our early childhood program, with our childcare and our Head Start program ..., my goal as administrator is to get more of our [language] incorporated into our curriculum, from starting with our toddlers all the way up to our afterschool school age so they know the simple commands, they know the colors, they know how to say 'chair' or the proper names of people ... And so, that's one of my goals too is to incorporate the language for our children to start them off. Because, like I said, the COVID really impacted [so now we] don't have a lot of elders with the language."

Deepening Inequities

Due to existing inequities, many interview participants felt that the pandemic had a greater impact on Idaho's tribal communities. For example, due to the rural location of many tribal lands, supply chain disruptions, or disruptions in availability and use of services, were felt more acutely. Similar to other Native communities, existing inequities in healthcare access worsened the disproportionate rates of illness and death. One state administrator reflected on this:

"And so certainly a pandemic that magnified community issues certainly magnifies preexisting issues in a greater way ... I understand that tribal members and tribal residents experienced greater challenges due to those issues and especially things like supply chain problems where they may have had more access issues. And in Idaho, our tribal members typically live on more rural areas, which made it even harder to gain access to needed supplies and resources."

Vaccine Hesitancy

Interviews with tribal administrators and providers revealed differing views around the COVID-19 vaccine. According to one administrator, “I did feel like the community was a little divided. The one that was against the COVID vaccine, the ones that were for the COVID vaccine, but nothing too serious.” Another provider felt that the vaccine requirement led to increased turnover in their facility:

“I know we lost a lot of people when they mandated the COVID vaccine. That was when we lost a lot. So, they don't mandate it anymore. So that's a good thing ... And I took it just because I didn't want to lose my job. But I will say probably again, if they required it again, I'd probably leave too.”

Another tribal administrator remarked, “I feel like we should not forget that COVID is still around. I think that we still need to continue to be watchful and I think to impress upon everybody to get the vaccine, I think it's still a big thing. I think they need to really push that continuously.”

Impact on Idaho's Tribal ECCE Programs

Administrators and providers working in or overseeing tribal ECCE programs described the impact the pandemic has had on their programs.

Enrollment and Attendance

Tribal administrators and providers described how the pandemic resulted in enrollment and attendance challenges in their ECCE programs. This was due to things like quarantine requirements and families being hesitant or fearful to send their kids to childcare/preschool. According to one administrator, “Things have changed, but I remember it was 14 days or something like that. And then they wouldn't test positive. And then at the end of the 14 days, they would finally test positive so they had to be quarantined another 14 days.” Administrators noted that most programs are back to operating without restrictions; however, they are cognizant that new waves of the virus may change that status. Relatedly, one provider commented that, now that mask restrictions have been lifted, “everybody has been getting a lot sicker” due to viruses coming back that had previously been suppressed. This provider went on to say, “I think our bodies were used to not having anything and not being around much of anybody. And now that we're all interacting with each other again more frequently, all of the bacteria and viruses are really attaching to everybody and it seems like they're touching everything.”

Staff Turnover/Retention

One of the biggest challenges tribal childcare programs faced during the pandemic was staff turnover and retention, a challenge that is still ongoing. As one provider stated, “It's like there's no workers and it's hard to get people to stay, there's a lot of rollovers. When I get temps in, they'll last maybe a month, sometimes not even two weeks.” This challenge with staff turnover and retention is discussed in more detail below and in the *Access to ECCE* brief.

Impact of COVID Protocols

Tribal administrators described the COVID protocols and restrictions programs were required to put in place for both families and staff, including social distancing, masking, sanitation measures, and restrictions on entering facilities.

Connections and Relationships

The COVID protocols and restrictions programs were required to put in place tended to have a detrimental effect on the relationships between caregivers and staff. The inability to enter or move within an ECCE facility often limited the connections caregivers and parents were able to foster with each other. Similarly, when staff could not move freely within the building (or did not

feel comfortable), communication and collaboration among staff members suffered, resulting in an overall decrease in organizational communication. One administrator described the impact of this lost connection between staff and parents/caregivers:

“We just met the parents at the door and checked them in and then brought them to class. So that definitely was one way that COVID affected it because they felt like they didn't have that connection with teachers. They usually do greeting, they just had to greet the door, but they never greeted the teachers and got to know them and things like that. I remember even one parent commenting, I don't even know who their teachers are, which they did contact by phone. So, we did try to adjust things like that. Put your picture on there so they see what you look like, but it's just not the same. They just didn't have that connection.”

According to another provider, the mask mandate also had a detrimental effect on communication and learning: “I think it really affected kids' language. Especially with us teachers, we had to wear masks and it really, I think as a teacher, it really made it hard for the kids to understand us, what we were trying to communicate to them.”

Digital Divide

For tribal childcare programs that were shut down for a period during the pandemic, and/or for programs that pivoted to operating remotely, challenges emerged related to figuring out creative ways to provide services and addressing internet accessibility issues. Even if programs were able to provide devices for families to use at home, they sometimes still dealt with connectivity or accessibility issues, as described by one administrator:

“I was able to secure 1500 iPads for our community education program. So that was pretty cool. So, we were able to issue out iPad devices in our community, but again, they still had issues getting online and ... Even though they had a device, it was still an issue to get online to get internet access.”

