

Agenda







Marketing & Social Media

Parent and Provider Payment

Coalition Mission & Goals

Families have equitable access to care that is affordable, high quality, and meets their needs and preferences.

Planning Phase 2023

- What is the Problem
- Why is the Problem Happening



- Who is involved in the Problem
- What Should be Done to Solve the Problem (root cause analysis)
- How Could We Do It (final report)

Coalition Structure

Working Coalition



Affinity Groups



Affinity Groups

Early Childhood System

Municipality

Parents and Caregivers

Employer

Child Care Providers

Economic Development Organization

Building Affinity

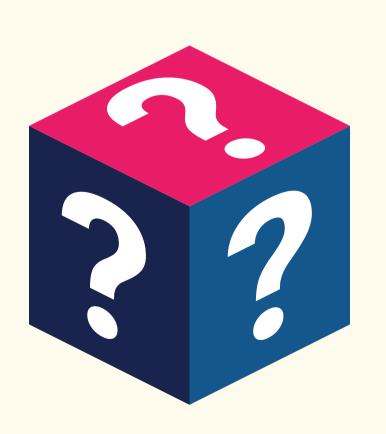
What is your name?

What unique perspective do you bring?

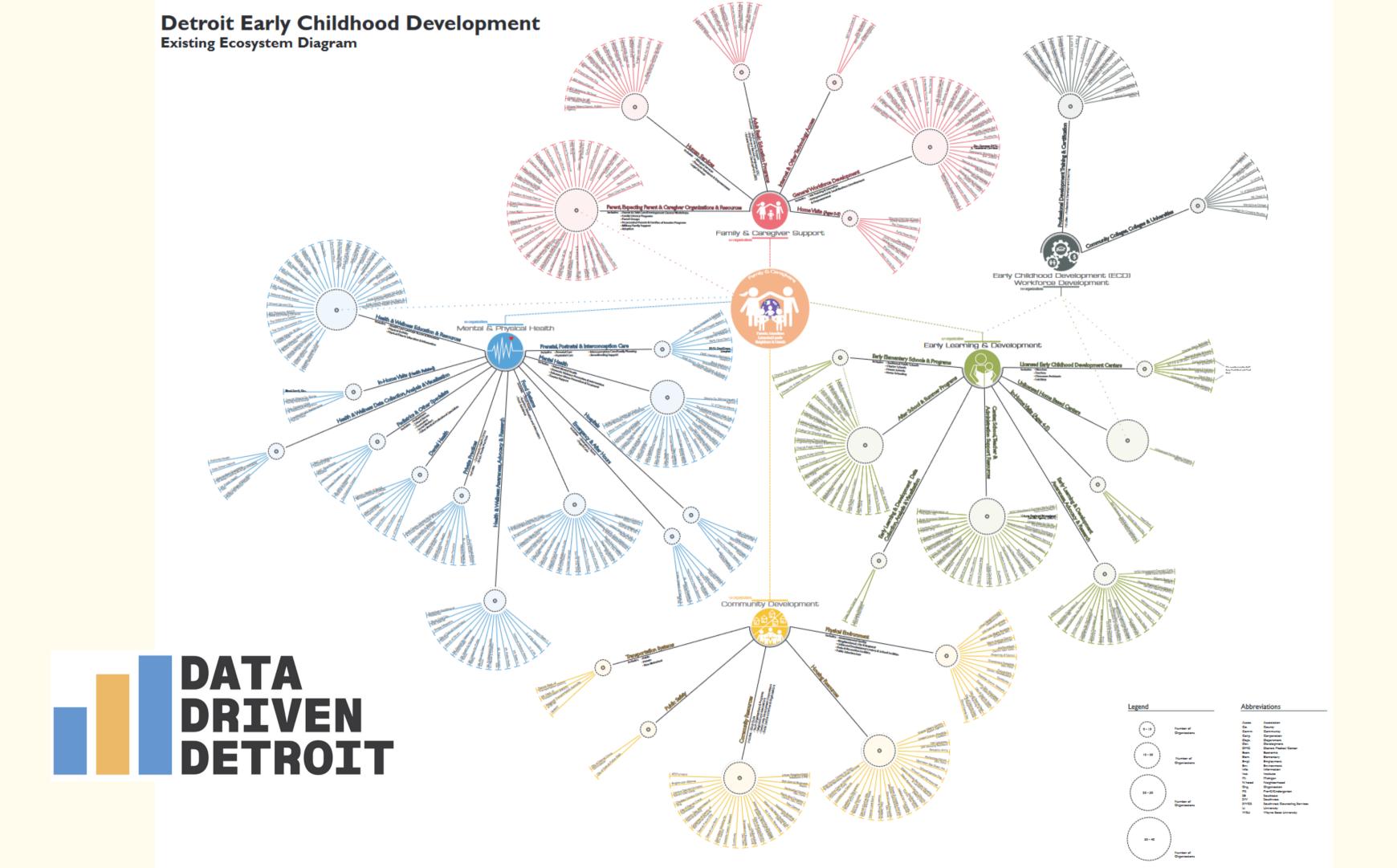
How does child care impact people in your role?

How does your work/life impact child care?

Why is child care a wicked problem?



Part 1



The child care ecosystem is situated within community



- Population changes
- Economic forces
- Housing/building access
- Public services
- Regulatory burdens

Population Wide Angle



Child care is an essential human service provided directly to children & families.

