



What do families use for child care?

Findings from the Massachusetts Early Childhood Needs Assessment

Part III of the Family Survey and Focus Groups Series
April 2025 | Jessica Goldberg, Michelle Thompson, Erin Bumgarner

Findings from national and state studies highlight significant variation in how families use child care. In 2019, approximately 60% of children ages 0 to 5 in the United States regularly used some form of non-parental care,ⁱ compared to almost 80% in Massachusetts.ⁱⁱ Additional research shows that the type of care families use often depends on their circumstances. For example, those working nontraditional hours, living in rural areas, or in middle-income brackets face unique barriers, including affordability challenges and limited availability of care that meets their needs.^{iii,iv, v, vi} In 2020, the COVID-19 pandemic significantly disrupted the child care system, underscoring the need for updated data to understand how child care arrangements have evolved.

This brief presents findings from the Massachusetts Early Childhood Needs Assessment, which included a survey and series of focus groups with caregivers in 2024. As shown in Exhibit 1, we addressed research questions about the types of child care arrangements caregivers used, as well as questions about how caregivers experienced those arrangements. This brief begins with a snapshot of the child care arrangements that caregivers reported using, followed by illustrative examples of how caregivers navigated early childhood programs and services. The brief concludes by describing findings related to caregiver satisfaction with their child care arrangements.

Exhibit 1. Topics and Data Sources Included in this Brief

Topic	Child Care Arrangement Questions	Survey	Focus Groups
Snapshot of child care arrangements	Who regularly provides care for your child?	◆	◆
	How did you pay for care?	◆	◆
Caregivers' child care journeys	Beginning with your child's birth, what arrangements have you used through the present?		◆
Caregiver satisfaction with care arrangements	How satisfied are you with key child care characteristics?	◆	
	What types of child care arrangements would you prefer?	◆	◆
	How does your child care arrangement impact your ability to work?	◆	◆



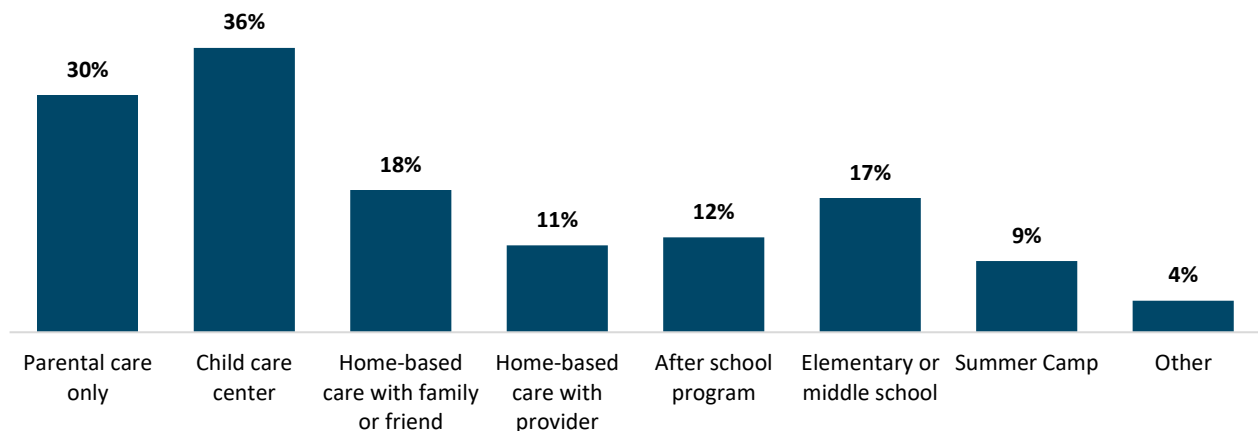
Key Findings: What do Families Use for Child Care?

- Caregivers often relied on multiple care arrangements. Piecing together child care can be quite challenging—many caregivers struggled to find care arrangements that met their needs, and many children experienced multiple transitions in a given week (and even more over time).
- Caregivers were generally satisfied with their current child care arrangements, especially with safety and cleanliness. They were least satisfied with the cost of care, transportation, and bilingual instruction.
- Many families indicated a preference for the same child care type they were currently using, suggesting some alignment between desired and actual care type.
- Mismatches between what caregivers were looking for and what they could find negatively impacted caregivers' ability to work. Caregivers wanted child care with extended and more flexible hours—particularly those experiencing financial instability.

Snapshot of Child Care Arrangements

Caregivers relied on a variety of care arrangements. The survey asked caregivers what child care arrangements they had used for their youngest child in the past year. As shown in Exhibit 2, 30% reported using parental care only and the remaining 70% used some form of non-parental care. On average, caregivers who used non-parental care reported using 1.5 arrangements in the past year. This ranged from 1 to 5 arrangements, with almost half (48%) of participants using more than one arrangement.

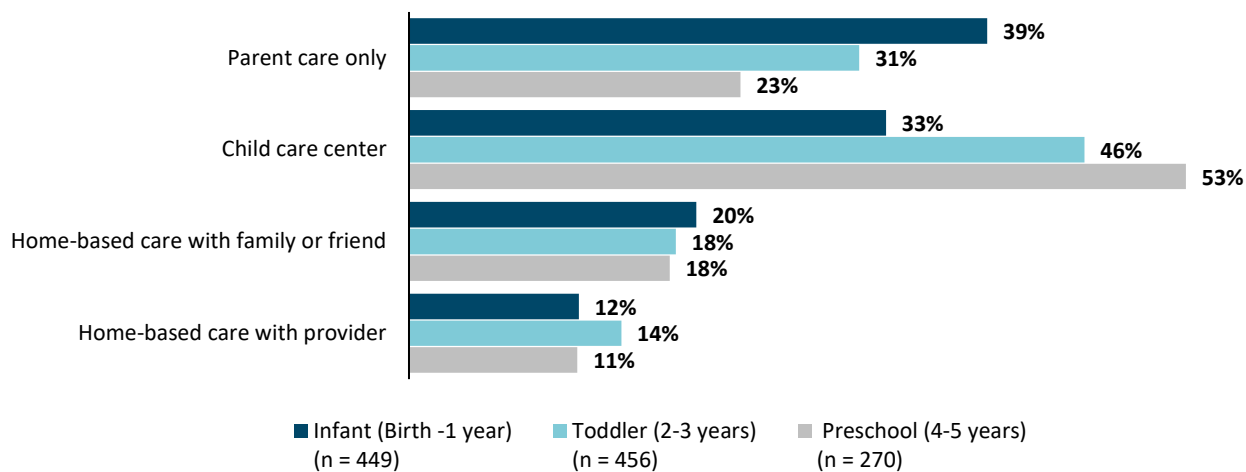
Exhibit 2. Caregivers' Child Care Arrangements in the Past Year



Note: This exhibit presents findings from two family survey questions: (1) "In the past 12 months, has anyone other than you or your co-parent regularly provided care for your youngest child?" ($n = 1,442$), and (2) Among those who answered "yes": "In the past 12 months, who regularly cared for your youngest child? (Select all that apply)" ($n = 1,006$). We combined information from both questions to calculate percentages for the full sample.

