



Adding Another Voice:

Caretakers' Experiences Utilizing Philadelphia's Out-Of-School Time Programs

Prepared by *Research for Action* • October 2017

Katrina K. Morrison, Ph.D. • Molly Crofton
Kendra Strouf • Tracey Hartmann, Ph.D. • Rachel Comly



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About Research for Action

Research for Action (RFA) is a Philadelphia-based nonprofit organization. We seek to use research as the basis for the improvement of educational opportunities and outcomes for traditionally underserved students. Our work is designed to strengthen public schools and postsecondary institutions; provide research-based recommendations to policymakers, practitioners, and the public at the local, state, and national levels; and enrich the civic and community dialogue about public education. For more information, please visit our website at www.researchforaction.org.

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Executive Summary

October 2017

Introduction

Nationwide, there is a high demand for out-of-school time (OST) programs, and this demand has not been fully met—particularly in high-poverty areas. Information about caretakers' and children's OST needs can help citywide systems better target the limited resources available for programming.

In 2017, the City of Philadelphia launched its OST strategic initiative in an effort to increase access to, participation in, and quality of OST programs. As part of the strategic initiative, the City hopes to engage caretakers in a conversation to learn more about their needs and perceptions of the OST programs available for their children. **This report begins that conversation by reporting findings from research about Philadelphia caretakers' experiences utilizing OST programs in Philadelphia.**

Methodology

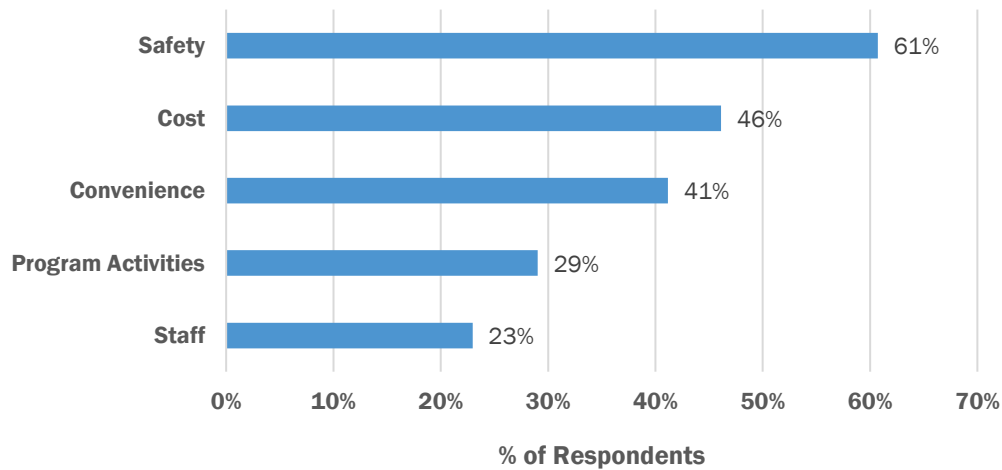
RFA explored caretakers' use of OST programs and the factors that influence use through four focus groups in low-OST, high-poverty zip codes as well as a citywide survey that was completed by 601 caretakers. Survey respondents' characteristics roughly mirrored the City population in race/ethnicity and language spoken at home.

High-Level Findings

Caretakers use OST programs to fulfill child care needs, as well as children's enrichment goals and interests.

Caretakers were asked to rank five qualities of OST in order of importance. Figure ES-1 shows the percentage of survey respondents that ranked each factor as their first or second concern.

Figure ES-1. Top Priorities of Survey Respondents in Choosing an OST Program



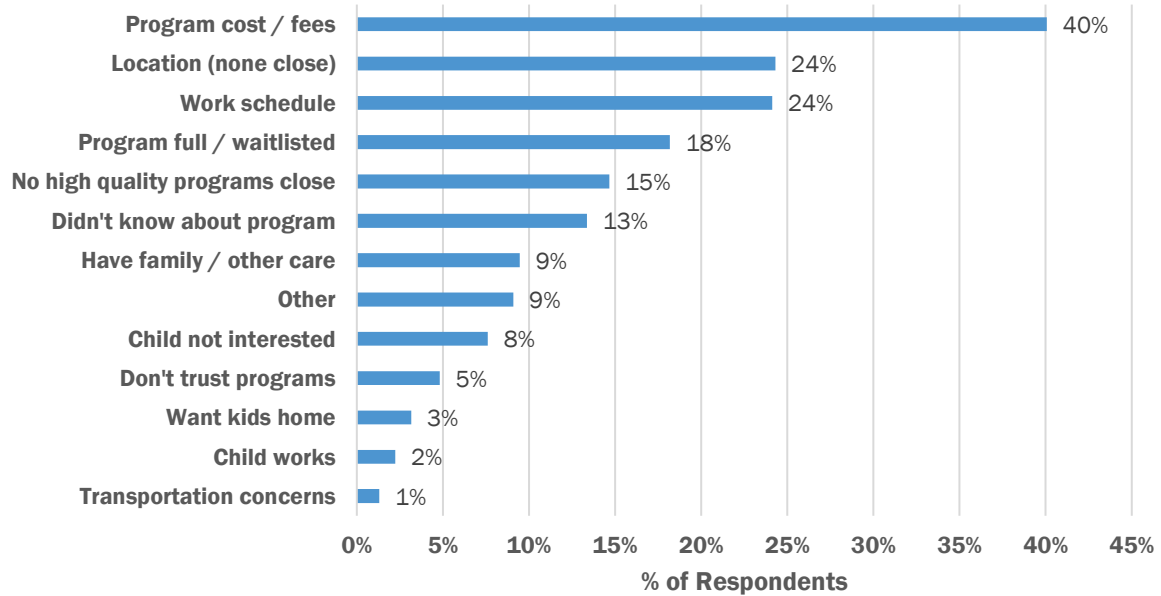
- **Safety, a basic indicator of program quality, was the primary consideration for caretakers when selecting an OST program.** In interviews, caretakers described safety as including program, neighborhood, and school safety.
- **Cost and convenience were the next most commonly cited considerations.** These were also reported as the most common reasons for not using OST programs. (See Figures ES-2 and ES-3 below).
- **One quarter to one third of caretakers also considered other factors related to program quality, including program activities and staffing.** Caretakers' preferences for program content vary by the age of their children: those with older children more often prefer "work experience," whereas those with younger children more often prefer "a range of activities."

These five qualities contain a mix of "access factors" and "selection factors" that drive how caretakers choose OST programs for their child.

- Access factors are those over which a caretaker has little or no control. These include cost as well as location and schedule, which are represented by "convenience" in the figure above.
- Selection factors include the three other qualities (safety, program activities, and staff) that determine the choice of OST programs to which caretakers have access.

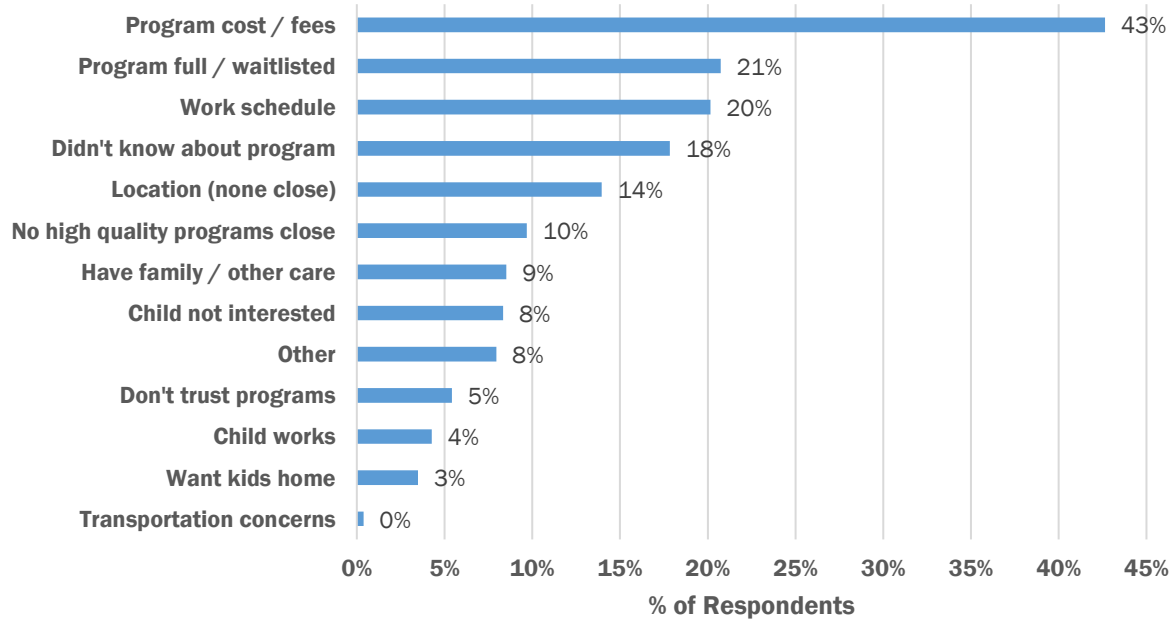
Caretakers were also asked about reasons for not using OST programs. Figures ES-2 and ES-3 display the reasons caretakers reported.