Financial Burden

Some administrators of Tribal programs discussed how COVID-19 protocols or restrictions could pose a financial burden for programs. According to one tribal administrator, “I believe that the cost in the last couple of years for masks, children's masks, adult masks, sanitizing products probably did impact our program as far as cost.” Another administrator commented, “And when people did, and there was sanitation issues to shut down the building and bring in the cleaners, special cleanings. It was expensive.”

Trauma-Informed Approach

One Tribal administrator discussed how, prior to the pandemic, their school made efforts to become a trauma-informed school. This has enabled them to better support families through the intensified challenges brought about by the pandemic. Other programs were able to bring in counseling services for children who were struggling with grief and to make referrals for mental health clinics and other support services.

Impact on Native Children

In addition to describing the impact on their programs, interview participants described how they observed the pandemic's impact on Native children and families.

ECCE Closures and Shutdowns

When ECCE facilities shut down during the pandemic, whether it was for cleaning or deep cleaning or to reduce spread of the virus, parents and caregivers were left without childcare, affecting their ability to participate in the workforce. According to one provider:

"I know at one time when I was working there, COVID was going around crazy and we did shut down, I think we shut down for a week so we could deep clean the whole building and sanitize everything. I think that was probably a challenge on its own, because there was no childcare for the kids or anything else. So, that left parents without childcare and whatnot."

Academic and Social/Emotional Impacts

Tribal administrators described how the isolation and restrictions Native families experienced during the pandemic affected some children's academic or developmental progress. According to one interview participant:

"... particularly even this last year, I think we received 24 kindergartners and we had a lot that were just very, very behind ... it just seemed like they were a lot farther behind than what we're used to. And I contribute that to COVID and not having those experiences and getting out there, just being stuck at home and probably not being around as much print and things like that."

These challenges were worsened by internet accessibility issues in some areas. According to one interviewee: "a lot of our families on our reservation didn't have internet service, so they got really behind on the education success of their kids as it pertained because a lot of their homework and things were online."

In addition to academic challenges, some Native children experienced social/emotional delays during the pandemic. As one interviewee remarked:

"And I think being isolated for a couple of years, even though they may have been around family and stuff, that's more familiar for them. So, to come back into a school setting and be able to interact with all their different peers and stuff has been a challenge. We could tell their emotional regularity is at a low, so that's been a challenge for them."

Delayed Intervention

According to one interview participant, tribal social service programs received fewer reports of child abuse or neglect during the pandemic and as a result, there may have been delays in intervention services. For parents or caretakers who had children at home during the pandemic, outreach to families was limited and as a result, any early intervention may have been delayed or missed. It is important to note that many of these COVID-19 related challenges faced by Native children and families are not unique to tribal communities and have been experienced across the US and worldwide as a result of the pandemic.

Supportive Community Strengths and Practices

Tribal administrators gave examples of the ways in which their communities leaned into community strengths and cultural practices to support one another during the pandemic. In one community, a monthly prayer circle was organized for anyone who wanted to attend. Another school renewed their focus on teaching traditional ways of knowing and healing. Another community made it a priority to promote COVID awareness, testing, and support, including providing temporary housing to limit the spread of the virus. Another community found creative ways to adapt, such as creating "drive-by" events, to maintain a sense of community.

COVID-19 Relief Funds: Availability and Impact

Interview participants from state and tribal roles noted the COVID-19 relief funds that were available to tribal communities and tribal ECCE programs, the impact of those funds, and the gaps that remain. They gave examples of the types of COVID relief funds received at the community level, including staffing support for a local health clinic, and funding distributed through the Tribal Council that was allotted to community programs, as well as for individual disbursements. Many of their examples were at the program level, including American Rescue Plan Act (ARPA) funding, Coronavirus Aid, Relief, and Economic Security Act (CARES) funding, and others that were not specified. One state administrator mentioned that, for relief funds distributed through Head Start, there was a relatively straightforward application and distribution process that enabled programs to use the funds in a flexible way.

Tribal ECCE programs used the program-level funding in a variety of ways, including providing hazard pay for staff, investing in technology for remote learning (although internet connectivity was still a barrier), offsetting the cost of COVID-related safety and cleaning supplies, financially supporting efforts to increase aspects of culture in the classroom, and supporting families who were struggling with resources such as food boxes and school supplies. One provider mentioned that their program was able to subsidize the cost for parents: “I guess a great thing that came out of [COVID] though is they did funding for childcare, where the parents didn't have to pay for childcare to send their kids there.” State administrators highlighted the flexibility Tribes were given in applying the funds and observed them being used to support the workforce and families, purchase PPE and COVID Supplies, and upgrade facilities such as HVAC systems. However, one interview participant noted that backorders and supply-chain disruptions made it difficult to “spend down” the money at times. They noted that a longer timeframe during which to spend the money would have been helpful.

Generally speaking, providers and administrators in tribal and state roles viewed the funds as very helpful. One provider remarked, “With us as employees, if we got sick there was COVID funding for us, where we didn't have to use our PTO or stuff like that. So, we got COVID pay.” Another tribal administrator commented that “The relief was amazing,” while another state administrator remarked, “I would say it was impactful in a really positive way for sure.” Another tribal administrator referred to the funds as a “major, major help.”

Remaining Gaps

Despite the many uses and benefits of the COVID-19 relief funds, gaps remain. According to one state administrator, the most prominent gap is staffing: “It's not a surprise to anybody, I mean, staffing [now] is post COVID. We haven't been able to staff up ... the environment has changed dramatically in terms of competition for staff and tribal communities is the same.” Another interviewee highlighted that despite the benefits brought about by the COVID-19 relief funds, the overall barriers towards ECCE accessibility in tribal communities remain the same (explored further in the *Barriers to ECCE* Brief). This was reiterated by one tribal administrator who reflected on the situation by saying, “It was great when it lasted.”