Care arrangements varied by age. Exhibit 3 shows the distribution of care types for children five years and younger. The use of centers increased as children got older (33% for infants to 53% for preschoolers). Conversely, the percentages of caregivers using only parental care decreased for older children (39% for infants to 23% for preschool-age children). The rate of home-based care use was relatively stable across age groups, with overall higher use of family or friend care than a provider.

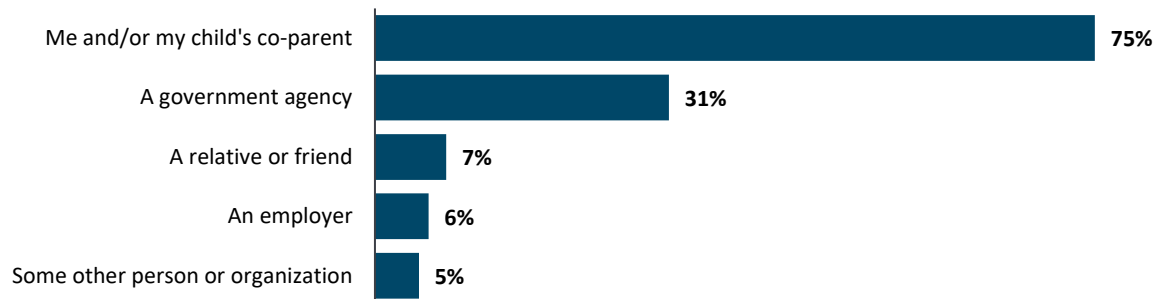
Exhibit 3. Child Care Arrangement, by Age of Youngest Child



Note: This exhibit presents findings from two family survey questions: (1) “In the past 12 months, has anyone other than you or your co-parent regularly provided care for your youngest child?” (n = 1,442), and (2) (For those who answered “yes”): “In the past 12 months, who regularly cared for your youngest child? (Select all that apply)” (n = 1,006). We combined data from both questions to calculate percentages for the full sample.

Most caregivers paid out of pocket for child care. The survey asked caregivers how they paid for child care. As shown in Exhibit 4, most caregivers (75%) indicated that they had paid out of pocket for child care. Almost a third (31%) reported that “a government agency” supported them in paying for child care, such as Child Care Financial Assistance (CCFA) or Head Start. Very few caregivers relied on relatives, friends, employers, or other sources of support (5-7%).

Exhibit 4. How Survey Respondents Paid for Child Care



Notes: This exhibit presents survey findings from the question, “In the past 12 months, how did you pay for child care for your youngest child? (Select all that apply)” Only those respondents who indicated their youngest child was enrolled in non-parental care were asked this question (n = 978).






Many caregivers paid out of pocket even when they faced financial challenges. For example, among the 281 caregivers who reported financial insecurity, more than half (63%) still paid out of pocket. Similarly, among the 301 caregivers receiving some form of government support to help pay for child care, almost half (44%) still paid partially out of pocket.

Caregivers' Child Care Journeys

This section explores the diverse experiences and challenges caregivers faced in finding and using child care. These findings are based on “journey maps” completed during the focus groups, in which caregivers charted the pathway of one of their children through early childhood programs from birth to their current age.¹

While each caregiver’s situation and child care pathway was unique, our team was able to identify five patterns—or “journey types”—that reflect most participants’ stories. These are briefly described in Exhibit 5, listed in order of prevalence in the sample with “mostly seamless formal care” being most common and “primarily family, friend, and neighbor care” being least common. We also describe where most caregivers in each of the journey types fell in terms of income, as this is an important contextualizing factor.

Exhibit 5. How Most Caregivers Navigated Early Childhood Programs and Services (“Journey Types”) – Listed from Most to Least Prevalent in the Sample

Journey Type	Description	Income
 Mostly seamless formal care	Caregivers were able to find sequential formal child care settings aligned with their needs.	<ul style="list-style-type: none"> • Lower-income (CCFA-eligible) • Higher-income
 Cobbled-together care	Because caregivers could not find or could not afford the full-time formal child care they wanted, they had to “cobble together” multiple simultaneous child care arrangements over time, usually a combination of formal and informal.	<ul style="list-style-type: none"> • Middle-income (just above CCFA eligibility threshold)
 Primarily parent care (not by choice)	Caregivers could not find formal infant and toddler care and had to provide care themselves. Unlike the <i>cobbling together</i> group, who blended formal and informal, these caregivers were ultimately opting to stay home until their child could get into public preschool or kindergarten.	<ul style="list-style-type: none"> • Lower-income (CCFA-eligible) • Middle-income (just above CCFA eligibility threshold)
 Primarily parent care (by choice)	While sometimes motivated by the same factors as the previous two types (e.g., could not access or afford child care), these caregivers chose to stay home with their children through infancy and toddlerhood, and were generally more satisfied with their situation.	<ul style="list-style-type: none"> • Middle-income (just above CCFA eligibility threshold) • Higher-income
 Primarily family, friend and neighbor (FFN) care	Caregivers used FFN care for the majority of their child’s early childhood.	<ul style="list-style-type: none"> • Lower-income (CCFA-eligible) • Middle-income (just above CCFA eligibility threshold)