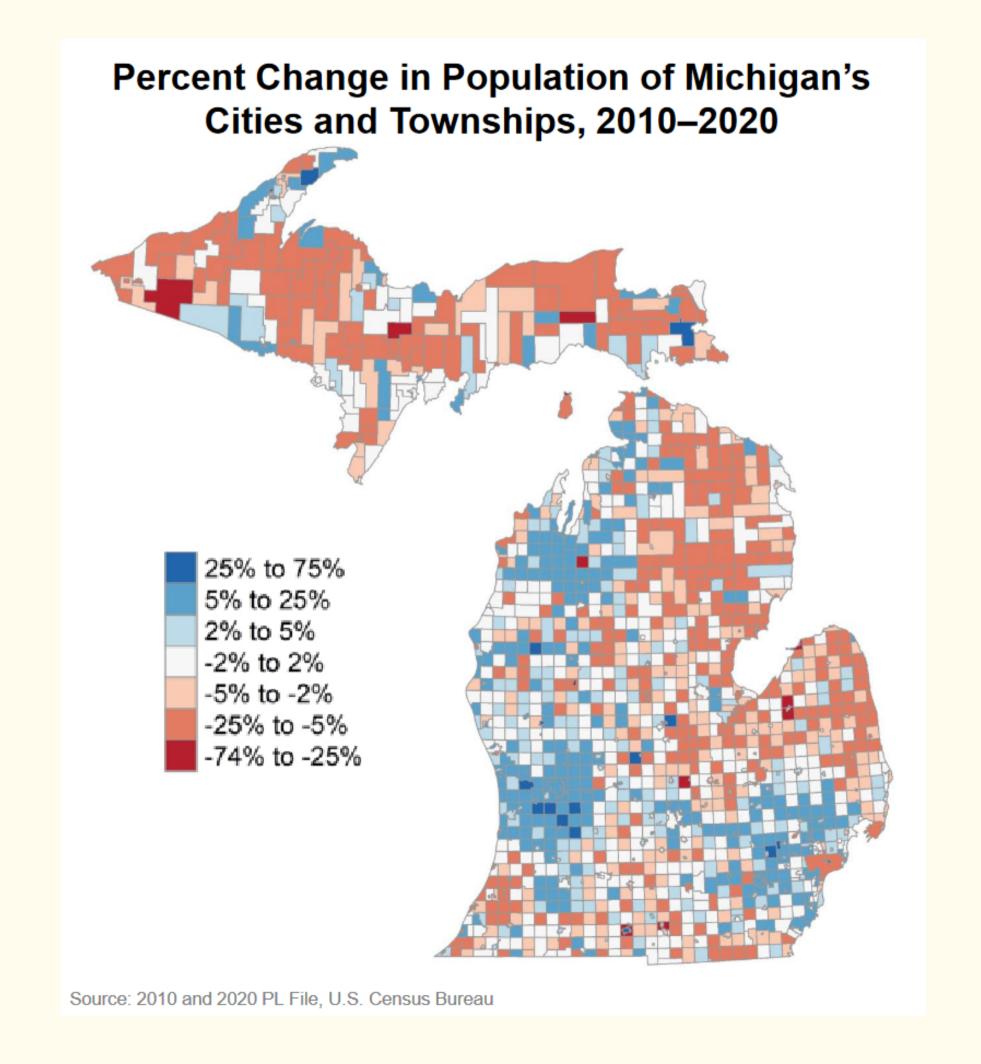


Population

A Shifting Landscape

Michigan's population growth is centered around Traverse City, Grand Rapids, and Southeast Michigan.

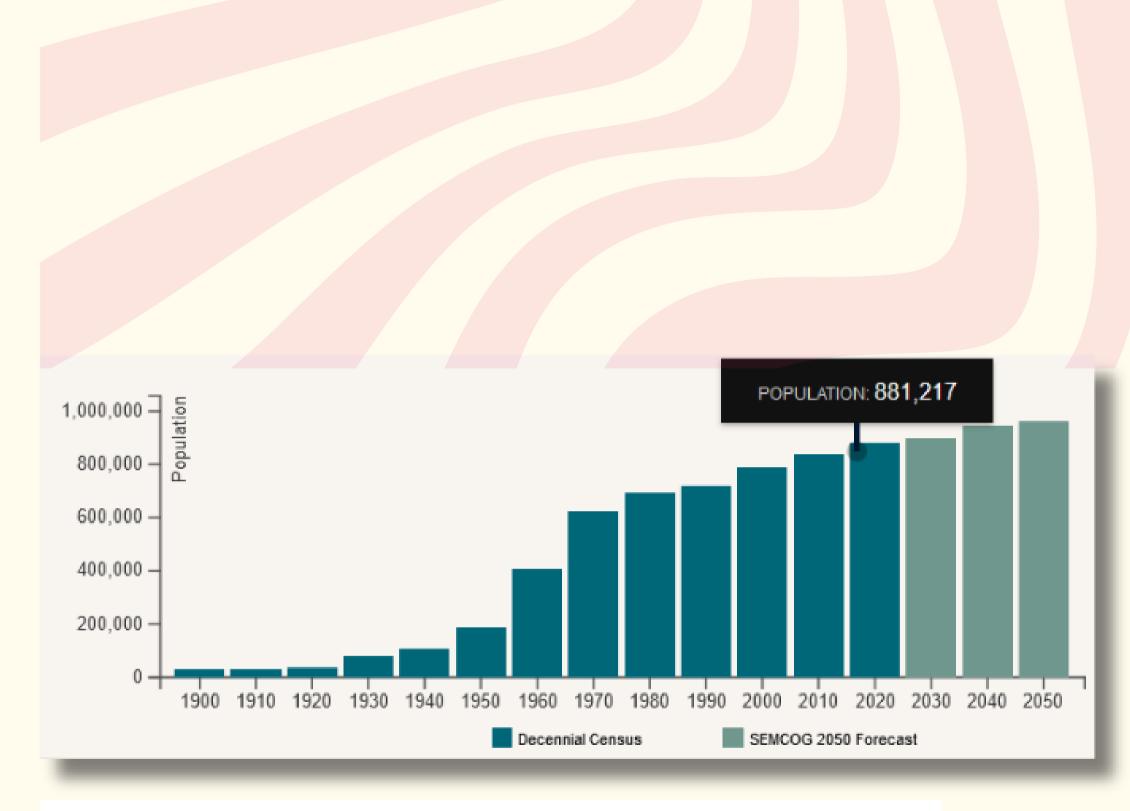
Population decline is occurring across the Upper Peninsula, Northeast Lower Peninsula, and the Thumb.