Figure ES-2. Reasons Caretakers Did Not Utilize a School Year OST Program



Note: N=539

Figure ES-3. Reasons Caretakers Did Not Utilize a Summer OST Program



Note: N = 516

As shown in the figures above:

- **The top five reasons caretakers identified for not using an OST program were access factors: cost, availability of seats, schedule, location, and lack of knowledge about programs.** In addition, lack of program information in languages other than English is a barrier to OST enrollment.

Compared to those in other neighborhoods, caretakers in low-OST, high-poverty neighborhoods more often cited:

- Cost as a barrier to enrolling in OST;
- Waitlists and lack of space for programs in which they want to enroll their children; and
- Interest in academic support, particularly homework help.

Caretakers rely on other caretakers and their children's schools as sources of information about OST programs.

Recommendations

Based on these findings and suggestions from caretakers themselves, we provide recommendations for the city's OST system and providers to strengthen Philadelphia's OST system and provide better access to the types of programs and services that caretakers and their children need.

Enhancing OST Program Access

The OST system should consider targeting available funds to increase seats in low OST areas and explore collaborative fundraising to cover equipment costs, particularly for sports programs.

The OST system should focus quality improvement efforts on free and low cost programs. The City's analysis of OST usage found some free and low cost programs with excess capacity. These programs may be underutilized because they are not perceived as safe or high quality. As the OST system moves toward increasing quality, it should prioritize free and low cost programs, particularly those that are currently underutilized.

Ensure caretakers have information about high-quality free and low cost programs. Another factor that prevented caretakers from utilizing OST programs was lack of information about OST programs. Caretakers may not be aware of free and low cost programs that are of higher quality. The City could consider additional strategies to promote these programs.

The OST system should encourage City-funded programs to expand program hours. One quarter of caretakers reported difficulty finding programming before school, in the evenings, and on weekends. In addition, some caretakers reported that OST programs do not always run the entire school year or summer. City funding

streams could encourage or require that funded programs run from the first day to the last day of the school year, and encourage providers to program for longer periods in the summer. In addition, community-based programs—which may be better positioned to offer evening and weekend hours—may consider partnering with school-based programs to provide more continuity of care for working caretakers.

Providers should gather caretaker feedback from specific neighborhoods to determine the access barriers that families face in those communities. We found that some access barriers varied by zip code, but there could be additional location-specific barriers that our research did not uncover. To identify these barriers, providers could solicit feedback from caretakers via focus groups, surveys, town hall meetings, or other community-based events.

Addressing OST Program Selection Concerns

The City and providers should consider forming community advisory groups. Caretakers are well-positioned to advise the City and providers about program safety, staffing, and activities.

The City and providers should develop strategies for monitoring safety in and around OST programs. As the OST system develops its quality assurance system, particular emphasis should be placed on both assessing OST program safety and developing citywide and local partnership to ensure safety within and around the OST

The OST system should consider investing in renovation and maintenance of program facilities. Investing in renovations to older facilities and equipment and hiring staff to help maintain buildings, parks, and other resources used in OST would both contribute to safety and increase program desirability. In RFA's [Scanning the System](#) report, providers particularly noted the shortage of high quality gymnasium spaces.

To address caretakers' program selection concerns, providers could regularly evaluate staff performance and ensure a range of program options addressing differing program needs.

Increasing OST Program Awareness

The City should coordinate with the District and schools, as well as local and citywide caretaker groups, to distribute information about OST programs.

The City and providers could utilize online platforms to increase awareness about OST programs. Because caretakers rely heavily on information from other caretakers, the OST system and providers should intentionally gather caretaker feedback and look for ways to make this feedback publicly available.

The City and providers should provide program materials translated into multiple languages. The OST system can support providers in translating program materials and websites into relevant community languages.



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Section I. Introduction

Nationwide, there is a high demand for out-of-school time (OST) programs, and this demand has not been fully met. A report based on a national parent survey showed that the number of parents who said that they would enroll their children in OST programs if they were available increased from 15.3 million in 2004 to 19.4 million in 2014.¹ According to the AfterSchool Alliance's 2016 report, "America After 3PM," 56% of parents living in poverty areas whose children were not in an afterschool program would enroll their children if an afterschool program was available to them, and 66% would like their children to participate in a summer learning program. Moreover, this demand for afterschool and summer learning programs was higher among parents in concentrated poverty areas when compared to national averages.

Parents and guardians, referred to as "caretakers" throughout this report, may seek OST programs for their children for different reasons, including a need for childcare or a desire to provide enrichment activities during non-school hours.² However, access to OST programs varies, and the reasons for selecting programs may also vary based on the circumstances of the caretaker as well as the needs of the child. Outreach to caretakers to better understand their needs, desires, and access to OST programs can help city planners, OST providers, and community partners respond to OST program demands. Such research also gives caretakers a voice in the development of the OST system³ and increases the likelihood that available programming is utilized. Ultimately, information about caretakers' and children's OST needs can help citywide systems better target the limited resources available for programming.

In 2017, the City of Philadelphia launched its OST strategic initiative in an effort to increase access to, participation in, and quality of OST programs. As part of the strategic

¹ AfterSchool Alliance. (2014). America After 3PM: After School Programs in Demand.

² Strawhun, J., Parnell, K., & Peterson, R.L. (2014). Out-of-School Time Programs. Strategy Brief.

³ Hayes, C., Lind, C., Baldwin Grossman, J. et al. (2009). Investments in Building Citywide Out-of-School-Time Systems: A Six City Study. The Wallace Foundation.

initiative, the City hopes to engage caretakers in a conversation to learn more about their needs and perceptions of the OST programs available for their children. **This report begins that conversation by reporting findings from research about Philadelphia caretakers' experiences utilizing OST programs in Philadelphia.**

Philadelphia's OST system: Understanding OST Access and Usage

Philadelphia's OST strategic initiative stems from a larger effort, begun in 2012 through a grant from the Wallace foundation, to create a coordinated "OST system" called PhillyBOOST. This out-of-school time system is funded and managed by the Department of Human Services, Philadelphia Parks and Recreation, and the Free Library of Philadelphia.⁴ The PhillyBOOST system is characterized by its data collection efforts through a citywide Efforts to Outcomes (ETO) database. This database has enabled the City to examine patterns of OST usage across the City and to better understand where there are gaps in the availability and utilization of OST programs. To date, PhillyBOOST data has been used to identify 11 zip codes considered "low-OST areas," where fewer OST seats per child with at least one risk indicator⁵ are available. In addition, the analysis has identified areas where funded programs have more capacity than is being utilized.

An Overview of This Report

This report endeavors to illuminate the experiences of caretakers in accessing OST programs in Philadelphia, as well as their decision-making about OST programming. Drawing upon survey and focus group data from caretakers, it adds another important voice to the City's efforts to improve programming and realign current OST-related funding to support a shared, inclusive, and coordinated system that sets and reaches ambitious goals on behalf of young people. The report addresses the following topics:

- OST usage patterns,
- Barriers to accessing OST programs,
- Factors that affect caretakers' selection of OST programs, and
- How caretakers learn about OST programs.

The Methodology Overview, below, describes the focus group and survey participants that informed this analysis.

⁴ <http://www.phillyboost.com/project-overview.html>

⁵ Risk indicators used to identify elementary-aged children include preterm birth, low birth weight, inadequate prenatal care, teen motherhood, low maternal education, lead exposure, homelessness, and child maltreatment. For middle school and high school calculations, the number of youth in poverty was used as the number of youth at risk.

Methodology Overview

In this study, RFA conducted four focus groups. Data from these focus groups and items from existing survey instruments with similar purposes were used to develop an OST Community Perceptions survey, distributed in Spring 2017.

Focus Group Sample

RFA conducted 60-minute focus groups with 27 caretakers in three zip codes identified by the City as having a relatively low number of OST providers. OST providers in these zip codes organized the focus groups. Table 1 describes the focus group sample.

Table 1. Focus Group Sample

Category	Focus group participants
Total	<ul style="list-style-type: none"> • 27
Ages of Caretakers' Children	<ul style="list-style-type: none"> • Child ages 5 – 10: 41% (11/27) • Child ages 11 – 16: 30% (8/27) • Child ages 17 – 20: 15% (4/27) • “School-Aged” child: 19% (4/27)⁶
Race	<ul style="list-style-type: none"> • 59% (16/27) White • 41% (11/27) Black
Ethnicity	<ul style="list-style-type: none"> • 22% (6/27) Hispanic • 78% (21/27) Non-Hispanic
Gender	<ul style="list-style-type: none"> • 26% (7/27) Male • 74% (20/27) Female
Zip Codes (Number of participants)	<ul style="list-style-type: none"> • Focus Group 1: 19134 (7) • Focus Group 2: 19143 (10) • Focus Group 3: 19134 (3) • Focus Group 4: 19120 (7)
Participants who live in a low-OST area (by zip code) ⁷ (Defined as zip codes with lowest ratios of OST slots to youth in poverty or with at least one Early Childhood risk factor)	<ul style="list-style-type: none"> • 100% (27/27)
Participants who live in a high-poverty area (by zip code) (Defined as zip codes where $\geq 20\%$ of the population is below the poverty line)	<ul style="list-style-type: none"> • 100% (27/27)

⁶ Specific ages unknown.

