

Executive Summary

Closing the Gap:

An Assessment of Indiana's Early Learning Opportunities

Access to high-quality early learning opportunities is foundational to a child's success in kindergarten and beyond, a family's ability to achieve self-sufficiency and a community's economic resiliency.

Given the myriad factors that contribute to a family's ability to access early learning opportunities that meet their unique needs, a comprehensive understanding of the state of access in Indiana has been elusive. Through this *Closing the Gap* report (**report**), Early Learning Indiana (**ELI**) has set out to describe the intersections between the various factors contributing to adequate access to early care and education and to provide Hoosier communities with a guide for prioritizing their efforts to improve these factors.

Access to early learning programs has historically been reduced to a quantifiable analysis of supply and demand. These studies are useful in determining whether there is enough capacity in early care and education programs to meet the perceived demand within a given geographic boundary. Where they fall short, however, is in qualifying how well the supply meets the needs of the population, beyond simply ensuring there are enough seats for children who may be in need. ELI developed a new methodology, the Early Learning Access Index (**Access Index**), that attempts to both qualify and quantify access throughout the state. This report moves away from viewing access as simply a capacity supply and demand equation and layers in the additional components of quality, affordability and choice. These four elements, viewed in context with one another, offer a more

robust assessment of Hoosier families' ability to access early learning opportunities that suit their needs.

The Early Learning Access Index is based on the following components:

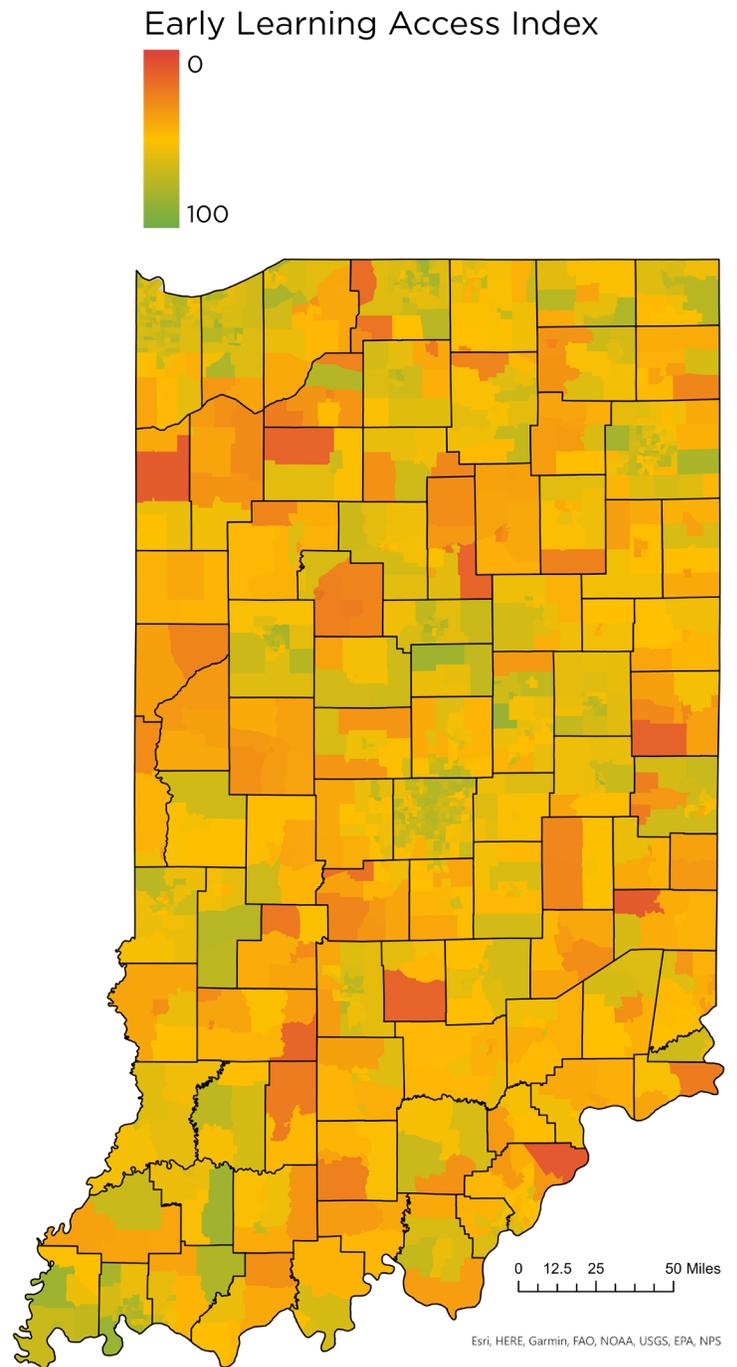
- 1. CAPACITY** - how sufficient the capacity of the early learning programs in the geographic area is, based on estimated need for care. This describes what percentage of children — who may need care in the area — can be served by the existing capacity.
- 2. QUALITY** - how pronounced the capacity of the programs rated level 3 or level 4 on Paths to QUALITY™ is in the geographic area. This describes how much high-quality care might be prioritized in any given area, based on the availability of high-quality capacity over low-quality capacity.
- 3. AFFORDABILITY** - how the average cost of care in the area compares to median family incomes of the population and the prevalence of programs offering subsidized care. This describes how accessible care is to area families based on the proportion of income they would have to spend to enroll in local care options, and if subsidized care options are readily available in their area.
- 4. CHOICE** - how much choice families have among program characteristics that may be preferential. The presence of infant and toddler care options, availability of a variety of program types and availability of programs offering non-traditional hours all factor into this element.