Macomb County Population Trends

Since around the 1970s, Macomb county has steadily increased in population.

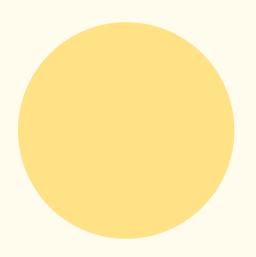
Trends are forecast to continue but the components of growth are important.



Source: U.S. Census Bureau, Decennial Census, and 2017-2021 American Community Survey 5-Year Estimates



Population Is Graying



Macomb's decreasing birth rate means that our economy and workforce must depend more and more on migration.



Source: U.S. Census Bureau, Decennial Census, and 2017-2021 American Community Survey 5-Year Estimates



SOUTHEAST MICHIGAN COUNCIL OF GOVERNMENTS

Macomb County Unpacking Population Change

Components of Population Change	2000-2005 Avg.	2006-2010 Avg.	2011-2018 Avg.
Natural Increase (Births - Deaths)	3,437	2,057	749
Births	12,168	9,607	9,265
Deaths	8,731	7,550	8,516
Net Migration (Movement In - Movement Out)	4,686	386	3,540
Population Change (Natural Increase + Net Migration)	8,123	2,443	4,289

Source: U.S. Census Bureau, Decennial Census, and 2017-2021 American Community Survey 5-Year Estimates



The broad strokes:

- Decreasing birth rate
- Steady death rate
- Varying (but positive)
 migration
- Nearly 5:1 migration gain vs child births

Macomb County Implications

Macomb's migration-heavy population growth is associated with a graying population:

- Largest growth is 65+
- Followed by working age without children
- Largest decrease is households with children

Household Types	Census 2010	ACS 2021	Change 2010-2021	Pct Change 2010-2021 SEMCC
With Seniors 65+	88,550	109,722	21,172	23.9%
Without Seniors	243,117	241,993	-1,124	-0.5%
Live Alone, 65+	36,554	45,320	8,766	24%
Live Alone, <65	56,439	60,241	3,802	6.7%
2+ Persons, With children	105,088	97,932	-7,156	-6.8%
2+ Persons, Without children	133,586	148,222	14,636	11%
Total Households	331,667	351,715	20,048	6%

Source: U.S. Census Bureau, Decennial Census, and 2017-2021 American Community Survey 5-Year Estimates



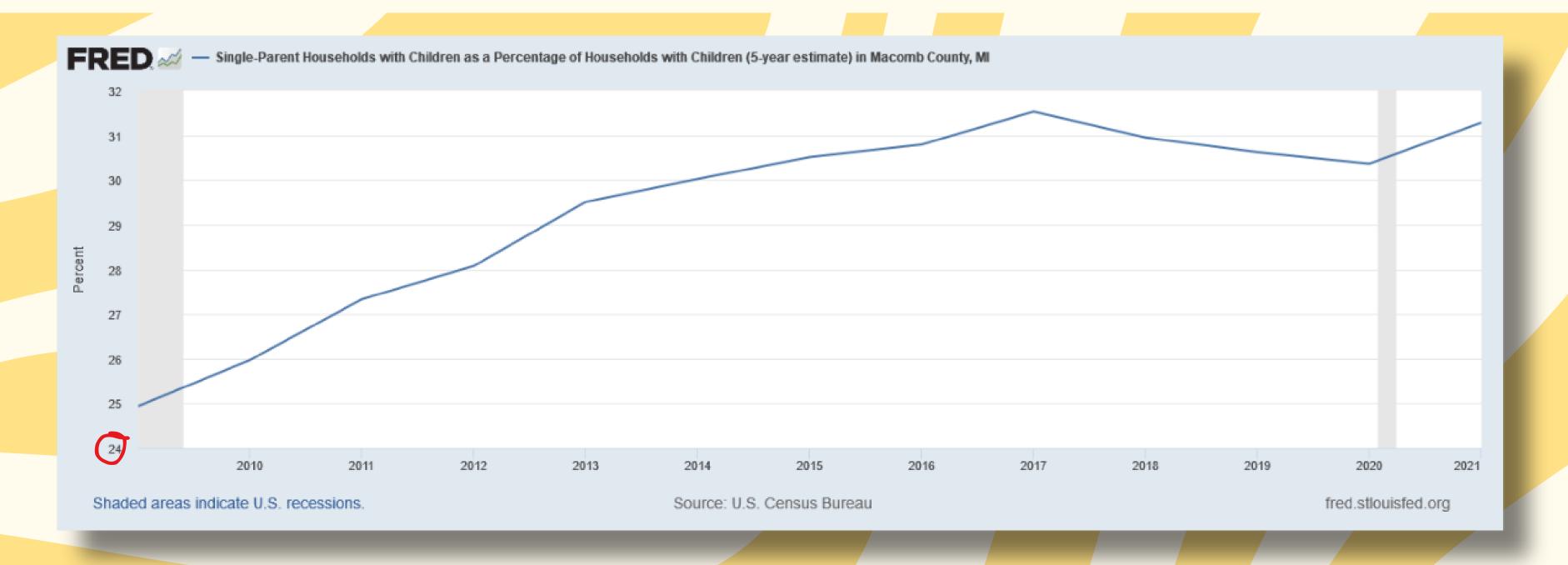
SOUTHEAST MICHIGAN COUNCIL OF GOVERNMENTS