⁷ All low-OST areas are also poverty areas, but there are poverty areas that are not low-OST areas.

Survey Sample

The Community Perceptions survey was distributed as an anonymous, open, online survey. The survey and its URL were publicized through city departments, OST providers, flyers, and OST provider websites. The survey was available in Spanish and English.⁸ In total, 601 caretakers responded to the survey, and respondents' characteristics roughly mirrored the City population in race/ethnicity and language spoken at home.

Caretaker Subgroups

The survey analysis examined patterns in the aggregate as well as by various caretaker subgroups. We constructed variables and created subgroups related to ages of caretakers' children, marital status, zip code poverty level, and home language⁹ in order to analyze differences based on these characteristics. Given prior research, we also identified respondents who reside in "low-OST areas"¹⁰ and created a subgroup of respondents who live in those zip codes. In Appendix A, we provide descriptive statistics on these constructed variables. In Appendix B, we present a map of Philadelphia showing the zip codes in which survey respondents reside.

Table 2 displays the characteristics of survey respondents compared to the population of Philadelphia.

Table 2. Survey Sample

Category	Survey respondents	Philadelphia ¹¹
Households with Children under 18	601 respondents	158,046 residents
Race	29% Black 27% White 2% Asian / Pacific Islander <1% Native American 8% Multi-racial 10% Other 23% Missing ¹²	43% Black 41% White 6.3% Asian / Pacific Islander <1% Native American 2.8% Multi-racial
Ethnicity	14% Hispanic 55% Non-Hispanic 31% Missing	12% Hispanic 88% Non-Hispanic

⁸ The survey was also offered in Spanish, the second most commonly spoken language in Philadelphia, because 10% of the city's population speaks Spanish as a home language. Due to cost constraints, the survey was not offered in any other languages.

⁹ The survey response data shown in Table 2 displays data for 'Languages Spoken at Home' as English, Spanish, and Other. However, the home language subgroups throughout the report are analyzed by two subgroups: English and all other home languages.

¹⁰ Researchers from the Citywide OST Initiative analyzed data from multiple sources to construct a ratio of program capacity (the number of seats available) versus population need. Need was calculated as the number of youth with at least one Early Childhood Risk factor (for elementary youth) or living in poverty (for middle and high school youth) in the zip code. That analysis yielded a list of 11 zip codes that have the lowest ratio and are therefore referred to as "low-OST areas." Consistent with previous research, these zip codes were also found to be high-poverty areas.

¹¹ U.S. Census Bureau, 2011-2015 American Community Survey 5-Year Estimates

¹² The percent missing represents the percent of survey respondents who did not answer the survey question. Missing data are excluded from analyses. As such, sample sizes for figures, charts, and graphs throughout report vary, depending on the number of respondents who answered each particular question.

Language Spoken at Home	75% English 6% Spanish 2% Other (including Chinese, Russian, Arabic, etc.) 17% Missing	78% English 10% Spanish
Income	33% Income <\$48,000 39% Income >=\$48,000 28% Missing	60% income <=\$49,999 40% income >\$49,999
Poverty Area	62% of sample live in a poverty area 37% do not live in a poverty area 1% Missing	
Low-OST Area	30% of sample live in a low-OST area 68% do not live in a low-OST area 2% Missing	
Caretaker relationship to child	49% Married or partnered parent 37% Single parent 10% Other family member 3.5% Other nonfamily	

Section II. Use of OST Programs

In this section of the report, we present findings related to caretakers’ motivations for using OST programs and their patterns of OST use.

Motivations for Utilizing OST Programs

Why do Philadelphia’s caretakers utilize OST programs? Are they primarily seeking OST programs as childcare or as enrichment? Prior research has shown that caretakers may have different motivations when enrolling children in these programs.¹³ For those seeking childcare, OST is more often seen as a necessity, while for those seeking enrichment, it may be more optional. Our survey queried reasons for using OST programs.

Caretakers use OST programs to fulfill child care needs, as well as children’s enrichment goals and interests. Elements of OST programming most often cited as important were:

- Keep my children active (99%)
- Allow my children to pursue their interests/hobbies (96%)
- Expose my children to new things (93%)
- Child care (86%)

Child supervision was especially important to one focus group caretaker, who explained the importance of having “reliable and trustworthy” childcare:

¹³ Strawhun, J., Parnell, K., & Peterson, R.L. (2014). Out-of-School Time Programs. Strategy Brief.

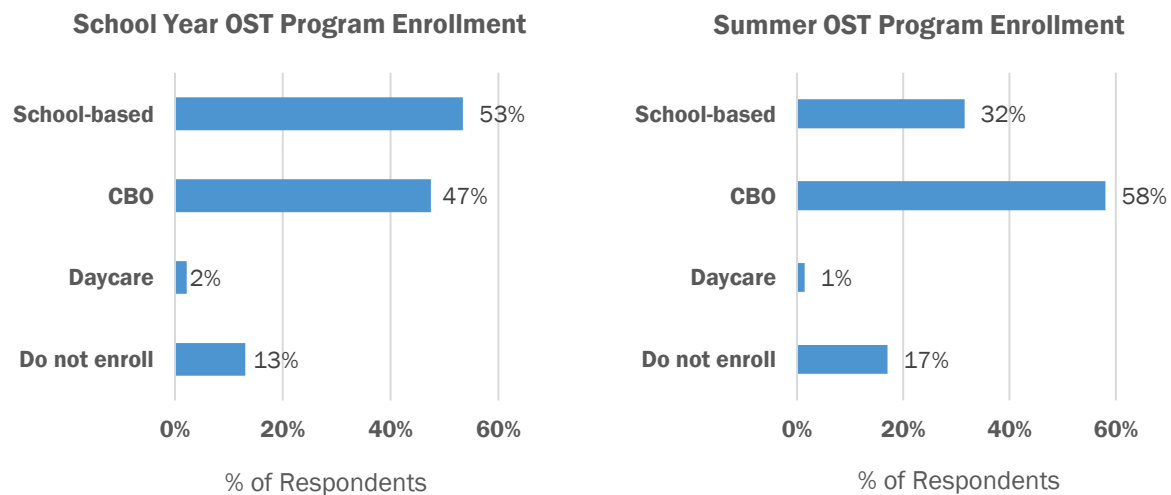
When you say ‘out-of-school care’ or ‘out-of-school time,’ right away what my mind goes to is daycare. Not so much even the sports and things like that, although they’re important. Most important for me, I know...is someone who is reliable and trustworthy... Out-of-school time for me is daycare, because there aren’t many safe options.

While the caretaker prioritized child care, she also described the importance of a trustworthy staff and safety in child care, which we discuss in Section III of this report.

Use of OST Programs: School-Year versus Summer

Caretakers utilize OST programs over the entire year, but their school year and summer use may differ. To understand patterns of OST program use, our survey asked caretakers about their use of OST programs during the summer and school year and whether their programs were provided by school- or community-based organizations (CBOs). Figure 1 displays reported use of OST programs by season.

Figure 1. Types of OST Programs Used During the School Year and Summer¹⁴



Note: School Year N=590, Summer N=558

Figure 1 shows:

- **Survey respondents reported using school-based OST programs more during the school year and community-based organization (CBO) OST programs more in the summer.** This could be related to the fact that schools are more accessible during the school year than they are during the summer.
 - During the school year, slightly more than half of respondents enrolled their children in a school-based OST program, compared to slightly less than half who enrolled in a CBO program.

¹⁴ In our survey, “school-based programs” were those that took place at a public school, charter school, or private/parochial school. “Community-based organization programs” were those at a recreation center, playground, library, religious institution, university, or other community organization. “Daycare” represents respondents who stated their child went to daycare in lieu of an OST program.

- Conversely, during summer, only a third of respondents sent their children to a school-based OST, while nearly two thirds said they sent their child to CBO programs.

Caretakers of children in grades K-3 more often reported sending their children to school-based programs during the school year compared to caretakers of older children (60% vs. 50%).

Relatedly, caretakers in poverty areas¹⁵ more often sent their children to public school-based OST programs compared to families who did not live in poverty areas (30% vs. 19%). Respondents who did not live in poverty areas reported sending children to OST programs at private/parochial schools more often than poverty area respondents (19% vs. 9%).