Brief 2 – The Impact of Trauma and Healing Strategies in Idaho’s Tribal Communities

For Idaho’s tribal communities, the concept of trauma involves both the current challenges faced by Native peoples, such as the recent pandemic, along with historical events that have created long-term intergenerational transmission of trauma.⁴ This brief details some of the challenges experienced by Idaho’s Native children, families, and the ECCE workforce, and highlights the many strengths that are inherent in tribal communities to promote healing and wellness through traditional means.

The information provided in this brief was obtained via interviews with 11 ECCE administrators and providers, along with 85 survey responses from educators and staff who either work within tribal areas, provide care to Native children and/or hold administrative roles that support tribal communities in Idaho.

Unmet Needs of Tribal Communities

Challenges For Children And Families

During the interviews, educators and administrators were asked to describe the primary challenges that children and families may face within tribal communities. Housing, transportation, behavioral health needs, and access to services (e.g. childcare, medical, and community resources) were frequently noted as significant obstacles for families with young children. As shared by a tribal participant:

“[Having access to] daycare services. I think that’s a big challenge for families in our community. Other educational challenges for students, not enough resources for tutors. Then transportation is a barrier, but we do have our tribal transit, but they’re limited on hours, so ... it’s hard to address issues. Programs are closed ... and homelessness is a huge, huge barrier ... it’s so expensive in town, to even rent housing is expensive ... and so that housing barrier is huge.”

One ECCE provider noted that tribal families may have difficulty accessing outside resources for their children:

“I know within our community, there’s a high need for a lot of other outside resources that are not available to families, like occupational therapy and things like that that would help their children with some of the disabilities we’re seeing. But I know it makes it challenging because a lot of those services are quite a ways away and they may not be covered... even as a school, we have a hard time getting those services here.”

Needs of Early Childhood Care and Education Providers who Work with Tribal Communities

Turnover and Recruitment

ECCE educators and administrators who work within or with Native communities were asked to describe the challenges and particular stressors that they face at work. Many pointed to turnover and staffing as a primary source of stress. This was described by one tribal provider as “under-staffing,” to the point that staff members do not feel that they can take necessary breaks (e.g., taking time to eat):

“It stresses me out sometimes. Because it’s like, “Okay, who’s going to be with me today? Who’s not going to be with me today?” And there’s been times where I’m like, we’re so stinking busy. I’m like, ‘I didn’t eat today because I’m so busy and we’re running wild ... [I try] to stick to a schedule ... if my schedule gets out of whack, it really affects me and I really see how it affects the kids.”

⁴ For more information about Adverse Childhood Experiences (ACEs), please visit the information hub at <https://www.nihb.org/aces-resource-basket/>

Under-staffing may make it impossible to maintain a regular schedule, which educators observed as beneficial for themselves and for the children in their care. The lack of sufficient numbers of staff forces educators to forgo fulfilling some of their basic needs as they often put the needs of their students before their own.

Another tribal ECCE administrator explained how turnover creates intense stress for the educators who remain, from a leadership perspective:

“Not having a steady teacher aide within the classroom, because we have had people come and go. They may be here for two, three months, and then they decide it's not something they want to do, so they resign and then we're left with an opening ... That makes it hard on the teacher because then she's trying to do two jobs. So that's a big stressor for them, not having the kind of help that they need to support them while they provide instruction to these children.”

ECCE administrators felt that turnover is especially difficult for tribally based programs, as their workforce recruitment may be hampered by low wages, location, and smaller pools of available workforce, making it harder to attract staff who are culturally competent and reflective of their communities:

“Identifying qualified staff is a big issue. Certified staff is a big issue. So, the early education programs really try to promote getting educated and certified, but that's always been an issue on the reservation. And so, we have a lot of non-Natives who come on the reservation to teach our students, but we're trying to get more Native people into education programs so that they can come back and be teachers with our students. But that's a huge, huge issue is trying to identify and get more Native qualified staff for teaching throughout the K through 12 system, even in higher ed too.”

Low Pay and Accessibility

Low pay and long commutes (e.g., for those who live outside of tribal communities) were listed as barriers for ECCE providers who work with tribal families; however, wages were listed as the primary concern for both recruitment and retention. As noted by an administrator, the ECCE sector throughout Idaho is challenged by low wages for educators who experience demanding jobs, and providers on tribal lands are similarly impacted:

“Certainly, living wage is a driver ... I think people [have to] really want to do the work because it's hard.... Particularly post COVID, we all have heard about behavioral issues being more problematic than they were before. And so those are some of the calculations that people do when they start work, ‘How hard is this work going to be considering how much money I'm getting paid?’”

Tribal ECCE administrators noted that trauma experienced by children and families has profoundly impacted the day-to-day experiences for educators, making the job increasingly difficult and rendering the pay insufficient to prospective employees:

“That's probably the biggest concern, is how much they are paid to come aboard. If they could work in a different program, they may make a little more than what we pay here. This is a demanding job working with [many] children ... some of them have been affected by trauma, so we have behavior problems. Then of course we address our special needs children, so there again, we need a lot of one-on-one help. So, it's hard, they work very hard.”