Macomb County Implications

Approx. 31,000

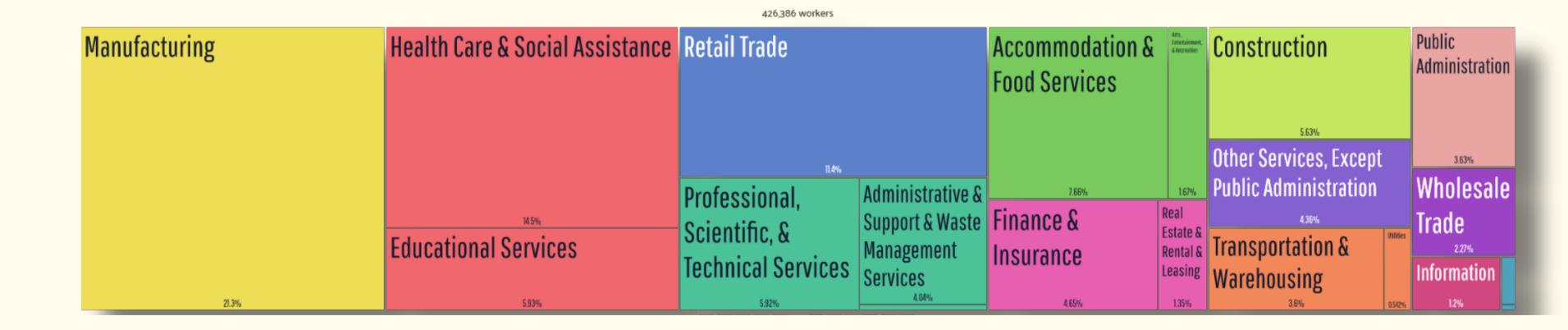
Almost 1/3 of households with children are run by a single parent.

Participating in the workforce necessitates child care solutions.

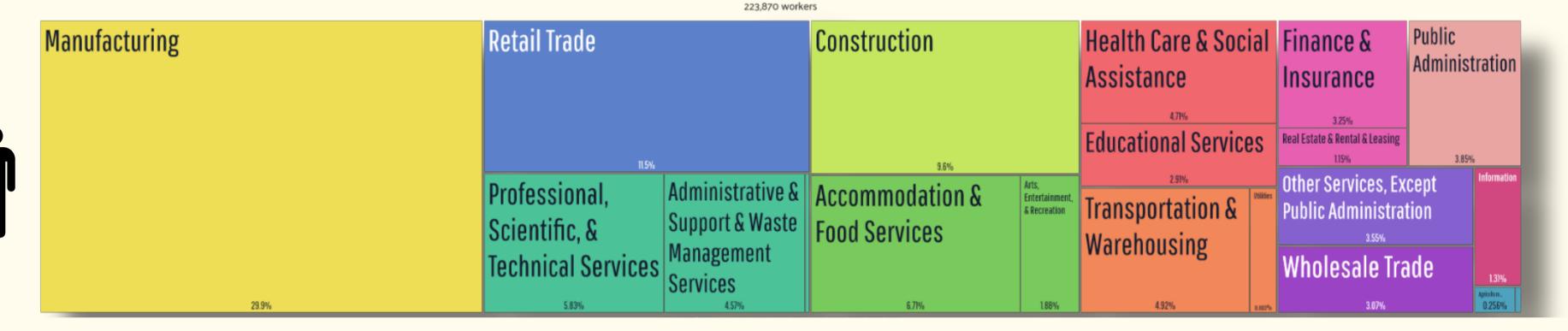


Workforce

At a Glance



Workforce Gender norms impact our work.





Health Care & Social Assistance Accommodation & Food Finance & Educational **Manufacturing** Administration Services Services Insurance Rental Administrative & **Retail Trade** Professional, Support & Waste Other Services, Wholesale Scientific, & Management Trade Except Public Services **Technical Services** Construction Administration

Population

What about the children???

2000 to 2021

Under 5 -3,405

5 to 9 -3,712

Age Group	Census 2010	Change 2000-2010	ACS 2021	Change 2010-2021
Under 5	48,815	-2,247	47,657	-1,158
5-9	52,758	-1,367	50,413	-2,345
10-14	56,245	2,380	53,392	-2,853
15-19	56,807	8,122	52,558	-4,249

Source: U.S. Census Bureau, Decennial Census, and 2017-2021 American Community Survey 5-Year Estimates



Break Out

Discussion



What population trends stood out to you?

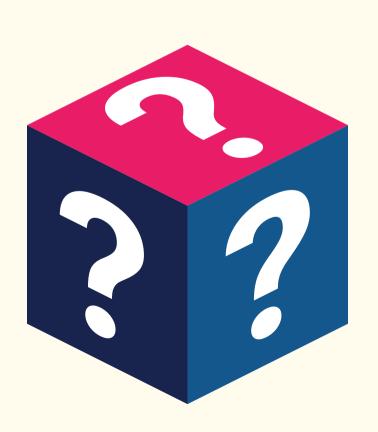


How has what you heard changed or supported your thinking about why child care is a wicked problem?



What do you think is important for us to try to dig into more deeply?

Why is child care a wicked problem?



Part 2

Child Care Definitions

June 9, 2023
479 Licensed Providers
28,038 Licensed Slots

Licensed Center (295): A licensed center-based setting usually with multiple classrooms, including child care, preschool, cooperative, Early Head Start, Head Start and Great Start Readiness Programs.

Licensed Family Home (115): A licensed home-based setting for up to 7 children.

Licensed Group Home (64): A licensed home-based setting for up to 14 children.