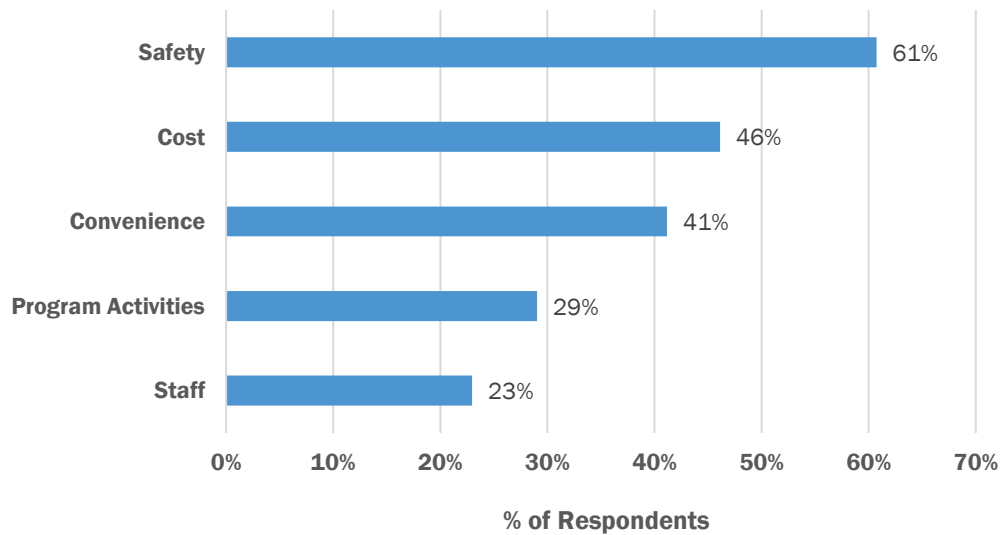
The majority of caretakers who sent their children to school year programs enrolled them in different programs in the summer. Eighty-five percent of survey respondents utilized OST programs during the school year, and 77% utilized OST programs during the summer. More than half (60%) of respondents who sent their children to programs during the school year did not send their children to the same program during the summer.

Section III. Access to and Selection of OST Programs

As described above, caretakers used OST programs for child care and enrichment and often used different programs during the school year than in summer. To understand how they decided which school year and summer programs to use, we asked survey respondents to rank five qualities of OST programs (convenience, cost, program activities, safety, and staff) in order of what they were most concerned about when choosing a program. These five qualities were identified in focus groups as key factors in decision-making about OST programs. Figure 2 shows the percentage of survey respondents that ranked each factor as their first or second concern.

¹⁵ As explained in the introduction, “poverty areas” are defined as zip codes where 20% or more of the population is below the poverty line.

Figure 2. Top Priorities of Survey Respondents in Selecting an OST Program



Note: N = 527

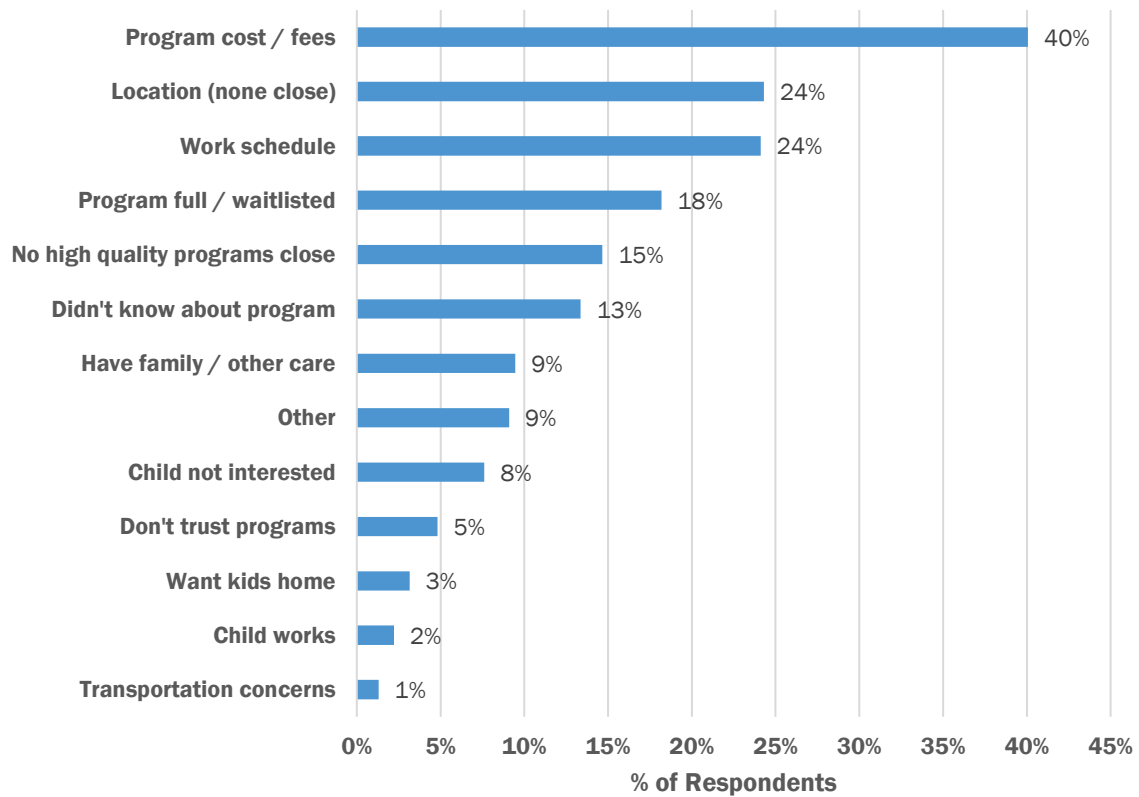
Safety, a basic indicator of program quality, was the primary consideration for caretakers when selecting an OST program. Cost and convenience were common considerations as well. One quarter to one third of caretakers also considered other factors related to program quality, including program activities and staffing.

The five qualities of OST programs shown in Figure 2 contain a mix of “access factors” and “selection factors” that drive how caretakers choose OST programs for their child. “Access factors” are those over which a caretaker has little or no control. These include cost as well as location and schedule, which are represented by “convenience” in the figure above. The three other qualities in Figure 2 (safety, program activities, and staff) are “selection factors” because they might drive which OST program a caretaker chooses, but they are not outright barriers to access. In the remainder of this section of the report, we examine each of these access and selection factors in more detail.

Access to OST Programs

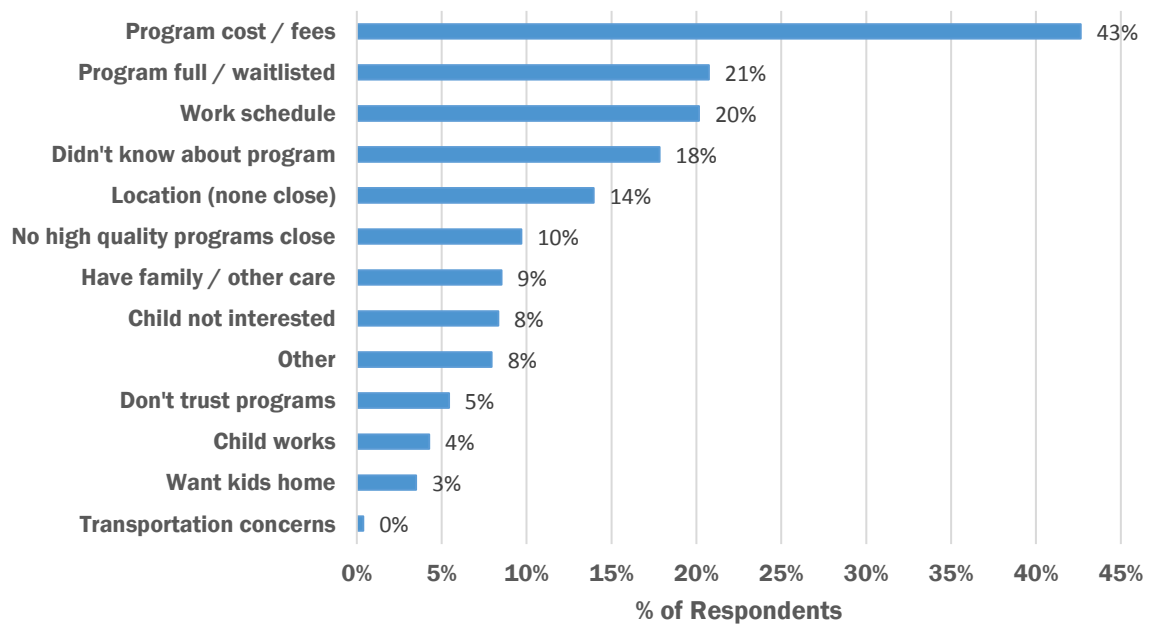
We asked survey respondents what factors deterred them from using some school year and summer OST programs. Figures 3 and 4 display their responses.

Figure 3. Reasons Caretakers Did Not Utilize a School Year OST Program



Note: N=539

Figure 4. Reasons Caretakers Did Not Utilize a Summer OST Program



Note: N = 516

As shown in Figures 3 and 4 above, the top five reasons caretakers identified for not using an OST program were access factors: cost, availability of seats, schedule, location, and lack of knowledge about programs. Caretakers have no control over these access factors, which create barriers to accessing OST programs. Below, we provide more detailed results on each of these access factors.

