

Postdoctoral Fellow Child Care Study
Prepared by UM ADVANCE Program
August 2010

Introduction

In fall 2009, all 1,220 postdoctoral fellows on campus were sent a survey asking them about their need for, and satisfaction with, child care options on campus and in the larger community. The survey received 425 responses, a 35% response rate. Of these, 202 respondents (48%) were female. This represents a significantly larger representation of the female postdoctoral fellows in the survey response, compared to 38% in the total sample. Seventy-five percent of respondents identified a school affiliation. Of these, nearly half (43%) of the respondents were postdocs in the Medical School (just slightly under the 48% represented in the total sample). An additional 28% were in LSA (compared to 19% in the total sample) and 9% were in Engineering (compared to 12% in the total sample). Respondents also reported having postdoc appointments in Architecture and Urban Planning, Art & Design, Dentistry, Education, Information, Kinesiology, Natural Resources and Environment, Nursing, Pharmacy, Public Health, Public Policy, and Social Work (20%, compared to 21% of total sample). There was a significantly larger representation of LSA postdoctoral fellows in the sample, compared to post-doctoral fellows as a whole.

Comparison analyses were run by gender, partner status (e.g. whether they reported having a partner) and whether or not postdocs had children. Generally, we found few significant differences between these groups of postdocs. Where we did find notable differences, they are reported below.

We begin this report with a summary of findings from the study. This is following with a more detailed explanation of the sample and data analysis results. Tables are appended at the end of the report.

Summary of Findings

Nearly half of the respondents reported children living them; this was true for both women and men. One third of the sample (35%) had at least one young (pre-school-aged) child and fewer (10%) had only school-aged children. The remaining respondents were either planning to have children (33%) or not planning children (22%), within the next three years.

Postdocs who did not have children, but who were planning to have children within the next three years, expressed the lowest level of satisfaction with child care options available to them (and statistically significantly lower than those with children younger than school age and those not planning children within the next three years). Moreover, parents of infants were less satisfied with options compared to parents of toddlers.

Of those currently using child care, the mean rate of satisfaction with those arrangements was moderately high; however, the level of satisfaction for parents of children younger than school age was statistically significantly higher than that for parents of school-aged children.

These findings indicate that those with children younger than school age, and currently using child care resources, are generally satisfied with their child care arrangements. However, those planning to have children in the near future, and those with infants and in the early stages of securing satisfactory child care, reported significantly lower levels satisfaction with options and/or current arrangements,

suggesting that these new and future parents are coping with unmet needs for child care resources. These findings were similar for male and female postdocs.

Postdoctoral Fellow Demographics

The respondents reported that they had been, on average, postdocs at UM for almost 2 years (mean of 1.97 years), although the number of years as postdocs ranged from 1 to 13. This average was only slightly higher than that for the total sample of 1,220 (mean of 1.46 years). On average, postdocs expected to continue in their positions for about two more years (mean of 2.14); again, the range of years they expected to continue was quite large: from 0 to 11.

Postdoctoral Fellow Family Demographics

Most postdocs (83%) indicated that they had a partner. A few (8%) reported that they live apart from their partners; this was true for approximately equal numbers of men and women. Of those 8%, most (13) lived over 1,000 miles away from their partners, and an additional 5 postdoc respondents lived 500-1,000 miles apart. A few (8) lived 100-500 miles apart, and the remaining 7 lived within 100 miles of their partners.

Nearly half of the respondents (45%) reported that they had children living with them; this was equally true for male and female post docs. Only two (.05%) of the respondents who live apart from their partners had children living with them. An additional 4% had children living apart from them for whom they had child care responsibilities. And six respondents (1.5%) without partners also had children living with them. More than half of the respondents (56.8%) expected to have children in the next three years; of these, 41% already had children and were planning to have more (please see Table 1 for a breakdown of the percentage of postdocs with and without children).

Respondents with children reported, on average, slightly more than one child (mean of 1.51) in their families; the number of children ranged from 1 to 4. Most of the parents had youngest children who were 1 year old or younger (36.5%) or 2-4 years old (43%). Fewer (20%) had youngest children who were school-aged (five or older).

Use of Child Care Options

Those with children under 5 years of age (infant and preschool-aged; n=151) were asked about their use of child care options. Half (50%) indicated that they used off-campus child care; fewer used a relative or friend in their own or the caregiver's home (21%), an on-campus day care facility (15%), a licensed family/group home child care resource (15%), or an in-home nanny or other paid caregiver (13%). Nearly two-thirds of those with children (64%) indicated that they considered cost "a lot" when choosing primary child care; an additional 26% considered it "a little."