School Age Only Care: A center-based program licensed to only serve children ages 4 years 9 months to 12 years.

License-Exempt Providers: are related and unrelated, provide care in their home or the child's and cannot care for more than 6 children at a time.

Friend, Family and Neighbor: Anyone who provides care for children of any age for parents, they are not regulated by the state and can be considered illegal care.

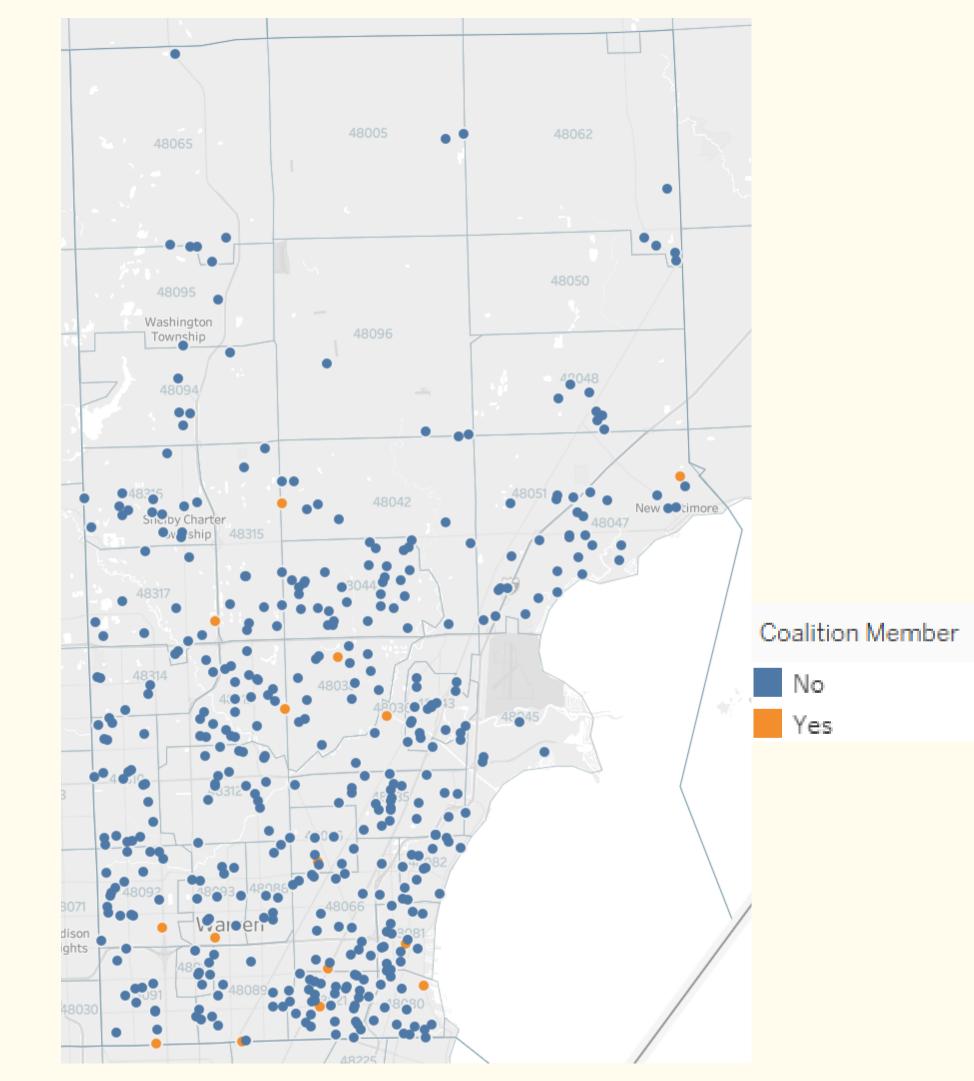
July 19, 2023

Coalition Members

14

Licensed Providers





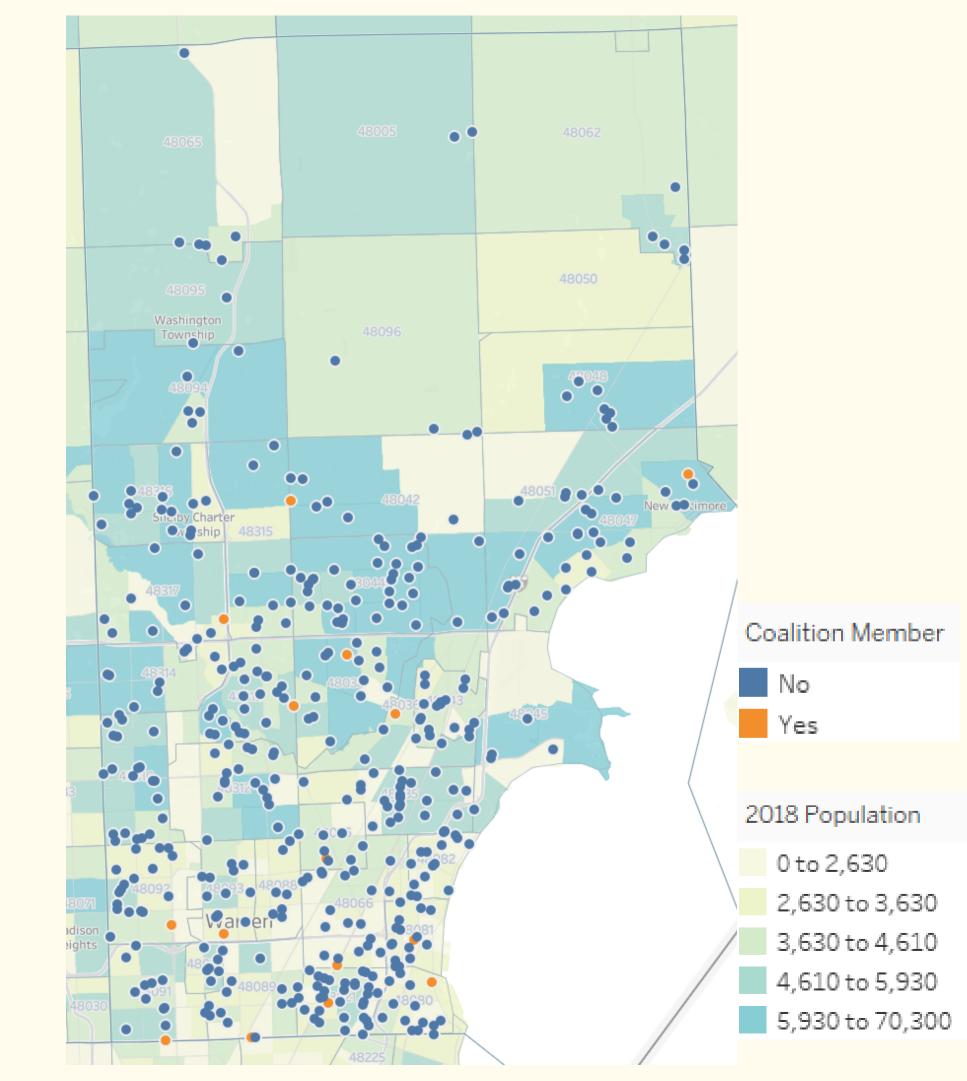
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Licensed Providers