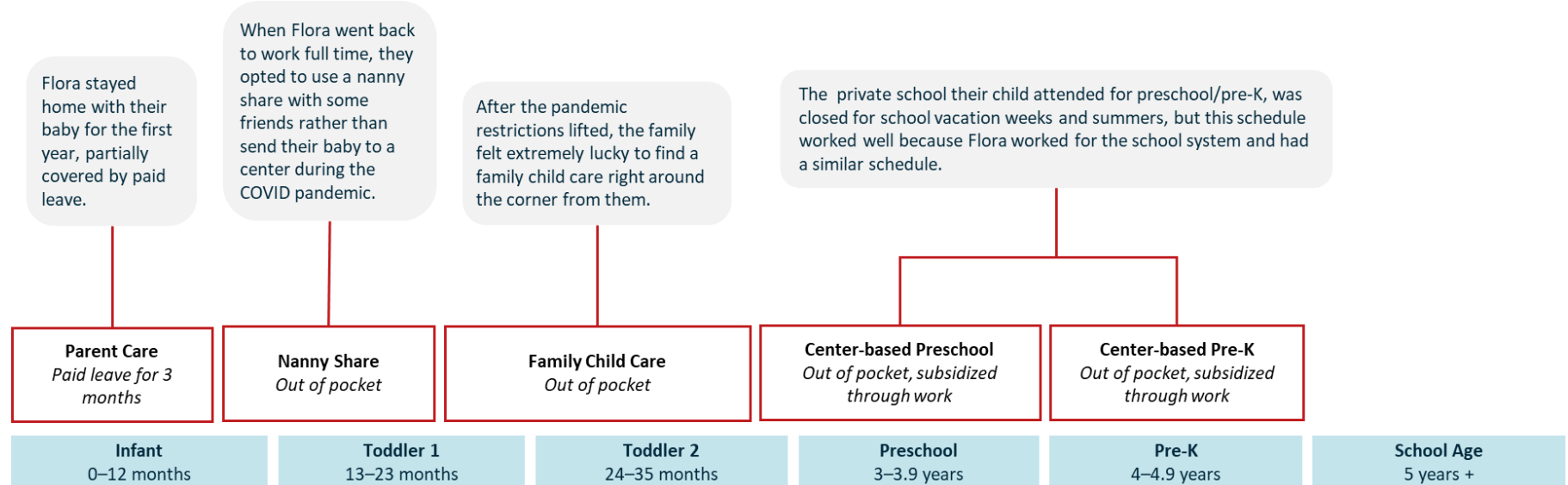
The following pages provide caregiver case studies to illustrate each of these journey types. Because we felt it was important to show what mostly seamless formal care can look like in Massachusetts for families on both ends of the income spectrum, we provided two case studies for the first type—one for a two-parent family with higher income living in a suburban area, and one for a single-parent family with lower income living in a rural area.

¹ To estimate the prevalence of each journey type in our sample, we analyzed journey map and focus group data for a subset of participants who completed a journey map for a child aged 4.5 years or older (n = 41). While we used strict parameters to assign each caregiver in the subsample to one journey type, our understanding of these journey types is informed by findings from the full sample of focus group participants. For more information about the journey mapping activity, please see: Bumgarner, E., Goldberg, J., & Thompson, M. (2025). *An Introduction to the Family Survey and Focus Groups Brief Series: Findings from the Massachusetts Early Childhood Needs Assessment*. MEF Associates & Tufts Interdisciplinary Evaluation Research (TIER). Prepared for the Massachusetts Department of Early Education and Care.



Mostly Seamless Formal Care—Peter and Flora’s Story: From Paid Leave to Private Pre-K

Peter and Flora both work full-time and live in a suburban area with quite a few child care options. They completed their journey map for their only child, who recently turned 5 years old. As shown in their journey map, Flora stayed home with the baby for the first year and then was able to arrange a nanny share during the Covid shutdown. After that, they found a family child care center they loved, then moved their child to center-based preschool and pre-K, paying out of pocket the entire time. Despite having an overall positive experience with child care, this family still experienced challenges with the high cost of child care, comparing it to paying for a second mortgage.



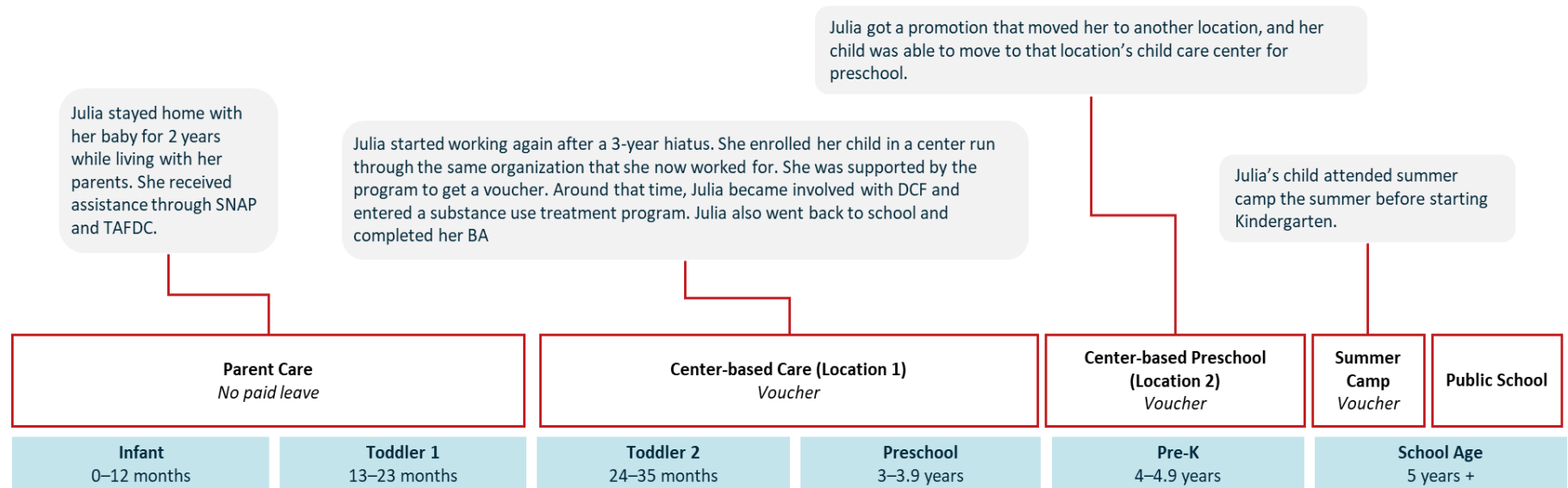
- *Convenience was really, really important to us. Like being able to walk or easily bike from our house to where daycare was felt really important.*
- *It was obvious to me the moment I walked in that this was a place full of love and thoughtfulness and care, and they were really competent adults working here who liked their job.*
- *I wouldn't change anything about this learning environment for our kids. I think it's perfect, except for that it's really, really expensive.*





Mostly Seamless Formal Care—Julia’s Story: Well-Supported by Family, Work, and Government Programs

Julia lives in a rural area of southeastern Massachusetts. She stayed home with her baby for the first two years, relying on Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Need Families (TANF), and living with her parents because housing was so unaffordable. When her child turned 2 years old, Julia went back to work as an administrative assistant in a multiservice center, and she lost some of those means-tested supports because her salary was “too high.” But the program she was working for was able to help her secure CCFA, and Julia sent her child to the center in the same building in which she worked. Julia also was struggling with substance use and mental health issues at the time; when she sought help, a case was opened with the Department of Children and Families (DCF). Though initially terrified that her child would be taken from her, Julia ultimately found DCF helpful in connecting her with treatment programs and other resources. Julia was able to go back to school while working full time and earned her Bachelor’s degree. When Julia received a promotion that moved her to a new location, she was able to enroll her child at the center there, still using CCFA, which also supported her child’s summer camp costs.