Of those with children under 5 years of age who reported that they used on-campus child care (n=22), the breakdown by center was as follows:

- Family Housing Child Development Center (Northwood): 41%
- UM Children's Center: 27%
- UM Towsley Children's House: 18%
- UM Health System Child Care Center: 18%
- UM Children's Center for Working Families: 9%

Satisfaction with Child Care Options

All respondents, regardless of their family situation, were asked how satisfied they were with child care options available to them. To assess satisfaction, we grouped respondents into four categories:

- those currently with children younger than school age (N=151);
- those with no children now who were planning to have children in the next three years (N=138);
- those with school-aged children but no younger children (N=38);
- and those with no children who are not planning to have children in the next three years (N=92).

Parents of school-aged children expressed the highest level of satisfaction with child care options. In contrast, very few postdocs (8%) who did not have children but expected to do so reported satisfaction with options and nearly one-third (32%) were dissatisfied; see Table 2a for frequencies and means by group. The mean score for this group (2.69 on a 5-point scale from very dissatisfied to very satisfied) was lower than that for the other three groups and statistically significantly lower compared to both parents of children younger than school age and those not planning to have children.

Frequencies and means were also calculated separately by gender and are reported in see Tables 2b and 2c; comparisons of satisfaction by gender produced no statistically significant differences.

We further refined these analyses to compare satisfaction levels of two categories of families with children younger than school age: those with infants (one year of age and younger) and those with toddlers (2-4 years of age; see Table 3a). About half of the parents of toddlers (54%) were either somewhat or very satisfied with child care options; this was statistically significantly less true for parents of infants (39% of them were satisfied). The same analyses, calculated separately for men and women post docs revealed no significant gender differences in satisfaction with childcare options (see Tables 3b and 3c).

Satisfaction with Current Child Care Arrangements

In addition, respondents with children were also asked how satisfied they are with their current child care arrangements, again on a 5-point scale from a low of 'very dissatisfied' to a high of 'very satisfied'. Sixty-six percent of those who had children younger than school age reported being somewhat or very satisfied with those arrangements (see Table 4a. Fewer (35%) parents with only school-aged children expressed satisfaction. The mean rates of satisfaction for these two groups of parents were statistically significantly different ($p=.03$).) Tables 4a and 4b report results by gender)

Again, we also compared satisfaction with current arrangements for parents of infants with the same for parents of toddlers and found a moderate level of satisfaction for both groups. About half (55%) of parents of infants reported being somewhat or very satisfied (see Table 5; and Tables 5a and 5b for results by gender). Three-quarters of parents of toddlers expressed satisfaction with their current child care arrangements. This difference was not statistically significant but did reflect a statistical trend ($p=.07$). There were no significant gender differences in satisfaction with childcare arrangements.

Reasons for Dissatisfaction

All respondents were asked to identify which, of a series of reasons, were relevant for any dissatisfaction they reported with the available childcare options; 188 post docs responded. The reasons provided were: safety, emotional tone, stimulation level, number of children, number of caregivers, cost, hours when care is available, and location. The most frequently cited reason was cost; 34% reported this was a reason for their dissatisfaction. In addition, 18% cited hours when care is available,

and 14% identified location as a problem. In addition, a few also noted stimulation level (7%), safety (7%), number of caregivers (5%), and number of children (4%) as reasons for their dissatisfaction.

Compared to women, men reported greater dissatisfaction with cost of childcare. Compared to people who did not have children, people who had children reported greater dissatisfaction with the following aspects of available childcare: the emotional tone, the stimulation level, the number of children, the number of caregivers, cost, hours when care is available, and location.

Respondents were also given an opportunity to volunteer additional reasons for any dissatisfaction; seven identified additional reasons. Two respondents described problems with transportation to and from child care; one noted parking problems. In addition, two expressed concerns about nutrition, one identified the lack of, or poor, outside facilities, and one identified quality in general as a problem. Finally, one respondent reported that the waiting list for University child care is too long.

What Child Care Options Would Make Things Easier

Respondents were also asked to describe what child care options, not currently available, would make it easier for them to fulfill their postdoc responsibilities. More than one-quarter (26 of 109) of the participants responded to this question. Most respondents (34) indicated that affordable child care would make things easier. In addition, 17 postdocs expressed the desire for subsidized funding for child care (including for non-UM facilities) or increased salaries to help support child care expenses. Several participants (29) expressed the desire for more options closer to their work or home; nine articulated the need for more child care options overall; two would prefer options with better access via public transportation; and one postdoc expressed a need for more child care for children under 2.5 years of age.

In addition to more child care options, many expressed a need for longer and/or different periods when child care is available. Fifteen identified extended hours of operation as important. Ten would like emergency or drop-in care—including to care for children while the parent attends required evening events (and funding available to cover that cost), to care for a sick child and to allow travel to conferences; two each reported that day care for snow days or school vacations, after school care, and summer programs for grade school children would make it easier for them to fulfill their postdoc responsibilities.