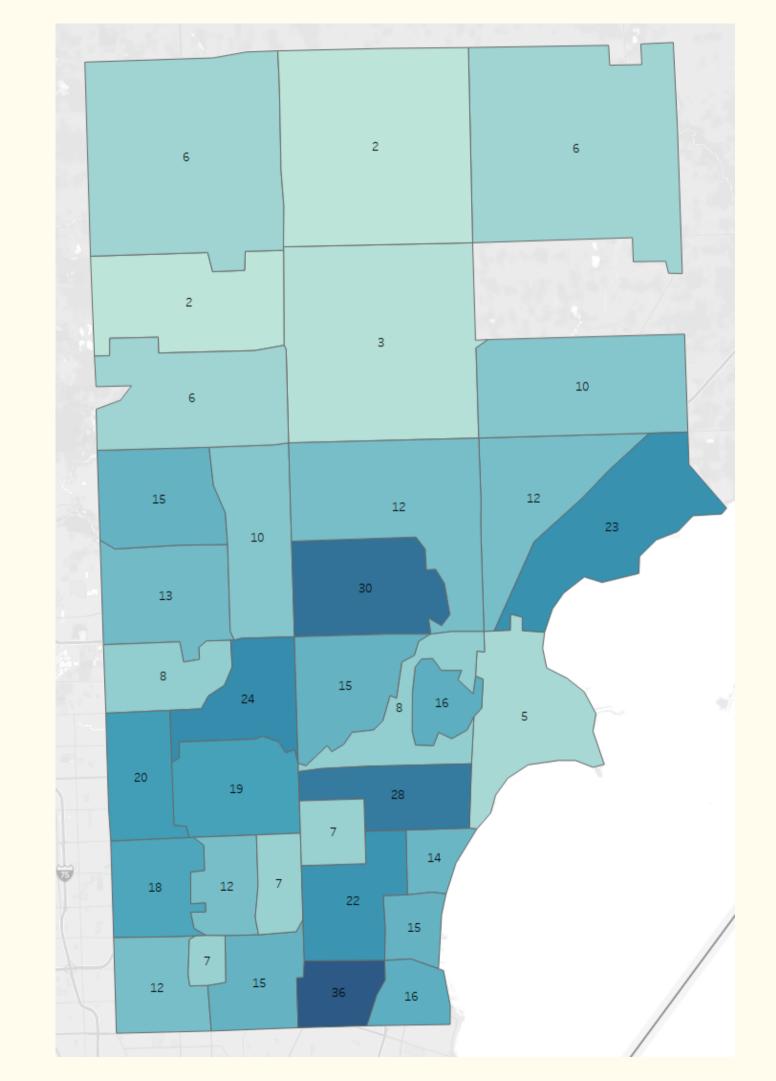
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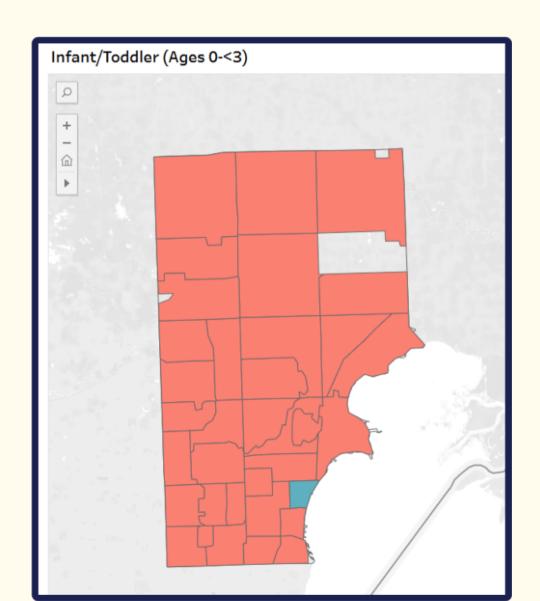
Licensed Providers