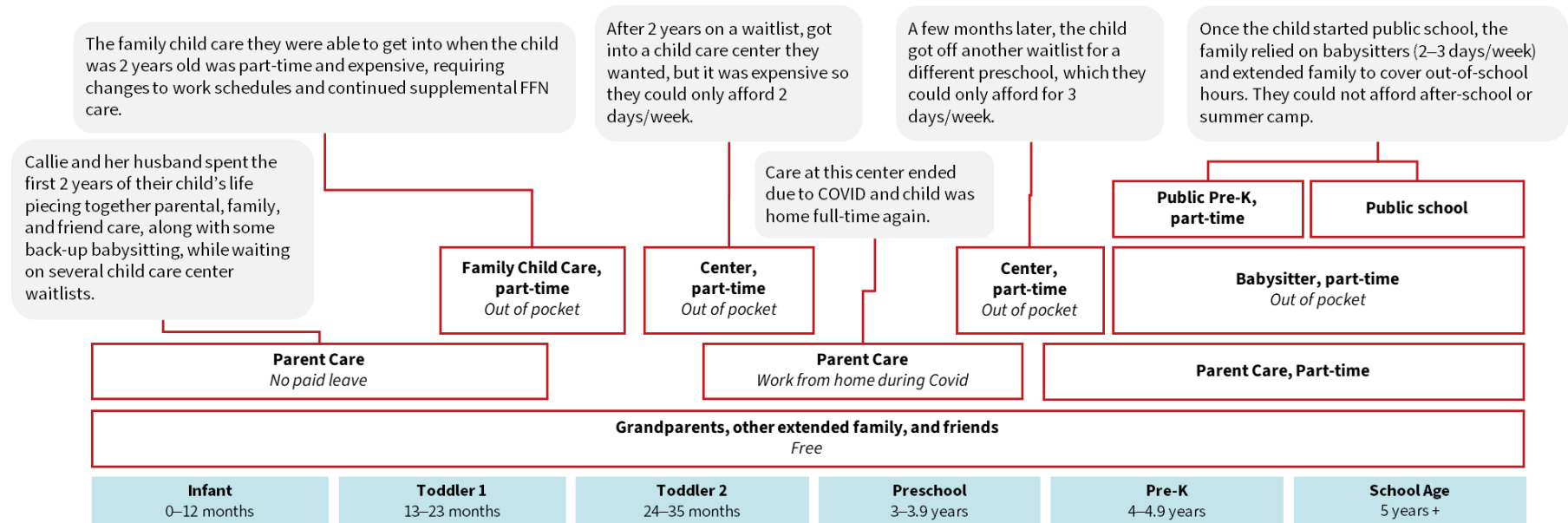
I basically I asked for help and DCF got involved in my life, so it was frustrating to me because... I was trying to be proactive and I felt like it was, you know, I'm getting almost punished for it... thankfully, because I had a wonderful caseworker and he was able to connect me with all of these resources, DCF ended up being a good thing in my life, and I ended up realizing I needed more help when it came to my mental health.





Cobbled-Together Care—Callie’s Story: 7 Long Years of Scattered, Piecemeal Care

Callie and her husband live in rural Central Massachusetts. Callie’s husband works weekends and overnight shifts, while Callie works “9–5,” and they are just over the income threshold for CCFA. Throughout their child care journey, both parents needed to work full-time to support their family. By the time Callie’s first child was born, she had already gotten their name on multiple waitlists, but it took two years to secure a spot at a child care center. During those first two years, she and her husband took turns caring for the baby whenever they weren’t working and relied on a patchwork of family and friends to supplement the times they both had to work at the same time. Over the next several years, their child was in and out of different child care centers; since they were too expensive to attend full-time, they continued to juggle work schedules and rely on friends and family.



- *I've been on [a center's] wait list for like seven years through two kids...and I called and called and called—we never got [in].*
- *Yeah, if you have a 2-income household you literally qualify for nothing, even if you're both in middle-class municipal positions, together, you make too much for everything. You don't qualify for any housing program, no food, nothing. Yet you're paying full price for insurance and preschool.*
- *We still had the [child care] at three days a week, no summer-care, anything. I switched jobs; I could no longer do 40 hours a week, with two kids, and, like, cobbling together anything...You don't work, you change your job...you never see your partner—yeah, you work it out.*

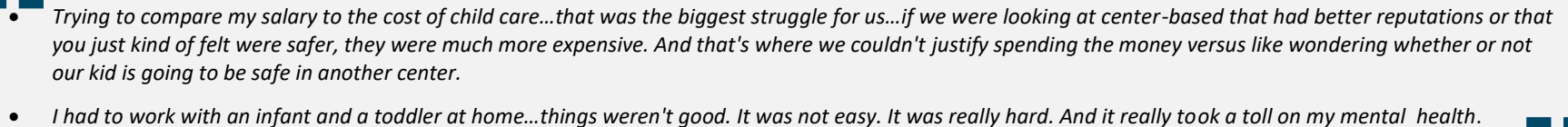




When Miriam's maternity leave was over, she was able to arrange a hybrid work situation where she worked 3 days/week at home and 2 days/week at the office. Her husband and extended family covered the days she was at work, but it was stressful to coordinate with her husband's rotating work schedule.

Miriam started her own business so she could work from home. She and her husband briefly looked at child care centers but could not afford the ones they felt would be safe.