Another administrator further explained the widening gulf between wages and working conditions for tribal ECCE providers, and some of the initiatives that Idaho's Tribes are putting into place:

“Working in childcare, working in preschool, working with younger children is incredibly hard work. It is emotionally taxing, [it's] physically taxing ... And doing a difficult job for insufficient pay that does not sustain your own family will leave you looking for something else ... They need paychecks that pay a mortgage, that puts them in a safe, comfortable home. And until we do that, their workforce will continue to be struggling along with everybody else's. And I know that the Tribes are working towards that. [One]

of the Tribes has an initiative to improve the pay for their workforce, but it's also looking at hours of work and what sort of flexibility can we [give] these people who do this work.”

Resources – Education

One tribal educator noted that, while most parents were “pretty easygoing and understanding of what we do,” there can be challenges when other parents are concerned about the amount of one-on-one attention available to children in a large classroom. Lack of available materials and curriculum was also listed as a source of stress, with educators concerned that lack of supplies might impede learning:

“[H]aving those toys and materials to make sure that they are learning and that they are working on their fine and gross motor skills, and things to work on their social skills and cognition. [We need] all of those materials to make sure that everything's fully rounded and they are getting what they need to continue to grow and learn.”

Resources – Community

At times, direct access to resources such as medical and behavioral health services within Tribal lands may pose challenges for families with young children. Further, lack of collaboration between Native and non-Native partners in Idaho was noted as a barrier to promoting strong tribal ECCE programs, in addition to challenges faced within their own communities:

“Another challenge is the outside communities working with our tribal government and our education programs. And sometimes there's no collaboration ... and sometimes our students, they run into discrimination barriers off the reservation. And even sometimes within the reservation too, that internalized lateral oppression is a real thing.”

Educator Health Concerns

The impact of COVID-19 was reportedly a continuing stressor for ECCE providers, related to both fears of contracting the virus or concerns rising from vaccine hesitancy. An educator explained that they felt many fellow staff had left their positions due to the COVID vaccine mandate. Some educators may have been skeptical that the vaccine was safe and/or felt that they experienced side effects from the vaccine, which may have led to turnover in ECCE programs.

ECCE providers in Idaho at times contend with fear of physical injury as part of their daily work. For example, an educator noted that they developed a serious physical injury while working at a center, leading to a mandatory switch to another classroom.

Managing Trauma Experienced Within Communities

One participant observed that the families of the children in their care are often navigating trauma in their own lives. Tribal ECCE educators often provide holistic support to families in order to support their children, applying a two-generational approach:

“[W]orking with the adults, the families that are dealing with trauma themselves ... they've gone through trauma their whole life, but they don't want to pass it on to their children. So just providing resources to help them heal those traumas and then not pass on the traumas.”

Trauma in the community can take the form of substance disorders or losing parental rights to children. In these instances, ECCE educators may be one of the most accessible resources to promote healing and access to resources for families and children. ECCE administrators and educators detailed types of trauma from behavioral health challenges in the family and COVID-related deaths, with family disruption and grief profoundly impacting the children in their care. As a result of behavioral health needs, students' availability for learning was also listed as a potential challenge for tribal families:

“Because one of our huge things is attendance, but then we have a lot of kids that are just struggling with just their home life ... So, our kids aren't always coming in with the mindset of wanting to focus on [school]. They have bigger things that are weighing on them outside. And then that makes it challenging for the teachers.”

A tribal administrator noted that it can be challenging when there may be a perceived lack of understanding or value for education. They indicated that this devaluing of education has resulted from historical trauma associated with boarding schools and the view that western systems are hostile to Native peoples.

In a broader sense, Idaho's Native communities have laid the groundwork for strong ECCE systems. However, many participants noted that tribal families may not be aware of the programs and funding that are available to support their child's ECCE journey, indicating that more outreach and communication with tribal families is needed to provide better access for all eligible children. As noted by an external administrator:

“The tribes have done a good job of creating the structure ... we've gone from no facilities to very good facilities ... Now that we have the facilities, how do we make sure that [families] that are eligible are aware and utilizing it to a maximum potential?”

Workforce Supports

ECCE administrators and educators noted that there are supports available for staff within programs, such as dedicated places for staff to take breaks throughout the day, though lack of classroom coverage may be limiting. A tribal educator also mentioned having access to onsite materials, like fidget items to relieve stress. Another way that tribal ECCE programs support their workforce is by providing days off or providing field trips for staff and students to attend cultural events hosted by the Tribe during the workday. Families are also invited to these events, and one administrator indicated that their program hosts Thanksgiving dinners for staff and families.

Tribes also support career development and continuing education for their workforce by providing tuition coverage for Native and non-Native staff members within their tribal ECCE programs. This includes providing tuition support for an associate degree and creating external partnerships with out-of-state universities to provide in-state tuition or no-cost education for Idaho tribal members. Another initiative focuses on reducing tuition costs for tribal members for Idaho's in-state universities.

One tribal administrator noted that they were working with their leadership to increase staff wages, and a tribal ECCE director indicated that their staff would benefit from higher pay, though they are concerned about possible cuts to funding in the upcoming year. Other initiatives were noted in tribal communities, with one administrator reporting that their tribal education department takes a cradle-to-career approach, following students from early childhood throughout their academic career. In this way, their education department can conduct outreach and create culturally relevant enrichment opportunities for students to support their academic journey and improve outcomes for students. These resources also extend to parents/guardians who are interested in returning to school and furthering their education. This has resulted in an increase in tribal members obtaining their degrees in higher education. Another ECCE tribal director reported that they tie their preschool curriculum to kindergarten competencies so that they can maximize student success through k-readiness skills.