Cost

Caretakers had concerns about the cost of school year and summer OST programs. Figure 2 on page 8 shows that nearly half of survey respondents prioritized cost when considering an OST program. As displayed in Figures 3 and 4, cost was the most reported reason that caretakers did not enroll their children in some summer and school year OST programs. Moreover, participants in all four focus groups wanted to send their children to more affordable OST programs.

Focus group participants identified two specific cost-related factors that deterred them from accessing programs: cost for admittance to the program and cost of equipment, supplies, and activities. One participant said that caretakers, especially single mothers, receive no financial assistance and thus cannot afford to send their children to safe, high-quality programs that cost money. In one focus group a caretaker said, “One of the programs wanted to charge me 160...dollars per child... I couldn’t afford that.” In another focus group, a caretaker said, “A lot of parents come [to the program my child attends] complaining about the high prices of other programs.” Another caretaker elaborated on the additional costs that are incurred once the child is enrolled:

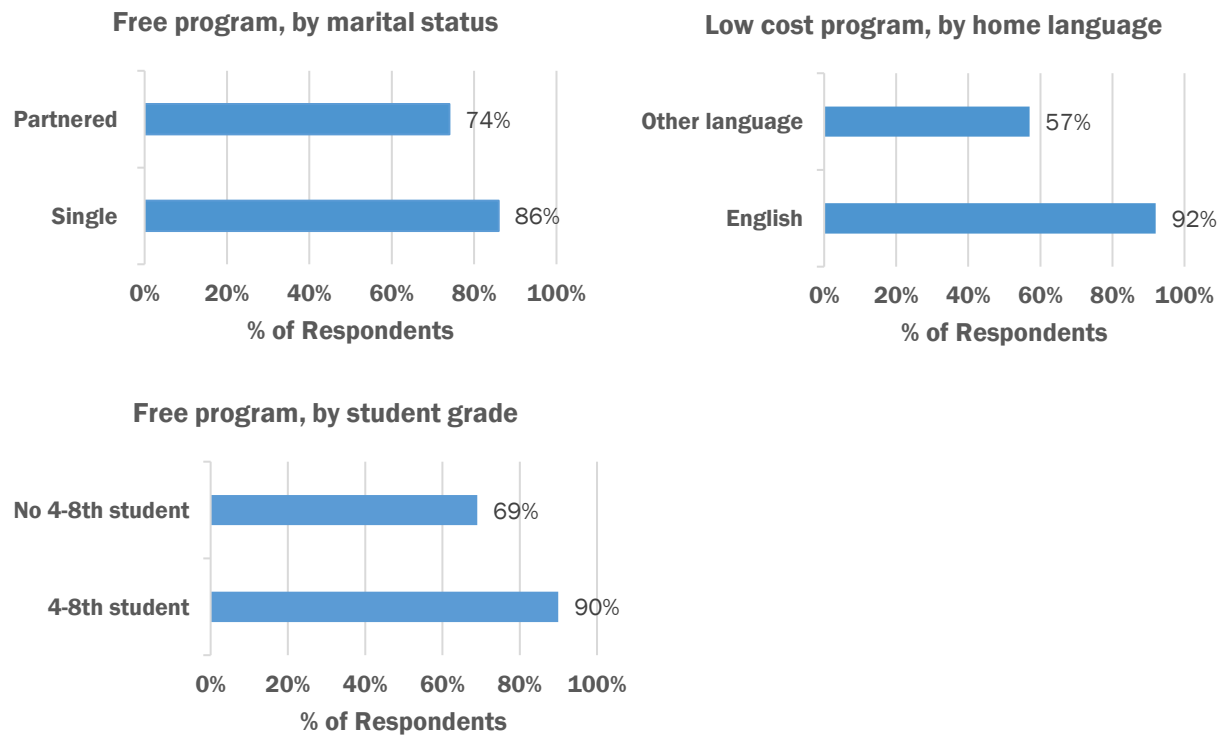
When [I] played sports [as a child] ... it was \$15 for the whole year. Now you have to pay for the uniforms because they can't afford it. You have to pay for this, pay for that. That's why they try to run these charity things, the benefits and all, to help out—because that's the only way you can keep the cost down.

OST program costs were a particular concern for caretakers living in high-poverty neighborhoods. These survey respondents more often cited program fees as a concern compared to those not living in poverty areas¹⁶ (87% compared to 72%).

Concern about cost also varied by subgroups, as displayed in Figure 5.

¹⁶ “Poverty areas” are defined as zip codes where 20% or more of the population is below the poverty line.

Figure 5. Interest in Free or Low-Cost OST Programs by Subgroups



Note: N = 278 - 296

Figure 5 illustrates that free or low-cost programs were more important to caretakers with the following characteristics:

- With children in grades 4-8;
- Whose home language was English; and
- Who were single caretakers.

Availability of Seats

Caretakers from low-OST zip codes and those with middle school children reported that full programs or long waitlists prevented them from enrolling children in specific OST programs more often than other caretakers. Consistent with previous research,¹⁷ survey respondents who lived in low-OST zip codes cited that programs were full (14%) more often than respondents who did not live in low-OST zip codes (9%). Survey respondents with children in 4th through 8th grades also cited waitlists as a barrier (14%) to OST program enrollment more often than other respondents (7%). Both of these differences are small, but statistically significant. In two focus groups, caretakers also reported challenges finding available seats in OST programs. One caretaker described how this challenge intersected with cost and location:

¹⁷ http://www.afterschoolalliance.org/AA3PM/Concentrated_Poverty.pdf

I want [my children] to go to an afterschool or out-of-school time program right at the school where they're at. [There] wasn't enough space, so I was searching in [the area] for other programs that were reasonable. There wasn't anything reasonable. I think that's a big concern for a lot of parents. Because we have a lot of parents who work, and it's very convenient for their child to just transition right to the program that's at the school.

Another caretaker said that certain school-based programs were not open-access and restricted program participation to students who attend the host school.

I think [it] is misleading...you have programs listed in these directories that aren't really available to students. You have all these programs listed in high schools or in schools, and they're all just for the kids that go to that school.

Convenience in Program Schedule and Location

Approximately one quarter of caretakers faced challenges finding programming at the times they needed during both the school year and summer (see Figures 3 and 4 on pages 8-9). Figure 2 on page 8 showed that convenience was the third highest priority compared other program qualities. Caretakers who were not satisfied with OST program times most often cited closing times and lack of evening availability as reasons they did not select OST programs. Caretakers' needs also varied somewhat by subgroup:

- **High-poverty zip codes:** Survey respondents from poverty areas¹⁸ wanted evening OST coverage during the school year (36% vs. 20%) and morning OST coverage during the summer (67% vs. 49%) more often than survey respondents not in poverty areas.
- **Marital status:** Single caretakers needed OST programs when schools were closed more often than married and partnered caretakers (93% vs. 78%).
- **Age of children:** Survey respondents with high school children wanted weekend programs more often than caretakers of younger children (48% vs. 33%).
- **Home language:** Respondents with a non-English home language reported that they could not find an afterschool program that *started* when needed more commonly than respondents who use English as a home language (49% vs. 14%). Conversely, respondents who used English as a home language reported that they could not find an afterschool OST that *ended* at a satisfactory time more often than respondents who use languages other than English at home (24% vs. 7%).

Participants in one focus group wanted OST programs to begin when the school year started and to end when the school year ended, as some OST programs started several weeks after school started and ended several weeks before the end of the school year.

¹⁸ "Poverty areas" are defined as zip codes where 20% or more of the population is below the poverty line.

Location was a significant barrier for 25% of survey respondents. As shown in Figure 3 on page 9, a quarter of survey respondents reported being deterred from an OST program during the school year as a result of its location. Program location deterred fewer caretakers in the summer—only 14% of survey respondents reported location as a reason for not enrolling their children in a summer OST program (See Figure 4 on page 9). Caretakers in all four focus groups prioritized the convenience of programs connected to their children’s schools. One caretaker said:

When she gets out of school, she can stay inside of the building and just transition [to the OST program]. Some of these [other programs’] locations are where I live but I don’t think about them because my daughter’s been going [to this school] since kindergarten. Like I said, it’s convenient. Once you leave school, you’re here [at the OST program].