Several comments addressed the need for changes to policies and/or procedures that would be helpful. Two indicated a need for, or extension of, a maternity leave policy for postdocs. One identified dependent health insurance for live-in grandparents who care for children as valuable; this was identified as especially valuable for international postdocs who, otherwise, could not bring their parents to this country for an extended stay. Another expressed interest in better and/or more information for single postdocs who want to have children. A third wanted a more transparent wait list process, and a fourth suggested free birth control.

Finally, some postdocs identified aspects of the quality of the child care that were important to them. Seven identified quality generally. In addition, three mentioned safety, two noted lower teacher/student ratios, and one described the Northwood Center as “depressing.”

Other Care Demands

Finally, postdocs were asked if there are other care needs for which they are responsible. A few provided responses to this question. Five reported that they are responsible for the care of elderly

parents. Two noted care responsibilities for family members other than children and elders. For example, one noted that women often take on responsibility for more “informal” family care needs (e.g., care for a younger sibling). One described their own health problems that required special needs. Two identified more options for older children, such as after school programs, as important, and one expressed a need for more infant care options. Another postdoc identified the need for more institutional support for breastfeeding and pumping.

Table 1: Cumulative Number of Children for Entire Sample

	N	Cumulative Percentage
4 children	3	100%
3 children	7	99%
2 children	73	98%
1 child	106	80%
0 children + planning	135	54%
0 children + not planning	85	21%

Table 2a: Level of Satisfaction with Options for Child Care for Entire Sample (women and men)

	n	satisfied	neutral	dissatisfied	mean	sd
no children/not planning children	28	7%	89%	4%	3.04	0.33
school-aged children	32	19%	56%	25%	3.03	0.97
children younger than school age	146	46%	22%	32%	3.16	1.11
planning to have children	80	8%	60%	33%	2.69	0.81

Table 2b: Level of Satisfaction with Options for Child Care (women only)

	n	satisfied	neutral	dissatisfied	mean	sd
no children/not planning children	10	0%	100%	0%	3.00	0.00
school-aged children	20	30%	45%	25%	3.20	1.15
children younger than school age	60	47%	18%	35%	3.13	1.21
planning to have children	36	11%	44%	44%	2.61	0.96

Table 2c: Level of Satisfaction with Options for Child Care (men only)

	n	satisfied	neutral	dissatisfied	mean	sd
no children/not planning children	18	11%	83%	6%	3.06	0.42
school-aged children	12	0%	75%	25%	2.75	0.45
children younger than school age	83	47%	24%	29%	3.19	1.03
planning to have children	42	5%	71%	24%	2.74	0.67

Table 3a: Level of Satisfaction with Options for Child Care for Preschool Families Only (women and men)

	n	satisfied	neutral	dissatisfied	mean	sd
infant	65	39%	25%	37%	2.94	1.04
toddler	81	54%	20%	27%	3.33	1.14

Table 3b: Level of Satisfaction with Options for Child Care for Preschool Families Only (women only)

	n	satisfied	neutral	dissatisfied	mean	sd
infant	30	40%	20%	40%	2.93	1.11
toddler	30	53%	17%	30%	3.33	1.30

Table 3c: Level of Satisfaction with Options for Child Care for Preschool Families Only (men only)

	n	satisfied	neutral	dissatisfied	mean	sd
infant	33	36%	27%	36%	2.91	1.01
toddler	50	54%	22%	24%	3.38	1.01

Table 4a: Level of Satisfaction with Current Child Care Arrangements for Those With Children (women and men)

	n	satisfied	neutral	dissatisfied	mean	sd
children younger than school age	143	66%	20%	14%	3.71	1.09
school-aged children	32	35%	47%	19%	3.25	1.08

Table 4b: Level of Satisfaction with Current Child Care Arrangements for Those With Children (women only)

	n	satisfied	neutral	dissatisfied	mean	sd
children younger than school age	58	67%	21%	12%	3.80	1.15
school-aged children	20	40%	35%	25%	3.20	1.20

Table 4c: Level of Satisfaction with Current Child Care Arrangements for Those With Children (men only)

	n	satisfied	neutral	dissatisfied	mean	sd
children younger than school age	82	63%	21%	16%	3.61	1.05
school-aged children	12	25%	67%	8%	3.33	0.89

Table 5a: Level of Satisfaction with Arrangements for Child Care for Preschool Families Only (women and men)

	n	satisfied	neutral	dissatisfied	mean	sd
infant	64	55%	28%	17%	3.53	1.14
toddler	79	75%	14%	12%	3.86	1.02

Table 5b: Level of Satisfaction with Arrangements for Child Care for Preschool Families Only (women only)

	n	satisfied	neutral	dissatisfied	mean	sd
infant	29	55%	28%	17%	3.66	1.26
toddler	29	79%	14%	7%	3.93	1.03

Table 5c: Level of Satisfaction with Arrangements for Child Care for Preschool Families Only (men only)

	n	satisfied	neutral	dissatisfied	mean	sd
infant	33	52%	30%	18%	3.39	1.06
toddler	49	71%	14%	14%	3.82	1.03