In terms of supporting mental health for their staff, administrators reported providing training focused on self-care and managing trauma, and some pointed to tribal health benefits that include mental health support for ECCE educators. One ECCE educator noted that using social/emotional curricula with their students has also helped to decrease their own anxiety as a teacher.

ECCE educators and administrators identified other ways to support the ECCE workforce, such as by supporting the families of the children in their care in a two-generational approach. For example, they noted that providing education, tangible resources, and training to parents and guardians can be a way to promote employment, heal trauma, and encourage a healthier home environment

within the community. Promoting healthier families may in turn decrease stressors experienced by the tribal ECCE workforce, which highlights the circle of experience that exists for tribal educators.

Community Strengths and Healing

When asked to describe the strengths and cultural practices within Native communities, many interview participants noted the strong ties and community support for families, along with kinship care of children. Tribal interviewees noted that their communities engage in ceremony as healing, and that keeping families together and thriving are the primary goals of tribal programs. One participant observed that these programs are meant to not only connect tribal members with their history and culture, but to also promote healing through traditional means:

“Prayer meetings that take place online. And so that was one way we tried to keep people ... in the loop of trying to have this resiliency against alcohol and drug abuse. So, I definitely think our cultural ceremonies, now that we can practice openly, it's really helped a lot of our community members with staying on a good pathway, good road to being successful [and] we have our community sundances and sweats that are done regularly.”

Other cultural activities included classes on language and culture, traditional beadwork and clothing, and classes on parenting that honor traditional ways:

“[W]ith the parenting sessions ... in [our traditional] way, we believe that what you do today affects the next seven generations, but it also heals or honors the past seven generations ... So, what are you doing today to set the next seven generations up for success? And what are you doing today that heals or honors the past seven generations? ... What our parents experience, that trauma, can be carried with us, but it's also our responsibility to address it, heal it, to make sure the next seven generations are set up for the best opportunity that they can have. That teaching was already there, but now we're applying [it].”

As an expression of sovereignty, the ability of Tribes to self-determine their programming was also noted as a strength. From an ECCE perspective, culture is intentionally infused into the classroom for Idaho's Native students. Tribal educators and administrators noted that they invite elders into the classroom to provide instruction on Native teachings, and some employ teachers who are focused solely on language and cultural curriculum within their program.

When asked to describe the reasons behind the approach of culturally driven healing and community events, interview participants noted that the tribes have focused on enhancing community support and encouraging “cultural community” in Idaho. One participant stated that having a Native Interior Secretary at the federal level was a positive step toward representation nationwide. At the state level, increased efforts to collaborate with tribal communities, to help with the digital divide that many experience on reservation lands, providing educational funding, and supporting the development of new resources were noted as positive efforts to partner with Tribes. However, there may be resistance to incorporating cultural curriculum in Idaho's school systems, which represents a challenge for tribal communities who may not feel there is a cultural fit in Idaho's western school system. One interview participant indicated that they are working with universities to incorporate cultural curriculum and knowledge of Idaho's Native Tribes into teaching training programs, to reduce ‘othering’ and increase teacher competencies in working with Native communities.

Recommendations

The findings indicate a need to improve conditions for Idaho's tribal ECCE educators and families who may experience the effects of historical or current trauma, and the following suggestions may provide a starting direction for Idaho's leaders and advocates for Tribal Nations:

- Providing better pay for ECCE educators who work with tribal communities, so that programs can be fully staffed with highly qualified educators.

- Providing resources onsite for educators, including relaxation rooms and break rooms to encourage taking necessary breaks throughout the day. For providers on tribal lands, allowing time off for cultural ceremonies can be a positive way to provide culturally relevant support to staff.
- Enhancing curriculum and enrichment to include traditional teachings and culturally relevant instruction. Organizing field trips that are focused on tribal events can provide representation and cultural relevance for Native children and staff in Idaho's childcare programs.
- Funding for expanded access to childcare for tribal members, including no-cost tuition programs.
- Meeting the basic needs of families, including building community infrastructure in a two-generational approach.
- Applying cultural healing methods to address trauma in the Native families, children, and the workforce.
- Providing mental health benefits to educators, including mental health days with adequate staff coverage.
- Acknowledgement that tribal ECCE care provision presents unique challenges to the workforce and developing comprehensive strategies to address this reality.
- Recognizing the strengths inherent in tribal communities and incorporating cultural teachings as powerful healing mechanisms.

Brief 3 – Access to Early Childhood Education for Idaho’s Tribal Communities

This brief describes the ways in which Native families engage with the early childhood care and education (ECCE) system in Idaho and the factors they prioritize when accessing care and education for their children. It explores the strengths of the current ECCE system when serving Native children and their families, and conversely, the barriers Native families face when accessing ECCE services and related areas for improvement in the ECCE system.

Priorities and Engagement with Early Care and Education

Providers and administrators from both tribal and state/county/district settings described a range of priorities and considerations that are top of mind for Native families when selecting an ECCE provider, many of which are interrelated. Both groups mentioned parental choice, access, and availability as primary considerations. Specifically, when access and availability are limited, Native families often feel that they must take the first slot available, which limits their ability to make choices regarding quality or whether it meets their needs or preferences. Location (proximity to home or work), hours of operation, and cost also have a significant impact on Native families’ ability to access early care and education. The challenges associated with these considerations are described in more detail in the *Barriers to ECCE* section below.