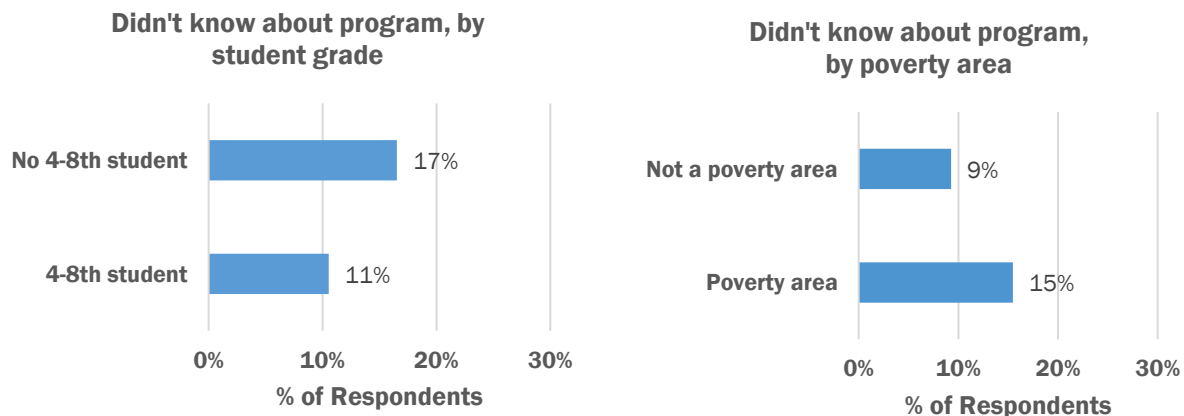
Caretakers’ needs related to location also varied somewhat by subgroup:

- Caretakers of K-3rd grade children more often reported looking for OST programs that were:
 - In their neighborhood (92% vs. 78% of caretakers with older children), or
 - At their child’s school (80% vs. 69%).
- Single caretakers were concerned about an OST program being easily accessible via public transportation more often than married or partnered caretakers (93% vs. 80%).

Information about Programs

Caretakers lacked sufficient information about OST programs. Our survey findings showed that one of the top reasons caretakers did not choose an OST program during the school year or in summer was that they “didn’t know about the program” (Figures 3 and 4 on page 9). These findings varied by subgroup; Figure 6, below, displays those differences.

Figure 6. Percent of Caretakers That Report Not Knowing About Nearby School Year OST Programs



Note: N = 539

Figure 6 shows that caretakers who reported not knowing about nearby OST programs were more likely to:

- Have children in high school and K-3rd grades (not 4th-8th graders); and
- Live in poverty areas¹⁹.

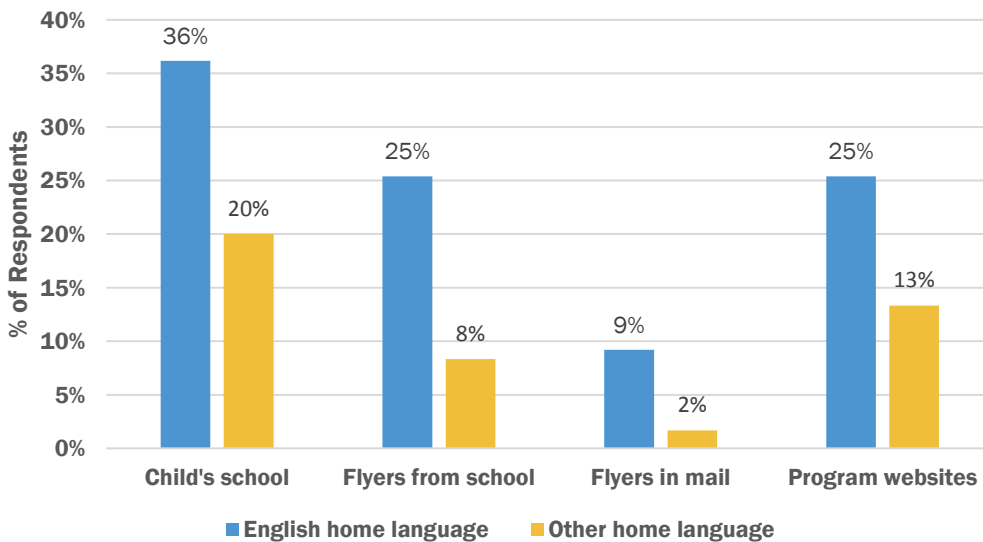
Focus group participants were not familiar with many OST programs in their zip codes²⁰, noting that they often encountered inaccurate information. For example, they reported that websites and telephone conversations with providers did not equip them with sufficient and targeted information. One caretaker described her frustration in this way:

If you ever try to actually find information about them, you get this crazy runaround. They say, "Oh, you got to do this," or like, "Maybe this one is"—people don't really know... There's just a huge—I don't know, lack of general knowledge. I think that's maybe part of the frustrating things [for] a parent.

One caretaker also reported limited knowledge of programs for children with special needs.

Caretakers whose home language was not English faced an even greater challenge to accessing information about OST programs. As seen in Figure 7, written materials were much less often a source of information about OST for this population.

Figure 7. How Caretakers Learn about Programs, by Home Language



Note: N = 543

¹⁹ "Poverty areas" are defined as zip codes where 20% or more of the population is below the poverty line.

²⁰ Focus group participants were presented with a list of OST programs in their zip code drawn from the OST directory compiled by the After School Activities Partnerships (ASAP).

Selection of OST Programs

Once caretakers identify the range of programs, they are in a position to choose which program they would like their children to attend. Below, we discuss selection factors that caretakers considered when choosing OST programs.

Safety

As shown in Figure 2 on page 8, safety was clearly of primary concern when caretakers were choosing OST programs. Focus group participants noted significant variation in safety among programs. One said:

Physical safety is a huge thing. It's such a deterrent to enrolling in anything, because not a lot of programs seem like they can guarantee the kind of safety that is necessary.

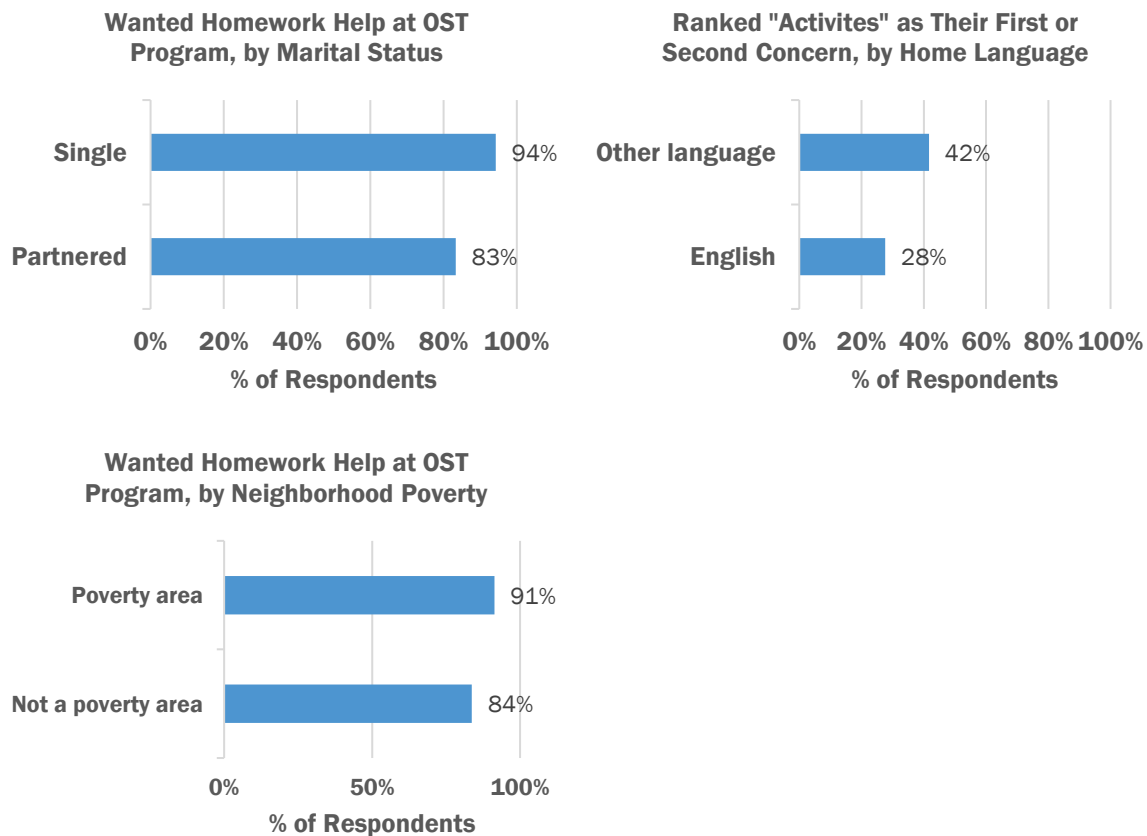
Caretakers assessed safety using a number of criteria:

1. **Neighborhood surrounding the OST program.** While a strong majority of survey respondents pointed to the need for safe drop-off and pick-up, those with younger children were particularly concerned with the safety of the surrounding neighborhood as well. Safe travel through neighborhoods was also a common concern. Participants in all of the focus groups reported that they would avoid sending their child to an OST program that was in a dangerous location known for crime, gangs, or drug dealing. Caretakers in two focus groups said they were dissatisfied with the OST providers in their zip codes because of their concerns about neighborhood safety.
2. **Safety among peers.** Close to 90% of surveyed caretakers included peer relationships in their assessment of safety, and virtually all with elementary and middle school children were concerned about this issue. Participants in one focus group considered whether their children would have to travel with older youth on buses or might be bullied by other students at the program. Caretakers at two sites considered a school's safety during the school day when evaluating afterschool programs. They noted that when schools did not effectively address bullying, fights, and other traumatic school day events, they were concerned about the afterschool program's ability to meet their safety standards.
3. **OST program staff.** Nearly all survey respondents (94%) cited background checks as an important indicator of safety, and many focus group participants also noted that being familiar with the OST staff prior to enrollment was important in their decision to send their child to the OST program.