Within the Access Index, each element was assigned a weight to indicate how much it influences the overall score. Capacity and quality each carry a weight of 30%. Affordability and choice are each weighted at 20%. ELI selected these weights based on its belief about the relative priority of each from a public policy perspective, recognizing that other stakeholders may prioritize these differently. At a minimum, there must first be enough seats for children who need them, and ELI believes it is equally important for those seats to be high quality to drive the best learning outcomes for children. ELI perceives affordability and choice to be highly relevant components of access as well, given their importance in family decision-making.

To analyze these factors, ELI leveraged a geographic radial approach. Drawing upon its understanding that families generally prefer to locate early learning opportunities within 20 minutes of their location, ELI established geographic boundaries within 10 miles of the population center of each census tract. As described in detail in the report, this approach enabled ELI to reduce the inequities inherent in establishing boundaries in a geographically-diverse state, in which population levels and resource needs vary dramatically between — and even within — counties.

By evaluating access based on a geographic boundary that aligns with how families generally choose care and by taking four dimensions of access into account, ELI has created a more complete and actionable picture of Indiana’s early learning landscape than traditional child care desert analyses. Using the interplay of all access dynamics as they relate to one another allows stakeholders to target investments and make informed decisions about policy decisions. While the mathematics powering the Access Index may be complex, the outcome and impact are relatively simple. Policy makers, community stakeholders, early learning programs and industry advocates can use this report as a guidepost to determine what is most needed, where it is most needed and how to prioritize system-building initiatives to ultimately empower Hoosier families with access to early learning opportunities that meet their needs.

Early Learning Access Index by Census Tract



Sources: U.S. Census Bureau, 2019 American Community Survey 5-Year Estimates; Indiana Family and Social Services Administration, RCCS, 2021; Child Care Aware of America, National Data System, Indiana, 2021; Indiana Department of Education, INview, 2021

Summary of the Findings

As the report shows, access is not uniform statewide or even countywide, but varies greatly from community to community. Some communities are well sourced in terms of capacity and quality but lack affordability or choice. Other communities have greater scores for choice and affordability, yet lack sufficient capacity or quality. Overall, the findings indicate that nearly every community in the state has opportunities to improve access.