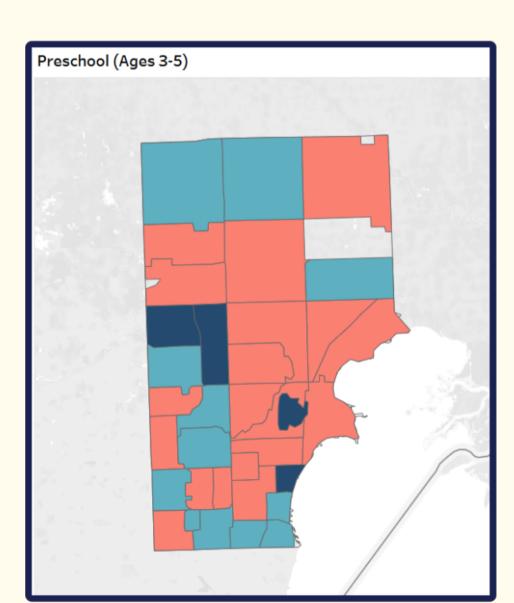




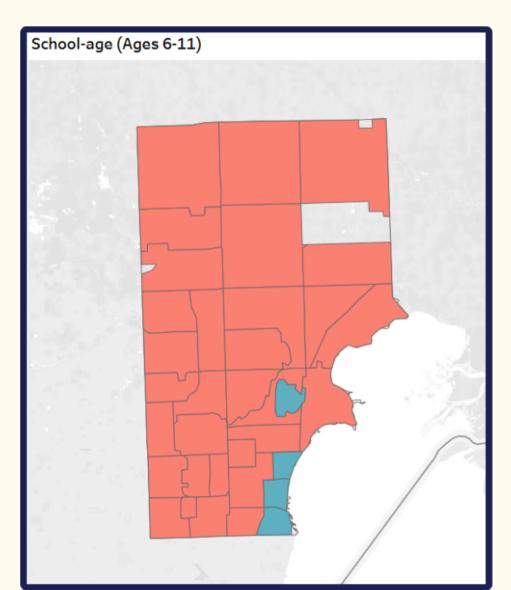
Population

Children & Capacity









Population of Providers



Closures Since July 2019:

241 Licensed Providers 6,052 Licensed Slots

4-Year Closure Rate:

50.31%



High taxes and limited training on tax practices

Stress of isolation

Limited community investment in child care

Provider burnout

Limited or no busines start up funding targetted at providers

CHILD CARE PROVIDERS CAN **OFFER HIGH QUALITY CARE AND EDUCATION WITH FAMILY SUPPORTING WAGES AND** BENEFITS FOR ALL STAFF.

Long hours outside of providing care to complete required paperwork

Cannot retain

qualified staff

Cannot charge for actual cost of services

Multi-layered,
duplicative and
coflciting regulation
requirements

No guaranteed State

investment until

entry into

Kindergarten

Programs are competing for staff and resources

Cannot recruit qualified staff

No income can be generated until business is fully operational

Child care is not seen as a business

Siloed Systems



Child and Adult Care Food Program (CACFP)



























A Comprehensive Fiscal Analysis of the P►5 Prenatal to Five System in Michigan Fiscal Strategies



June 2023

50% Difficulty finding qualified staff

30% Trouble retaining staff

30% Burden of administrative tasks

46% Can't offer competitive salary/benefits

56% Difficulty supporting special needs/behavior health

22% Burden of daily operations (e.g., food prep, cleaning, shopping)



Sample Description

n = 27 providers from Prenatal to 5 Fiscal Strategies

n = 45 providers from (in progress) AIR child care cost study

Stakeholder Surveys Soft-Launch Status

July to Present

Parents and Families

60

Owners/Providers

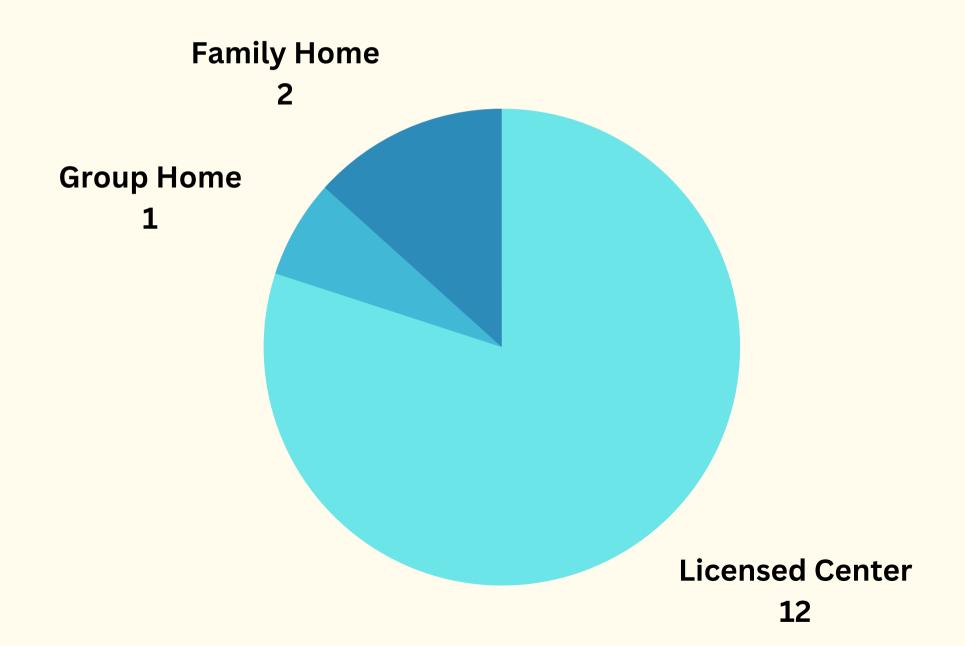
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Employers