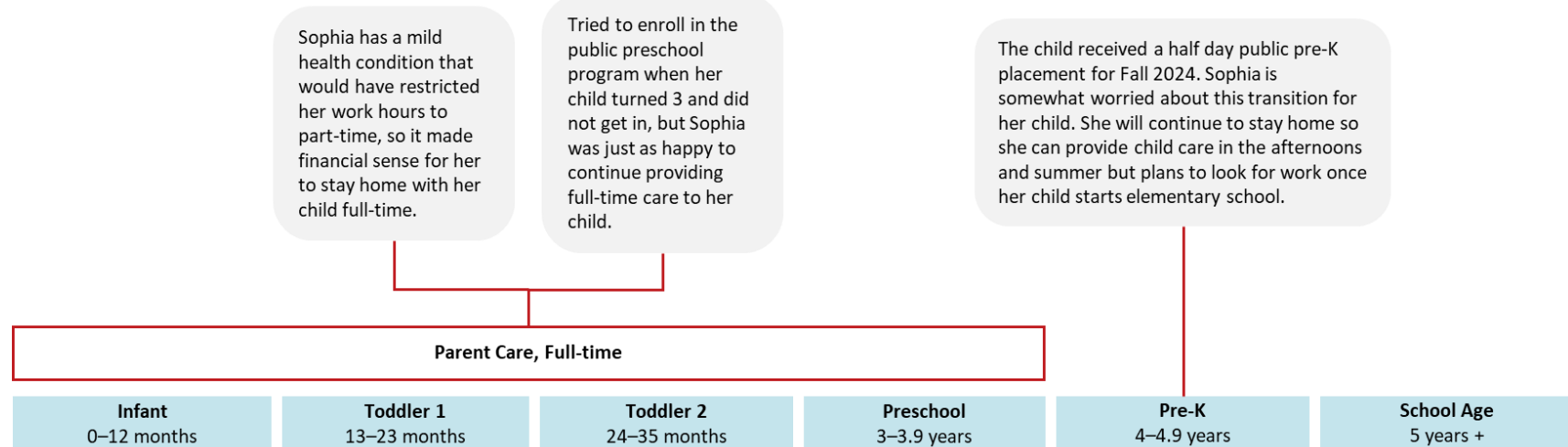
Her child is now in elementary school but Miriam continues to cover after school, school breaks, and summers while continuing to work at her own business full-time.





Primarily Parent Care (by Choice)—Sophia’s Story: Parent-Only Care with Lots of Support from Community Programs

Sophia and her husband live in a rural part of Western Massachusetts. Sophia’s husband works full-time, and Sophia has been staying home with her now almost 4-year-old since the child’s birth. She has taken advantage of local family support programming like play groups and parenting workshops and attributes much of her satisfaction with being a stay-at-home parent to the social supports she has gained through these services.



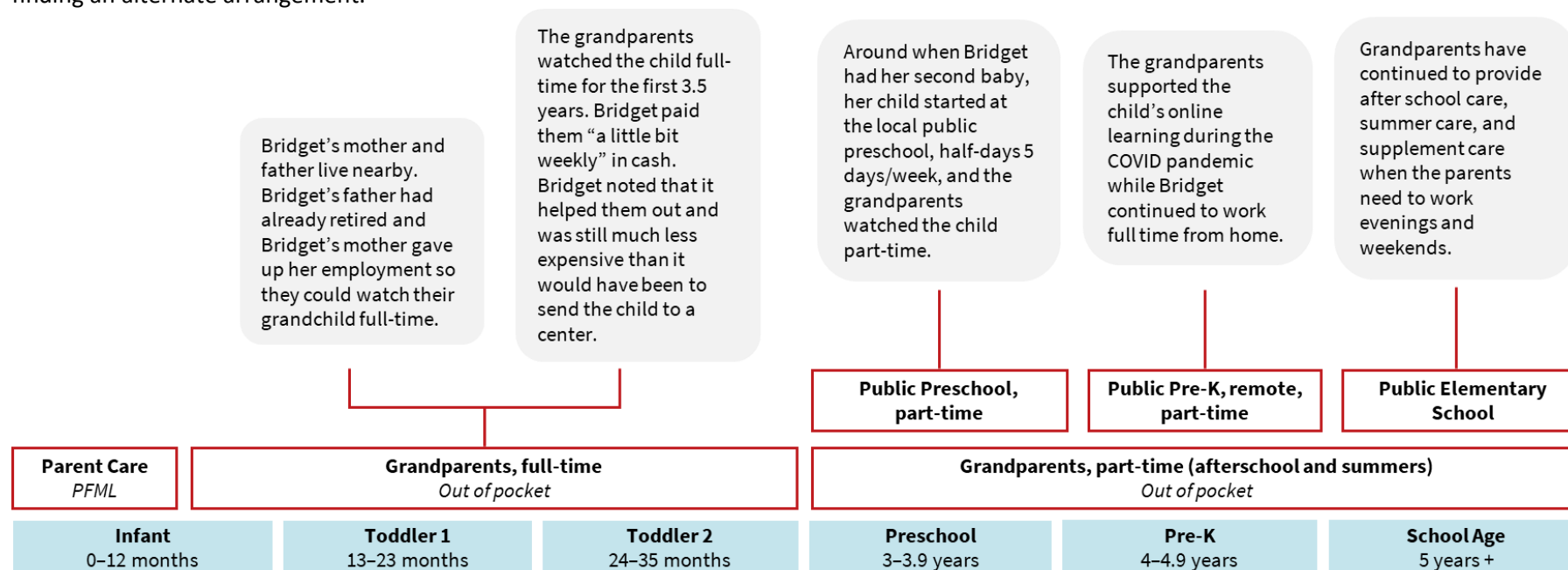
- *It's thanks to the Family Center that [my daughter] has made friends. She is meeting people at the park. She says hello. She's going to a lot of the play groups, almost like five days a week. There's something going on, you know. Even if we take her for story time at the library, the Family Center play groups, and without them, to be honest, I would have been really stuck. So I'm really grateful. And the friends that we've made through that, both from a parent point of view and for [my daughter] as well, it's just made a massive difference.*
- *I feel like quite privileged that I've been able to be with [daughter] for this long. I think if I was worried about her social life and things like that, things might have changed. I might have tried, other things to get her into daycare and stuff, and we would have just about afforded it with difficulty. But thanks to the Family Center and being able to access the things that we have with the play groups and everything... we've been doing alphabet bits and things, you know, like having a background in education has helped a little bit with that as well. So I feel lucky in that in that way as well. Yeah, I do feel very pleased I've been able to for this long.*





Primarily Family, Friend, And Neighbor (FFN) Care—Bridget's story: Grandparent Care from Birth through Public School

Bridget and her partner live in a rural community in Western Massachusetts. They have three children—9, 7, and 4 years old: Bridget completed her journey map for her 7-year-old. Her partner works a second shift job, and Bridget works primarily during the day and sometimes evenings and weekends. Having trusted family available to provide full-time care was a tremendous help to Bridget and meant she never needed to worry about finding an alternate arrangement.