Program Activities

Caretakers also assessed OST activities when choosing programs. As shown in Figure 2 on page 8, about one third of survey respondents selected activities as their first or second concern when choosing an OST program. However, there were differences by subgroup. Figure 8 displays those differences.

Figure 8. Caretakers Who Ranked Activities or Homework Help Among Their Top Concerns When Selecting an OST Program, by Subgroup



Note: N = 449 - 527

Figure 8 reveals the following notable findings:

- Caretakers whose home language was not English cited program activities as their first or second concern when selecting OSTs more often than those whose home language was English.
- Caretakers want OST programs to provide homework help, but this was particularly important to single caretakers and those from poverty areas.²¹

Caretakers looked for activities that matched their children’s needs, which varied by age. For example:

- Almost all (98%) caretakers of elementary or middle school students valued “a range of activities,” compared to 81% of caretakers of high school students.
- In contrast, “providing work experience” was highly valued by most caretakers of high school students (91%) but was only important to 69% of caretakers with younger children.
- Caretakers of high school students reported that their child’s disinterest (20% for high schoolers vs. 6% for other age groups) or conflicts with their child’s

²¹ “Poverty areas” are defined as zip codes where 20% or more of the population is below the poverty line.

work schedule (11% vs. 0.2%) influenced them not to send their children to an OST program more often than caretakers of younger students.

Staff

Less than a quarter of survey respondents identified OST staff as a top concern when selecting a program (see Figure 2, page 8), but participants in three focus groups identified professional, friendly, attentive, and well-trained staff as an indication of program quality. Attentiveness to children's physical and emotional well-being was particularly important. One focus group caretaker criticized programs who employed inattentive staff:

It's more...babysitting. They pass out the snacks, and then the kids basically run themselves. You have kids...five, six, four years old or whatever, and you have up to teens. You have other teens that aren't maybe part of the program that still come to the center, hangout, whatever. They don't manage them. They don't charge those kids. Those older kids do whatever they want, then the young ones follow suit. It's just not an enriching situation [or] environment.

Additional Quality Indicators

Physical program space. One caretaker noted that some OST spaces have deteriorated over time. He gave an example of a park in his community that was refurbished but had since deteriorated and is now home to drug users and loiterers. He suggested that caretakers did not send their youth to programs or spaces that have not received proper upkeep and are therefore not safe enough for youth to enjoy. Other caretakers in the focus group agreed.

"Above and beyond" approach. Examples provided by focus group participants included giving students items from their holiday wish lists and providing clothing necessary for participation in a program's fashion show.

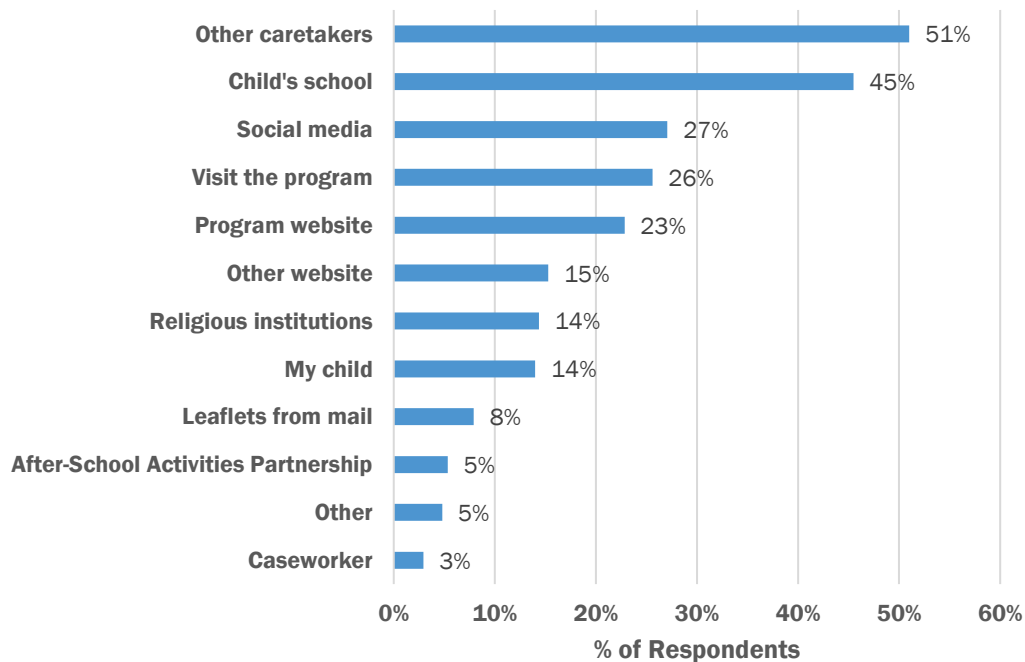
In summary, selection of OST programs involved a variety of criteria. Caretakers wanted their children to be safe when travelling to and attending OST programs, to interact with trained staff, and to participate in activities that develop them socially and/or academically—all at an affordable cost and a convenient location and time.

Section IV. How Caretakers Learn about OST Programs

As noted in Section III, caretakers often lack information about available OST programs. This section provides additional detail on how caretakers obtain information about programs.

Caretakers were surveyed about their sources of OST information. Figure 9 displays their responses.

Figure 9. How Caretakers Learn About OST Programs²²



Note: N = 543

Figure 9 reveals the following notable finding:

- **Caretakers primarily utilized two sources of information about OST programs: other caretakers and their child's school.** About half of survey respondents learn about OST through other caretakers and slightly less than half through their child's school. Focus group participants echoed these findings. One caretaker noted:

I came to sign my son up for the school and one of the people in the office said, "Well maybe he can get into the OST program?" So they had offered it, which was really good at the time because we needed our son to have care after 3:00 because we didn't want him to be home by himself. When people in the school's office had told us about [the OST program], that's how our son got on board.

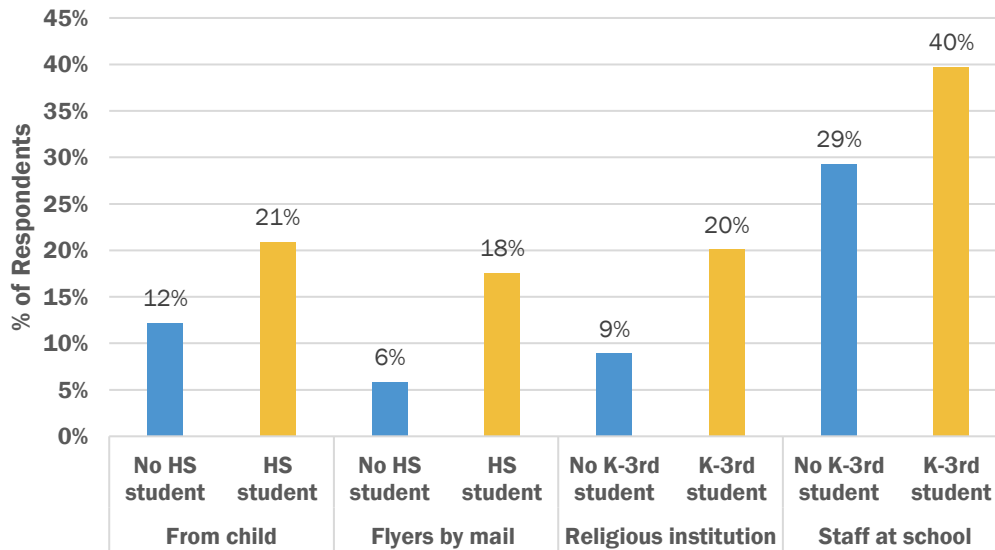
Caretakers in two focus groups noted that networking with their peers was particularly useful. For example, caretakers asked one focus group participant to start a group because of her knowledge of resources for children with special needs.

Use of other sources of OST information varied according to children's age.

Differences in sources of information by child's age are displayed in Figure 10.

²² "Other website" was listed on the survey as any website other than the program's website.

Figure 10. How Caretakers Learn About OST programs, by Children’s Age



Note: N = 543

Figure 10 shows:

- Caretakers of high school youth reported learning about OSTs from their children or from flyers directly mailed to them more often than caretakers of younger children.
- Among caretakers of K-3rd grade children, 20% reported finding out about OST through religious institutions, a source rarely reported among caretakers of older students.
- More caretakers of young children reported learning about OSTs from staff at their child’s school than respondents with older children.

Community newspapers were also a source of OST information. One focus group participant said, “[OST program information] is also in our community newspaper. In the weeks leading up [to the start of school] the registrations are always posted.”