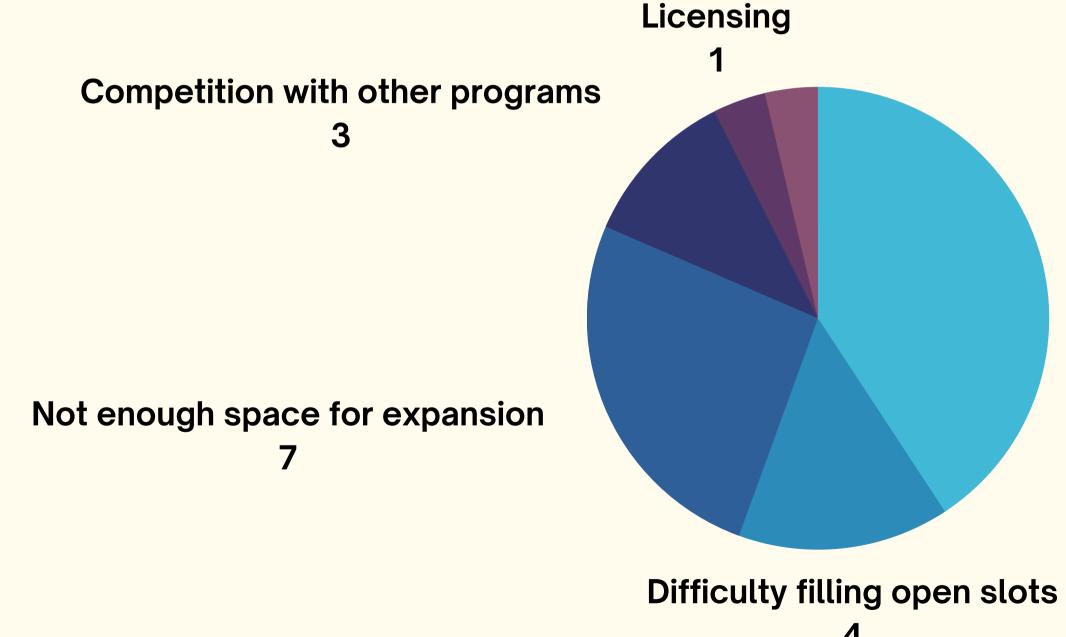
Owners/Providers

Which of the following best describes your child care setting?



Owners/Providers

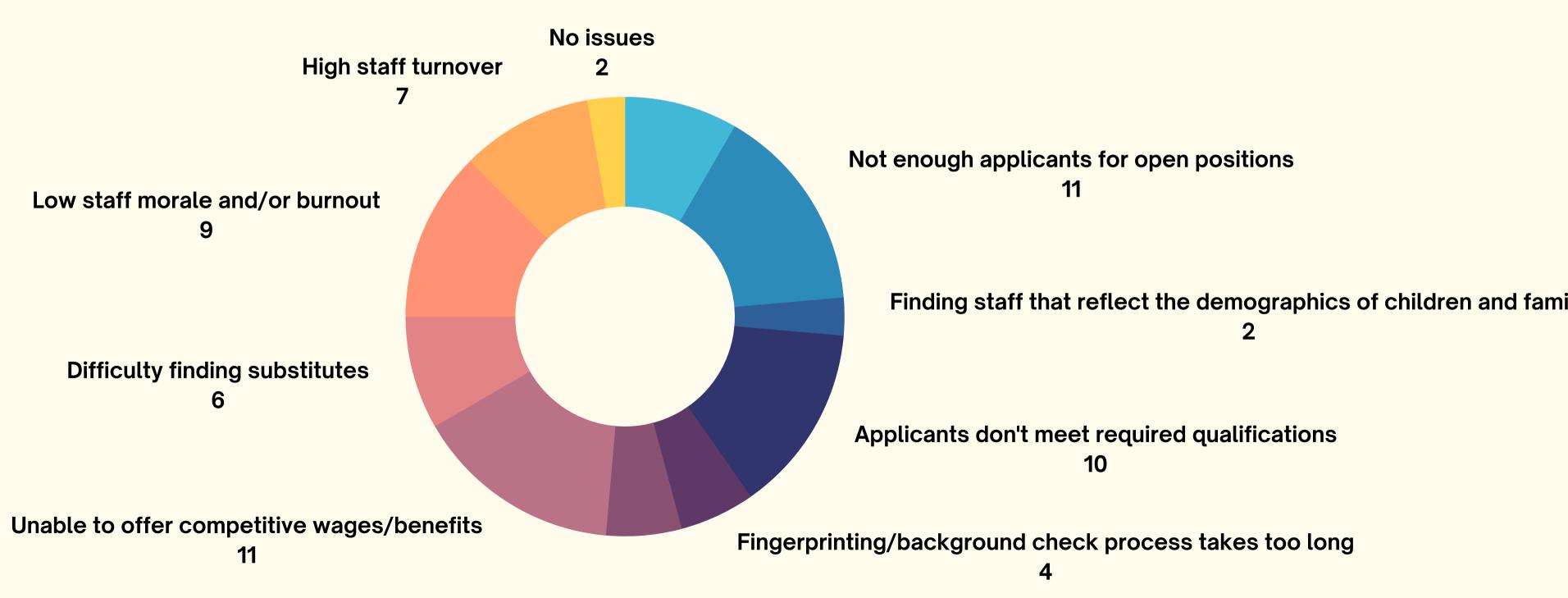
What are challenges impact enrollment/capacity?



Not enough staff to operate at full capacity

Owners/Providers

What challenges or barriers have your program experienced relating to staffing?



Break Out

Discussion



What is something that stood out to you about the provider perspective?



How has what you heard changed or supported your thinking about why child care is a wicked problem?



What do you think is important for us to try to dig into more deeply?

Marketing and Communications

Thank You!

Our next meeting is September 26th from 9:00 to 2:00.

To reach us use info@data-driven-decisions.org.

Please remember, **the success of this work rests** on all of you fully participating, asking hard questions, and staying curious.

Parent and Provider Reimbursement Procedure