- *I think if I didn't have my mom and dad to help, I probably would have stayed home because of the cost of childcare.*
- *I wasn't really looking for childcare because I had my mother... I can't remember how I got involved with [the free public preschool], but I think I had just heard of the program. I knew it was just half days [but] figured it would be something [and] if he's going to go to school there, might as well get in there.*

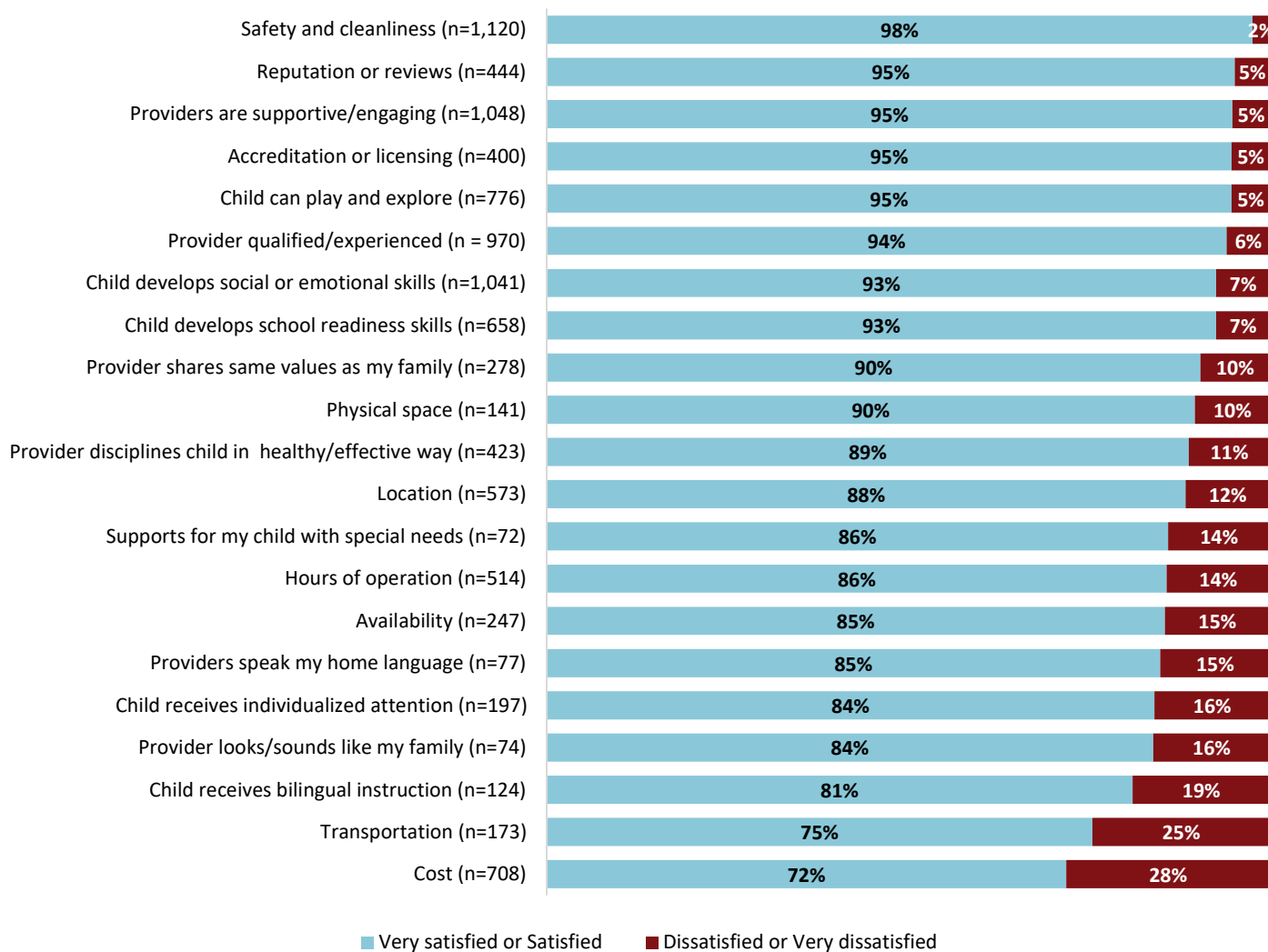


Caregiver Satisfaction with Care Arrangements

Caregivers were generally satisfied with the things that mattered most to them. To better understand the factors that caregivers prioritize in their decision-making, the survey asked caregivers to rank “what matters most” to them. These questions were organized topically into three questions—one focused on “operational characteristics,” a second focused on “provider characteristics,” and a third focused on “opportunities for child development.” The survey then asked caregivers to rate how satisfied they were with those characteristics that mattered most.

As shown in Exhibit 6, caregivers were generally satisfied with the characteristics that mattered most to them. For example, of the 1,120 caregivers who ranked “safety and cleanliness” as being the most important operational characteristic, nearly all (98%) were satisfied or very satisfied. Caregivers who ranked cost, access to transportation, and opportunities for bilingual instruction as most important expressed the most dissatisfaction.