Section V. Recommendations and Summary

This research revealed a number of insights regarding how caretakers use, access, and select OST programs. Based on these findings and suggestions from caretakers themselves, we provide recommendations for the City’s OST system and providers to strengthen Philadelphia’s OST system and provide better access to the types of programs and services that caretakers and their children need. Below we summarize highlights from our findings, then supply recommendations for how the City or providers could respond to them.

Enhancing OST Program Access

Finding:

- Barriers to OST access include affordability concerns, inconvenient program locations and schedules, too few program seats, and lack of information about programs.

Recommendation: The OST system should consider targeting available funds to increase seats and explore collaborative fundraising to cover equipment costs, particularly for sports programs. In particular, the OST system could target funding to programs in low-OST areas and those that serve older elementary school children to increase free and low cost available seats. The OST system and providers, particularly sports programs, might work together to explore joint fundraising strategies for sports equipment, uniforms, and travel costs to alleviate costs for low-income caretakers who are interested in these types of program activities.

Recommendation: The OST system should focus on ensuring safety and quality in free and low cost programs. The top two factors for caretakers in choosing an OST program were cost and safety. Nearly half of survey respondents reported cost as a deterrent to enrolling their children in an OST program. At the same time, caretakers would not enroll their child in a free and low cost program if it was not safe. The City's analysis of OST usage found some free and low cost programs with excess capacity. These programs may be underutilized because caretakers do not perceive them as safe or high quality. As the OST system moves toward increasing quality, it should target quality efforts on free and low cost programs, particularly those that are currently underutilized.

Recommendation: Ensure caretakers have information about high-quality free and low cost programs. Another factor that prevented caretakers from utilizing OST programs was lack of information about these programs. Difficulties finding free and low cost programs that are of high quality could be related to lack of information about these programs. RFA's [Scanning the System](#) report found that programs funded by DHS and 21st Century Community Learning Centers tended to have more quality assurance practices in place than other programs. Programs funded by these funding streams are also free and low cost. Caretakers may not be aware of these free and low cost programs which are potentially of higher quality. The City could consider additional strategies to promote awareness of these programs.

Recommendation: The OST system should encourage City-funded programs to expand program hours. One quarter of caretakers reported difficulty finding programming before school, in the evenings, and on weekends. In addition, some caretakers reported that OST programs do not always run the entire school year or summer. City funding streams could encourage or require that funded programs run from the first day to the last day of the school year, and encourage providers to program for longer periods in the summer. In addition, community-based programs—which may be better positioned to offer evening and weekend hours—may consider

partnering with school-based programs to provide more continuity of care for working caretakers.

Recommendation: Providers should gather caretaker feedback from specific neighborhoods to determine the specific access barriers that families face in those communities. We found that some access barriers varied by zip code, but there could be additional location-specific barriers that our research did not uncover. To identify these barriers, providers could solicit feedback from caretakers via focus groups, surveys, town hall meetings, or other community-based events.

Addressing OST Program Selection Concerns

Findings:

- Safety is the highest priority for caretakers when they select programs. This includes program, neighborhood, and school safety.
- About one third of caretakers also prioritized other quality factors, such as staff and types of activities.
- Caretakers also consider the physical program space and an “above and beyond” approach as indicators of quality programming.

Recommendation: The City and providers should consider forming community advisory groups. Caretakers are well-positioned to advise the City and providers about program safety, staffing, and activities. Advisory groups could assist in conducting periodic OST program quality reviews that generate information on caretakers’ views as well as recommendations about improving programs in terms of safety, transportation, staff, infrastructure, and alignment to families’ needs and interests. In addition, advisory groups could inform the OST system or providers about desired program activities, such as art, homework help, or work experience.

Recommendation: The City and providers should develop strategies for monitoring safety in and around OST programs. As the OST system develops its quality assurance system, particular emphasis should be placed on assessing safety. The OST system could also identify strategies for boosting OST safety system-wide through centralized partnerships with safety-focused groups such as School District Police, the School District of Philadelphia’s Safe Corridors initiative, or neighborhood Town Watch initiatives. Additional supports could be provided to OST programs that operate in neighborhoods that have more afterschool incidents. Similarly, providers should consider developing local partnerships to assist in ensuring the safety of all program components including surrounding neighborhoods, bus travel, program activities, children’s behaviors, and staff members’ attentiveness.

Recommendation: The OST system should consider investing in renovation and maintenance of program facilities. Investing in renovations to older facilities and equipment and hiring staff to help maintain buildings, parks, and other resources used in OST would both contribute to safety and increase program desirability. In RFA’s

[Scanning the System](#), providers particularly noted the shortage of high quality gymnasium spaces.

Recommendation: To address caretakers' program selection concerns, providers could:

- **Regularly evaluate staff performance.** To ensure that programs have qualified staff who attend to children's interests and needs, providers should seek experienced, trained staff who will be attentive to youth, monitor program safety, and lead desired activities. Further, providers should continue to evaluate staff members' performance through observations and feedback from youth and caretakers.
- **Ensure a range of program options that address differing needs.** Single caretakers and those who are not fluent in English want their children to have access to afterschool homework help. Caretakers with children in high school want OST workplace experience. The OST system and providers could work with the School District to ensure that homework help is available at all school-based programs and explore ways to expand work experiences in OST programs for high school students.

Increasing OST Program Awareness

Findings:

- Caretakers rely on other caretakers and their children's schools as sources of information about OST programs.
- Lack of program information in languages other than English is a barrier to OST enrollment.

Recommendation: The City should coordinate with the District and schools, as well as local and citywide caretaker groups, to distribute information about OST programs. As caretakers rely on other caretakers and their child's school to provide information about OST programs, the OST system and providers should build partnerships with these groups to distribute information. Providers could also hold meetings with local associations and community groups to inform caretakers about OST programs and encourage attendees to share information about OST programs with other caretakers through email, social media, or word of mouth.

Recommendation: The City and providers could utilize online platforms to increase awareness about OST programs. The OST system could increase opportunities for providers to distribute program information online. Providers could also use their program webpages to publish comprehensive program descriptions and program overviews. Providers could also consider utilizing widely-used and highly trusted social media platforms, such as Facebook, neighborhood social media groups, or online newspapers. Because caretakers rely heavily on information from other

caretakers, the OST system and providers should intentionally gather caretaker feedback and look for ways to make this feedback more publically available.

Recommendation: The City and providers should provide program materials translated into multiple languages. The OST system can support providers in translating program materials and websites into relevant community languages.

Next Steps in OST Research

Research for Action has conducted two additional strands of research which may further illuminate issues raised in this report. RFA released a report on Philadelphia OST program quality in Summer 2017 called [*Scanning the System: Support for Quality Programming in Philadelphia's Out-of-School Time*](#), which is based on a survey of and interviews with OST providers. A third strand of research examines literacy practices in OST programs. The first report of this strand, [*Supporting Literacy in Out-of-School Time: A Review of the Literature*](#), was released in June 2017. A second report that examines OST literacy practices in Philadelphia will be released in October 2017.

Appendix A: Subgroups of the Survey Sample

In order to analyze differences in responses between respondents with different characteristics, we created subgroups by constructing the variables described in the following tables.

Table A.1. Age of Children

	N	%		N	%
Has K-3 student	272	48%	Has 4-8 student	280	51%
No K-3 student	295	52%	No 4-8 student	287	49%
	N	%			
Has 9-12 student	103	18%			
No 9-12 student	464	82%			

Note: These are not mutually-exclusive categories. If a respondent has children in more than one of these grade ranges, they are shown in each one. Additionally, 34 records did not respond to the question, thus are excluded from these analyses.

Table A.2. Marital Status of Caretakers

	N	%
Married / partnered parent	294	57%
Single parent	223	43%

Note: For this analysis, we excluded the 84 respondents that stated they are a “grandparent”, “foster parent”, “other” or did not respond, since those responses did not tell us if the individual was raising the child on their own or with a partner.

Table A.3. Language Spoken at Home

	N	%
English	449	88%
Other languages (including Spanish, Chinese, Russian, Arabic, and others)	60	12%

Note: For this analysis, we excluded the 92 respondents that did not respond to the question.

Table A.4. Live in a Zip Code with a Low Number of OST Program Offerings

	N	%
Low-OST area	178	30%
Not a low-OST area	406	70%

Notes: For the low-OST and the poverty areas analyses, we excluded the 17 respondents who did not provide a zip code at all or who provided one outside the Philadelphia area

Table A.5. Live in a Neighborhood that is a Poverty Area (>20% of the population lives under the poverty line)

	N	%
Live in a “poverty area”	370	62.5%
Do not live in a “poverty area”	222	37.5%

Appendix B: Geographical Sample of Survey

To illustrate the neighborhoods in which our survey respondents reside, Figure B.1 shows a map of respondents' zip codes. Darker shades indicate higher concentrations of survey respondents.

Figure B.1. Count of Respondents by Zip Code