The Access Index has a lowest possible score of 0 and a highest possible score of 100. To streamline findings and provide perspective on the relativity of Access Index scores, ELI developed three categories to indicate whether the overall access level is adequate, moderate or inadequate. In areas with scores less than 60, overall access was deemed to be inadequate, while areas with scores ranging from 60 to 80 were deemed to have moderate access and areas with scores 80 or higher were deemed to have adequate access. These benchmarks were developed based upon an analysis of the distribution of access scores combined with industry and local expertise.

Indiana's overall Early Learning Access Index score is 60.6, which places the state as a whole in the category of having moderate access. It is important to note, however, that the threshold for the moderate category is a score of 60, which means that Indiana is on the cusp of the inadequate access distinction. Only 14% of counties were found to have moderate access and the remaining 86% were classified as having inadequate access. No counties in the state were classified as having adequate access. Counties recognized as urban or suburban are more likely to have moderate access; rural counties are more likely to have inadequate access. At the tract level, 2.6% of census tracts in the state have adequate access and 46.9% of census tracts were found to have moderate access. This means that over half of all census tracts (50.6%) have inadequate access to early learning programs.

In addition to forming the overall Early Learning Access Index, ELI also examined each of its component parts. Each of the following is described with more detail in the report, but important highlights include:

CAPACITY Statewide, the Capacity Sufficiency Rate (CSR) is 55.8%, meaning that existing capacity across all programs can serve just over half of the population of children aged 0 to 5 who may be in need of care. Furthermore, this rate varies widely based upon locality. CSRs in Indiana range from 15.7% in Jasper County to 100.4% in Marion County, and more than two-thirds of all counties have a CSR less than 50%.

QUALITY Throughout Indiana, 46.1% of all early learning capacity qualifies as high quality. However, the percentage of children in Indiana who can be served through high-quality capacity is 25.7%. Over four-fifths of Indiana counties have less than 25% of the high-quality capacity required to serve area children, and more than one-fourth of counties have high-quality capacity to serve less than 10% of local children.

AFFORDABILITY Affordability was considered in two ways — through cost-to-income ratios and prevalence of subsidized program options — to demonstrate how much a family, based on median income, would be expected to pay for child care annually for one child. If a family has multiple children in care, of course, their costs may double or triple based on the number of young children they have. The overall cost-to-income ratio in Indiana is 11.8%. Nearly 50% of Indiana counties have cost-to-income ratios under 10%. Cost-to-income ratios statewide range from 5.9% in Union County to 15.7% in Madison County. Although subsidized programming is available statewide, families who do not qualify for these programs may still find the cost of care to be prohibitive, especially if they are seeking higher-priced, high-quality care. While 83.6% of programs offer one or more of the four subsidized options examined in this report, they are not always located in areas with the greatest need.

CHOICE The fourth component of access is the most subjective — the drivers of a family’s decision about the right learning environment for their young child are many and varied, ranging from educational philosophy to personal fit and beyond. In light of known structural challenges faced by many Hoosier families searching for early care and education opportunities, ELI analyzed three systemic components of choice that influence a family’s ability to make meaningful decisions about care: the availability of infant and toddler care, program type (auspice) variation and availability of non-traditional hours of care. In general, about 30% of programs statewide do not offer infant/toddler care, and only 28% of programs offer non-traditional hours. The median Auspice Score (possible range of 0 to 1, with 1 being the best) among Indiana counties is 0.637.

The full report details more of these findings and offers additional insight into the true state of access in Indiana. The ultimate goal of this report is not only to shed light on access to early learning opportunities within communities, but to equip stakeholders, communities and providers with the data necessary to make informed and strategic choices related to expanding access along any of the four dimensions discussed here. The challenge is great, but the opportunity to build a system of more equitable access for Hoosier children is greater.

Interested in Early Learning Indiana presenting to your organization or discussing this methodology for your state?

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