Administrators and providers cited quality of care as a top priority for Native families. They described how quality can mean different things to different people, from the more concrete or physical aspects of a program such as licensure, student-teacher ratios, teacher education, cleanliness, and physical safety, to the more interpersonal factors like emotional safety and a strong and trusting relationship with the provider, including engagement and responsive teacher-student interaction that facilitates learning. Interview participants emphasized the importance of this relationship with the care provider, as well as the importance of a focus on learning and enrichment.

Providers mentioned a few ways their current ECCE programs meet the needs of Native children and families, including transportation services, convenient locations, effective engagement and communication with parents and caregivers, referrals for additional services, and providing care for a wide age range. In addition, one provider mentioned a connected school for children with learning differences.

Another factor important to Native families is cultural relevance in ECCE programming. Interview participants emphasized that when Native families enroll, they are looking for culturally relevant education, which often means that there is a cultural component embedded into the curriculum, and educators who share or are knowledgeable about their cultural background. When asked what is most important to Native families when selecting a childcare provider, one provider responded, “a facility that is more tended to their needs ... I remember one year we had a family bring in the [traditional infant cradleboard] but using that and being accepting of that.”

Community Attitudes towards Childcare and Preschool

Tribal ECCE administrators indicated that there can be varying attitudes towards childcare and preschool in their communities. They described families with enthusiasm towards enrolling their child in ECCE settings, and also families with more hesitancy. Reasons for this hesitancy varied such as anxiety about finances (especially with multiple children in care), COVID-19, and potential bullying, or skepticism towards western education or federal programs due to historic injustices. Interview participants noted that some families may prefer a relative to look after their children or may not see a need for childcare or preschool because they currently work from home. Other families may not have much information about the benefits of childcare/preschool or what their local program

has to offer. One interviewee suggested a campaign emphasizing the benefits and safety/cleanliness of preschool to encourage more families to enroll their children.

Providers expressed mixed views about the process of finding and selecting an ECCE provider in their communities, with one provider noting, “[for] some, [the process is] easy and [for] some it’s not.” This provider elaborated by saying, “I think that there’s not a lot of information out there for them to really make that decision. I think those who find it easy, they’ve done a lot of research, or they’ve heard from another person.” Preschool selection/enrollment was viewed as an easier process, in large part because “they tend to take more kids.” Another provider mentioned how IdahoSTARS, an online database of care providers, helps families compare ECCE facilities, but then acknowledged that, “not very many people know about IdahoSTARS.” Providers cited other ways that families seek out information about ECCE options, including Google searches and word of mouth.

When asked about resources that are or would be helpful in facilitating the transition to preschool, one provider suggested a list or document comparing factors like curriculum, hours, food provision, etc., across providers; “just more things to help [parents/caregivers] make a decision of where to take their child.” Other providers mentioned strategies used at their facility to help with the early care to preschool transition, including relevant curriculum, creating a “transition plan” specific to each child, and communicating among teachers about individual needs. If it is the child’s first time in childcare, one provider mentioned that their facility provides a one-pager to parents/caregivers about separation anxiety and ways to mitigate it.

Current ECCE System Successes and Strengths

Interview participants from both tribal and state/county/district roles shared their perspective on the ways in which the current ECCE system works well to support tribal communities and Native families in Idaho, including facilitating culturally relevant options for families, strong communities, and flexible funding streams.

Culturally Relevant and Inclusive Programs

Administrators and providers of tribal ECCE programs, and state/county/district professionals, noted that tribal ECCE programs have incorporated language and cultural practices into their programs and curriculum. They cited many examples, including:

- Language classes
- Teacher trainings
- Programs that embed a cultural specialist/educator
- Inclusion of a cultural department

These elements allow schools and centers to share with and engage families in cultural teachings and traditions. This culturally sustaining focus has been strengthened recently after the pandemic resulted in the painful loss of many Elders who were speakers of the language and keepers of traditional cultural practices. For some programs, this focus on cultural education extends beyond the Tribe’s culture to foster an appreciation for all cultures of the world, helping to build a broader culture of inclusivity.

Strong Communities

Administrators noted that a strong sense of community and shared responsibility in Idaho’s Native communities helps to strengthen support, care, and education for Native families and children. This is seen in a variety of ways, from kinship care, to ECCE centers with wrap-around supports, to supports available to the ECCE workforce. One administrator described a tribal ECCE center that embodied this sense of community:

“And the effort that went into making something like that happen is really a testament to that community because [...] what they were offering, there was parent support classes. I believe they even had a food bank; they had some clothing donations. Families were truly able to meet the entire need of their family as they entered that facility, and that is community. That is beautiful.”

These community strengths are discussed in more detail in the *Trauma and Healing* brief.

Flexible Funding

Interview participants from State/County/District roles discussed the unique flexibility Tribes have to weave together different funding sources to be adaptive to the community’s needs. For example, some facilities can co-locate Head Start and another childcare program in the same facility, allowing staff to shift children from one program to the other depending on the time of day or other factors. This flexibility allows tribal childcare programs to serve a range of children from different programs/funding streams, including Idaho Child Care and Development Fund (CCDF) program recipients, Head Start participants, children through the Infant Toddler Program, or children receiving care through foster care or family support services. This flexibility is an enormous benefit and something state-level administrators may wish to replicate in other parts of the state. Other state-level administrators spoke about the high-quality facilities and infrastructure they have observed in tribal communities.