Exhibit 6. Care Arrangement Characteristics with Which Caregivers were Most and Least Satisfied

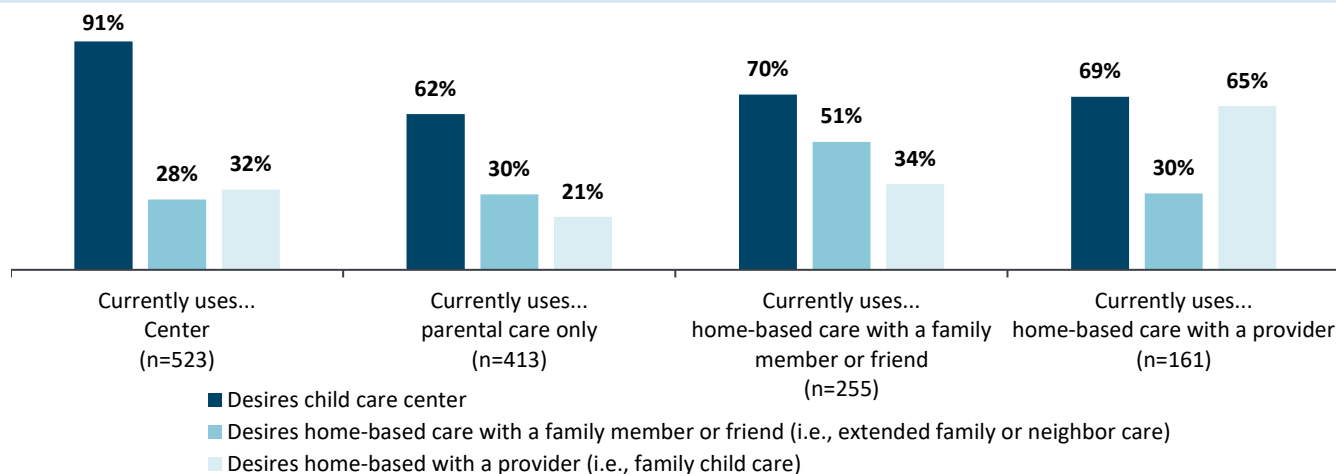


Note: This exhibit presents survey findings from the question, “How satisfied are you with the [characteristic] of your current child care arrangement for your youngest child?” These questions were organized topically into three questions—one focused on “operational characteristics,” a second focused on “provider characteristics,” and a third focused on “opportunities for child development.” Respondents were only asked to report on their satisfaction levels for the characteristics they identified as “most important” in earlier questions. Sample sizes vary by characteristic, from n = 72 for “supports for my child with special needs” to n = 1,120 for “safety and cleanliness.”

Many caregivers indicated a preference for center-based care. Caregivers were asked to select all types of child care they would use if the arrangement was free. Most of the 1,419 caregivers indicated they would choose a child care center (68%), and slightly fewer than a third said they would choose home-based care with family or friend (30%) or home-based care with provider (29%).

Many families, however, reported a preference for the type of child care they were using, indicating some alignment between desired and actual care arrangements. Exhibit 7 shows variation in preference for other types of arrangements based on current arrangement. For example, about two-thirds (65%) of caregivers who were using home-based care with a provider indicated a preference for this type of care. Additionally, when asked a separate survey question, “When was the last time you wanted to start a new child care arrangement for your youngest child?”—about 46% of survey respondents who used parental care only reported “not applicable” because they had “never wanted a care arrangement other than parental care.” Taken together, these findings suggest that while there is a strong preference for center-based care overall, many families also prefer home-based or parental care and are able to access this care.

Exhibit 7. Caregivers’ Child Care Type Preferences by Youngest Child’s Current Care Arrangement

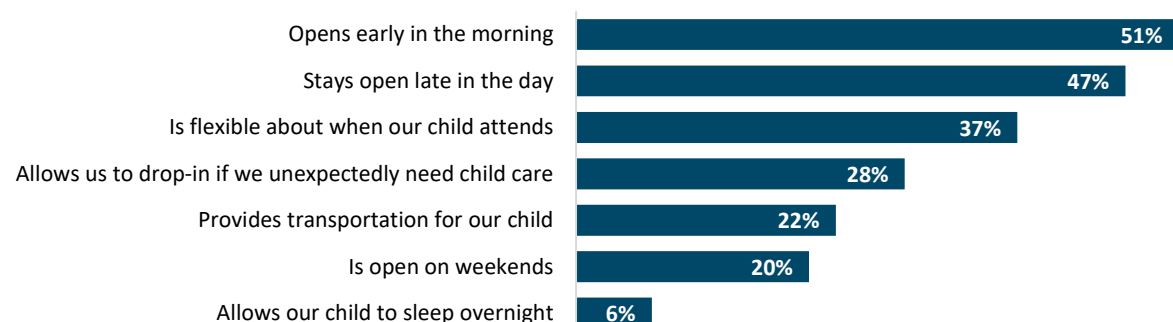


Notes: Desired care is based on the family survey question, “If child care was free for your youngest child, where would you enroll them? (Select up to three.)” Current care is based on survey questions “In the past 12 months, has anyone other than you or your co-parent regularly provided care for your youngest child?” and “In the past 12 months, who regularly cared for your youngest child? (Select all that apply.)”

Caregivers need extended hours and flexible care options to work. Exhibit 8 presents findings from a survey question that asked respondents which child care features would best allow them to work. As shown, around half of the caregivers expressed a need for settings that opened early (51%) and/or stayed open later in the day (47%). This aligned with what we frequently heard from focus group participants—that these flexible care options were not typically available, which made it very hard to balance work and life responsibilities.

“It’s hard to find a job that fits my schedule...a lot of places don’t have mom’s hours. My family came first, so I had to change my jobs a lot. It’s hard for me to get a job. Like a lot of job offers, like full time at a nursing home. They have a lot of jobs, but it’s not gonna work for me.”

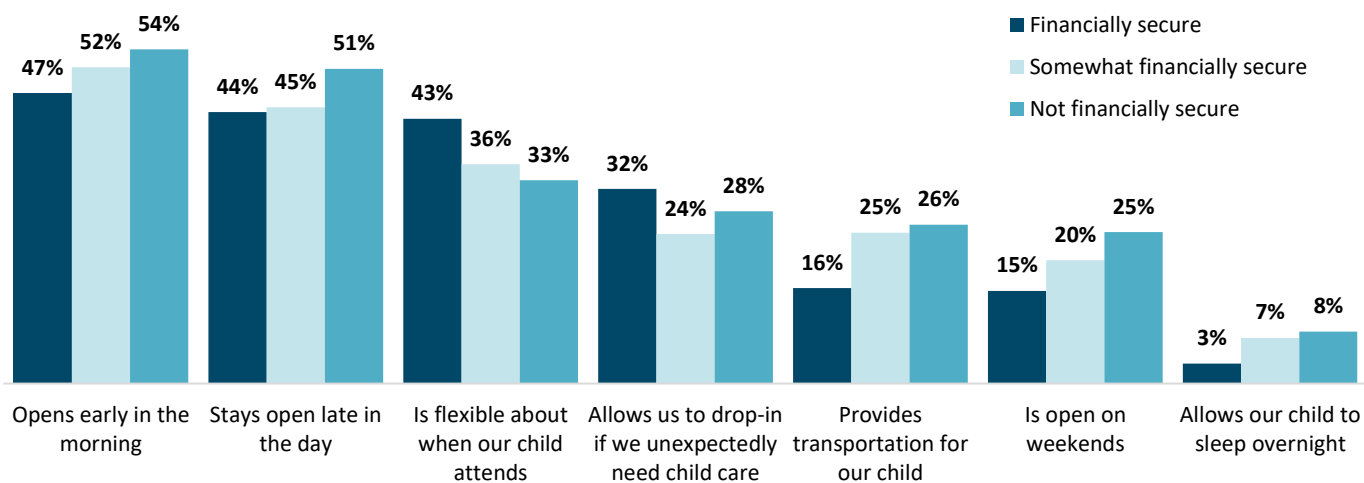
Exhibit 8. Child Care Features that Would Best Allow Survey Respondents to Work