Barriers to Accessing Care

When searching for and accessing quality ECCE services, Native families can face a range of barriers. When taken together, these barriers can contribute to an overall lack of accessibility to ECCE for many Native families.

Lack of Openings

One prominent theme from interviews with tribal administrators and providers was a lack of openings in quality ECCE programs or programs that fit families’ needs. Frequently, they mentioned that their programs are full, with children on waiting lists. State administrators commented on this as well: “we know that most childcare facilities in our state, including tribal childcare facilities, are fully enrolled with wait lists.”

Staffing and Wages

Closely related to the lack of openings is the issue of staffing and wages. One provider described their program as “extremely short-staffed,” while another State/County/District professional emphasized that competition for ECCE staff is one of the greatest challenges the sector is facing in the post-COVID landscape, including in tribal communities.

Hours of Operation

For parents and caregivers who work outside of traditional business hours, ECCE accessibility can be a significant challenge. According to one administrator, “I’ve personally been in some incredible tribal childcare facilities in our state that are doing their very best to meet the needs of their population. But especially with atypical work hours or asynchronous work hours, we know that even those incredible facilities full of those amazing staff are not necessarily meeting the full needs of families in their communities.”

Finding an aftercare program that suits a family’s needs can also present challenges for families, especially if there are multiple children in care. One provider gave an example of this type of situation: “The kids come to our school from 7:30 to 3:30. ... They can go to preschool aftercare or they can go to toddler aftercare. For toddler aftercare I think they have to be two. Now I have a couple of my own kids that they have younger siblings, so their older kids are in the preschool aftercare, but their younger siblings, they have to come pick them up because they don’t meet the qualifications to come to aftercare.”

Location (proximity to home or work)

The remote nature of many tribal lands makes accessing childcare especially difficult for Native families. Interview participants from both tribal and non-tribal settings discussed the need for families to drive outside their communities to the nearest childcare facility with openings. When asked if there are any options in their community outside of Head Start, one tribal administrator remarked, “No, not in the community, but in [the town next to us], there are a few daycares, but as with any other daycare, there’s wait lists, and the monthly rate, it’s a lot higher than what it is here in [our community]. And there is another town right next to us ... and they do have a few daycares there, but again, there’s a wait list, and a pretty high daycare cost.” Another tribal program manager indicated they do not have within their tribal lands, with the nearest provider being 10 miles outside. Another tribal administrator remarked on the issue, “I think it’s hard because some have to travel to the city closest to us so that they can put their kids in daycare.”

Affordability

If a child is enrolled in Head Start or another subsidized program based on an income or need criteria, tuition is often fully covered or on a sliding scale. However, those spots fill up quickly, forcing families to search for other options which may be more cost prohibitive. For families who do not meet income or other eligibility requirements, childcare can become unaffordable. One provider elaborated by saying:

“...there’s a program, if you make a certain amount of money they will pay a portion or pay most of your childcare bill. And sometimes those families rely on that program ... And we’ve had families that have had to stop coming because this program is not paying what they were originally told that this program would pay or they stopped paying a portion. So, we’ve had these families ...they’ve had to stop with coming because of this program not paying a portion.”

Cultural Relevance

Many ECCE programs on tribal lands have a strong focus on integrating cultural practices throughout their curriculums. However, when Native families have no choice but to look outside the community for ECCE options, they can be forced to compromise on their preference to find a program that is culturally relevant and can even face prejudice. Tribal and State/County/District administrators highlighted a need for more culturally responsive programs outside tribal lands, as well as more Native educators within and outside tribal lands. As one administrator noted,

“You want someone that looks like you and sounds like you and understands your family to take care of your baby, and that really matters in terms of a parent’s comfort when they leave their child. And if a parent is continuing to be uncomfortable leaving their child somewhere, eventually they’ll make the choice to leave the workforce or to do something else.”

Licensure for Family or Home-Based Care

Many Native families rely on family providers or providers who are home based. These can be better options for families who prefer their child to be with a relative, or who prefer a home-based environment. One challenge that these providers face is that no matter the quality of care, they may not be eligible to receive the funding that licensed providers receive, such as CCDF funds. As one tribal administrator explained:

“We don’t have another childcare provider on the reservation, but we just do have one that’s a home care, but she is not licensed or anything like that or monitored. So, a lot of tribal families use her services and she’s pretty good in everything but I just wish she was licensed so our program, with CCDF funds, can help her with the stabilization grant for her little home daycare.”

Additional Services

For families who need additional services or resources for their children, accessing quality childcare can be that much more burdensome:

“And then I know within our community, there's a high need for a lot of other outside resources that are not available to families, like occupational therapy and things like that that would help their children with some of the disabilities we're seeing. But I know it makes it challenging because a lot of those services are quite a ways away and they may not be covered and things like that. So even as a school, we have a hard time getting those services here.”

Relatedly, one provider commented, “... it seems like we've been getting more kids with special needs, but I would like more ways and more materials to help them if need be, but also learning more of what they do in their [tribal] culture to help support them.”