Notes: This exhibit presents survey findings from the question ($n = 1,419$), “If child care was free for your youngest child, what would best allow you and your co-parent (if applicable) to work? (Select all that apply)” All respondents were asked this question.

Some of these flexible care options were more important for families with limited financial security. Exhibit 9 shows preferred features by perceived financial security. Caregivers who were least financially secure were more likely to express a preference for child care that stays open late in the day and is open on weekends. And the families who were most financially secure preferred child care that is flexible about the hours of attendance, and would allow them to drop in. Families who were financially secure were also least likely to endorse needing transportation or arrangements that allowed overnights.

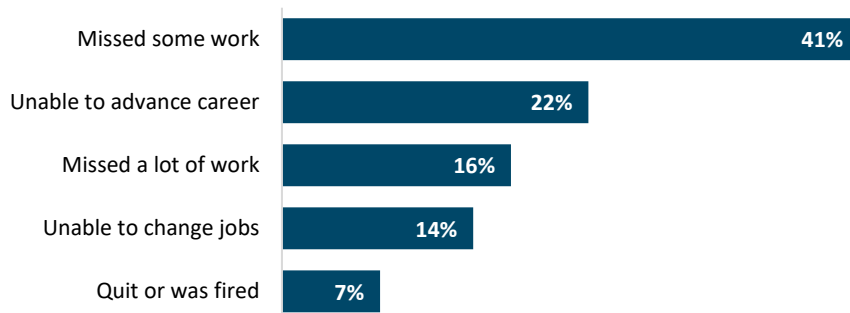
Exhibit 9. Caregivers’ Child Care Needs, by Financial Security



Notes: This exhibit presents survey findings from the question, “If child care was free for your youngest child, what would best allow you and your co-parent (if applicable) to work? (Select all that apply)” All respondents were asked this question ($n = 1,419$), although sample sizes for the subgroups were as follows: not financially secure ($n = 413$), somewhat financially secure ($n = 537$), and financially secure ($n = 463$).

Challenges with child care negatively impacted many caregivers’ ability to work. Close to two-thirds (66%) of survey respondents reported that challenges associated with child care (e.g. time-consuming searches, compromises on convenience and other preferences, opening hours that do not match work schedules, and more) had a negative impact on their ability to work.

Exhibit 10. Impacts of Challenges with Child Care on Survey Respondents' Ability to Work



Notes: This exhibit presents survey findings from the question ($n = 1,420$), "In the past 12 months, how have challenges with child care affected you and your co-parent's (if applicable) ability to work? (Select all that apply)." All respondents were asked this question.

Negative impacts on work were quite common, even for caregivers using mostly seamless formal child care.

Focus group participants described work challenges related to disruptions caused by child care staff absences, shortened operating hours, and unexpected closures, noting that sometimes just having one staff member call out sick could result in a closed classroom or even entire center.

"I literally just had to near quit my job at [workplace name] because... the staff [said] 'I'm not coming in today. Oh, we can't open his class today. We don't have enough teachers.' I'm like, it's 7:30 in the morning. I have to be to work at 8:00 and now you're telling me!"

While frustrated by these child care challenges, it should be noted that most caregivers sympathized greatly with the child care providers.

Caregivers noted the mismatch between tuition costs and what child care teachers are paid and recognized the need for greater investments in the early child care system.

"There is a fundamental problem in child care that it's so low wage...And it's brutal. We pay so much money...and I get it. They're not—this place is not rolling in the dough by any means. But we pay so much money that that dependability should be there. What we're paying to send our kid here they should be able to be reliable 100% of the time, and they should be able to pay their people well. I think that's my biggest issue. If we could wave the wand, there needs to be some way of either employer subsidy, government subsidy, something to help..."

Conclusion

While some caregivers were able to access formal child care and navigate the early childhood system with relative ease, the more typical story in Massachusetts is much more complicated. Most caregivers experienced significant challenges at some point in their journey when trying to find care that was affordable and available, and that met their needs and preferences. These challenges were particularly pronounced among caregivers who were above the income eligibility threshold for CCFA but could not afford to pay full market rate for child care. During these times, caregivers reported cobbling together care, relying on a patchwork of formal and informal arrangements until their child either got into a stable child care setting or finally aged into public school. Most caregivers reported that challenges related to child care had negatively impacted their employment—both in the short- and long-term.

On the other hand, when asked about their satisfaction with those child care characteristics most important to them, caregivers were largely positive, indicating satisfaction with nearly every characteristic except cost. There also was some alignment between the arrangements caregivers were currently using and what they desired. Overall, these findings suggest that while the child care journey is often challenging, families who are able to find care tend to be relatively satisfied with the arrangement they ultimately use.

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About this Project

The Massachusetts Early Childhood Needs Assessment was launched in 2023 as part of the state's [Preschool Development Grant](#). The needs assessment was conducted by MEF Associates and its partners at Tufts Interdisciplinary Evaluation Research (TIER). The overarching goal was to generate information that could support the Massachusetts Department of Early Education and Care in improving families' access to high-quality early care and education. The needs assessment was informed by an advisory group that included family representatives and individuals from the B-5 workforce. This group met monthly and provided valuable input on study design, execution, and interpretation of findings.

About this Series

This publication is part of a series that summarizes findings from the needs assessment. The series summarizes findings from a survey and set of focus groups that gathered input from Massachusetts-based caregivers with children up to age 12. This series includes several standalone products, including:



**Introduction
to the Brief Series**



**Brief I: How and why
do caregivers search
for child care?**



**Brief II: How do
caregivers make
decisions about child
care?**



**Brief III: What do
families use for child
care?**



**Technical Appendix
with
Survey Tables**

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