Reaching and Supporting Families

Some interview participants in tribal administrative roles discussed challenges relating to identifying and reaching a subset of families in the community who may be struggling with trauma or other difficult life circumstances. These families may not have the time or be in a space to search for childcare/preschool or navigate the enrollment process. Administrators of tribal programs discussed the need to identify and reach these families to 1) educate about the importance of early childhood education, and 2) assess where the children are developmentally and provide early intervention if needed. Relatedly, for families who do have children enrolled in a program, there can be the challenge of consistent attendance. These challenges have been worsened by the pandemic.

Lack of Accessibility Results in Limited Choices

The combined impact of these barriers is an overall lack of accessibility to ECCE that results in limited choices for Native families. Further, the impacts of these limited choices are felt throughout the community and the economy, as parents and caregivers who lack access to childcare may not be able to engage in the workforce.

Equity in ECCE Access

When asked whether families in their community have access to quality early care and education, responses varied but most administrators of tribal ECCE programs indicated that there is access, though it is limited. According to one tribal coordinator, “I think, from my experience, some [families] do and some don't. And I think it just relates back to what I shared earlier about ... [the programs] are only given so much funds every year, so they only have so many teachers, and again, there's only so many spots available. So not all kiddos [have access].”

When asked if tribal families have the same access to quality early care and education as other families in Idaho, some State/County/District professionals acknowledged they did not know because they do not have enough information about factors such as funding in tribal communities. Others suggested that access exists when it comes to quality facilities and flexible funding. Another State/County/District professional with more specialized knowledge in ECCE responded with an emphatic, “absolutely not,” and elaborated by saying:

“We know because we can look at a map and we can say, ‘Where are tribal communities and where's high quality childcare?’ And when the map overlays, they don't line up. And so, the answer is of course not ... There are a lot of barriers to that lack of quality care ... It's not their lack of initiative to bring quality care to their communities, it's a lack of resources and we understand that. And it's widespread, it's throughout the whole state. But of course, like I said, disproportionately impacting tribal communities, especially because of the remoteness of where they are.”

Recommendations

The barriers discussed in the previous section point to a few major areas of improvement for the ECCE system in Idaho that, if instituted, could help expand access to ECCE for Native children and families.

Onboarding Family- and Home-Based Providers

Themes from interviews with tribal and state administrators revealed potential opportunities to support family and home-based providers who are not licensed but who are already providing crucial services to tribal families and communities. If these care settings could become eligible for licensure or have access to additional funding or resources (e.g. CCDF funds), it could help address some of the barriers discussed above. As one state administrator commented:

“We know that high quality family, friend, neighbor, and group care can meet needs if it's adequately supported and if it's quality and our quality system is not at the capacity, we need to onboard more facilities and providers to improve their quality and we need the staff to provide those services.”

Resources and Systemic Changes Needed to Expand Access and Grow the Workforce

Interview participants highlighted the ways in which Tribes and the state are working to increase the number of childcare slots available and to expand overall accessibility to ECCE for Native families; however, more resources are still needed to address the need, both in tribal communities and across the state. As one state administrator commented:

“The governor's initiative here in the state outside of the tribal funding has put \$30 million in the last two years towards increasing the number of childcare slots available in our state. But really it's a drop in the bucket compared to what's needed ... and I'm only aware of one tribal recipient that was specifically targeting an increase in slots available to tribal children and certainly, that's insufficient.”

Other suggestions to increase ECCE access for Native families included expanding the subsidy system, building new facilities, and adding new slots to existing facilities. However, it is important to note that while allocating more resources will help, it will not completely solve the challenges of inequitable access. As one administrator remarked:

“I think a lot of ... policy makers made assumptions that if we just put money at childcare, it'll fix itself, right? And the tribes were no exception. They received an increase in their CCDF allocation to improve their childcare programming, but they encounter the same barriers and probably disproportionately greater barriers ... Money can't fix a workforce that isn't there. Money can't fix a workforce that passed away due to COVID or that left the area because they needed better assistance or more resources. And so, I know that they have the same struggles that the rest of us do and we're working towards mitigating them, but money alone cannot fix it. It takes systemic changes.”

Interviews with both tribal administrators and state/county/district professionals reiterated the urgent need to increase wages for childcare providers to grow the workforce. According to one state administrator, “we've got enough kids that we can serve, we can't find the people to fill the classrooms to teach. So right now, I think that's our number one concern for childcare purposes.”

Increasing Cultural Relevance for ECCE in Idaho

As described in the Cultural Relevance section above, ECCE programs on tribal lands tend to have a strong focus on integrating cultural practices throughout their programs and curriculum. However, for programs outside of our adjacent to tribal lands that serve Native families, there are opportunities to expand training for educators in cultural responsiveness and to train and recruit more Native educators.

Increasing Outreach and Communication

One administrator at the state level mentioned that there is underutilized funding available to tribal communities through IdahoSTARS. This funding can support things like professional development or higher education for tribal childcare providers, and financial incentives for improving quality and practices. This interview participant noted a possible misunderstanding regarding the availability of these funds: "I'm not sure that that's completely understood because tribal communities get their own childcare funding." They reiterated that, "The childcare consultation and the childcare professional development offered to by IdahoSTARS to our entire state is absolutely available to the childcare employees of tribal facilities."

This may be an opportunity for tribal childcare providers to pursue this avenue of funding if it would meet their needs, and an opportunity for state and tribal organizations in the ECCE space to increase communication and collaboration to ensure that resources are being optimally utilized.