Great Falls Childcare Feasibility Study

2026 Update

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Great Falls Development Alliance
MONTANA
ECONOMIC DEVELOPMENT CDFI

camoin associates

CONTENTS

1 EXECUTIVE SUMMARY

Access to reliable and affordable childcare plays a critical role in workforce participation, household stability, and economic vitality in Great Falls. Over the past several years, childcare availability has become an increasingly visible constraint for families, employers, and providers alike, prompting renewed interest in understanding the scale of unmet need and the feasibility of expanding childcare capacity. This analysis evaluates the current childcare market in Great Falls to assess the relationship between supply and demand, identify structural barriers limiting expansion, and inform strategies to address gaps in a sustainable and coordinated manner.

This analysis serves as an update to the childcare feasibility study completed in 2021, which informed post-pandemic childcare ecosystem decisions, and reflects evolving market conditions, workforce constraints, and household needs.

How was this study conducted?

The analysis was grounded in four core components: demographic and socioeconomic analysis; survey research across key audiences; extensive stakeholder engagement with childcare providers, employers, military representatives, and community organizations; and a childcare market supply and demand analysis. The analysis builds on the Great Falls Development Authority's 2021 Child Care Feasibility Study and reflects changes in demographic conditions, the local childcare market, and employer needs since that time. Rather than focusing solely on total demand, the analysis emphasizes net new demand, age-specific pressures, and the market conditions that shape whether additional childcare capacity can realistically be delivered.

These elements provided a comprehensive view of how childcare supply, demand, and operational feasibility interact in Great Falls, supporting an updated evaluation of unmet need and opportunities to address gaps in capacity.

Demographic and Socioeconomic Analysis

We assessed and updated key demographic, workforce, and household indicators using the most recent data. This analysis examined population trends by age cohort, household composition, employment and income patterns, and commuting behavior.

Survey Analysis

We designed and conducted a targeted community survey to capture parent and caregiver perspectives on childcare availability, affordability, scheduling needs, and unmet demand. Survey findings helped contextualize quantitative market data and highlight lived experiences within the current childcare system.

Childcare and Community Stakeholder Interviews

One-on-One interviews were conducted with childcare providers, community organizations, and other stakeholders to gather qualitative insight into operating conditions, workforce challenges, waitlists, regulatory constraints, and emerging trends. These conversations provided important context around system-level barriers and opportunities not captured through data alone.

Childcare Market Supply & Demand Analysis

We analyzed both the supply of licensed childcare and the estimated demand among working families. Licensed childcare providers and capacity were inventoried by provider type and age group served to establish a snapshot of existing supply. Childcare demand was estimated using demographic and labor force data to identify the number of children likely to need childcare services. Comparing supply and demand estimates allows the study to identify gaps in childcare availability and highlight where unmet need is most severe.

Key Findings

The following key findings summarize the most significant conclusions from the childcare supply and demand analysis. Together, they highlight the structural conditions shaping childcare availability in Great Falls, including where the system is constrained, how families experience access, and why unmet demand persists despite the presence of licensed providers. These findings provide the foundation for the strategies and recommendations outlined later in this report.

Childcare access constrains workforce participation and household stability. Difficulty securing reliable childcare continues to affect employment decisions, hours worked, and financial security for many families, limiting labor force participation and increasing household strain.

Demand is strongest—and constraints are toughest—in infant and preschool care. Unmet demand is concentrated among newborns (0–12 months) and preschool-aged children (3–5), where higher staffing ratios, specialized space, and operating costs make expansion more complex and financially risky.

Staffing availability, not licensed capacity, limits access. While licensed capacity exists, workforce shortages, age-specific requirements, and enrollment risk prevent capacity from consistently translating into available care, making supply highly sensitive to staffing disruptions.

Nontraditional schedules signal unmet demand and operational risk. Strong demand for extended hours, flexible schedules, and backup care reflects misalignment with standard childcare models, particularly for military, healthcare, and shift-working households, while increasing staffing complexity and cost for providers.

Affordability constrains both family access and provider feasibility. Most households report childcare as unaffordable, while providers face rising labor and compliance costs that limit their ability to lower tuition or expand capacity, especially for infant and toddler care.

Location within the City of Great Falls and affordability are critical to feasibility. Families overwhelmingly prefer childcare located within Great Falls and aligned with daily travel patterns, reinforcing that central accessibility and cost, rather than precise siting, drive enrollment feasibility.

Childcare demand in Great Falls will remain steady, not surge. Demographic trends point to stable demand driven by workforce patterns, affordability, and service alignment rather than rapid growth in the child population.

Employer-supported childcare works best through partnerships. Employers view childcare as a workforce issue but favor scalable models, such as reserved slots and shared subsidies, over owning or operating facilities.

Activating existing capacity is more feasible than building new supply. Most access challenges stem from enrollment risk, affordability gaps, and operating constraints rather than a lack of licensed providers – indicating that strategies focused on stabilizing and better aligning existing capacity are likely to be more effective than large-scale facility expansion.

Small and home-based providers are critical but structurally vulnerable. Smaller and home-based providers play a key role in serving infants, flexible schedules, and nontraditional care needs, yet face disproportionate financial, administrative, and workforce barriers that limit their ability to expand or stabilize.

Childcare Supply Overview

The licensed childcare supply in Great Falls is provided through a mix of center-based and home-based programs offering care across a range of age groups and service models. In total, the city has 73 licensed childcare facilities with capacity for 3,095 children up to age 12. While this represents a sizable inventory of licensed slots, functional availability of care is more constrained than licensed capacity alone suggests.

Functional capacity is unevenly distributed by provider type and age group, with the greatest challenges occurring in newborn and toddler care. Provider interviews indicated that enrollment and staffing availability, not physical space or licensing limits, are the primary factors determining whether licensed slots are usable at any given time. As a result, the presence of licensed capacity does not necessarily translate into accessible or reliable care for families.

Center-based providers account for the majority of licensed childcare capacity in Great Falls and provide scale and broad geographic coverage. These programs are also the most sensitive to workforce volatility. The loss of even a small number of staff can trigger enrollment caps or classroom closures due to child-to-provider ratio requirements, creating rapid fluctuations in available care.

Home-based care providers, including group and family childcare homes, represent a smaller share of total capacity but play an outsized role in system flexibility. Home-based care facilities are more nimble operationally and are particularly important for serving younger children, offering smaller group environments, and accommodating nontraditional schedules. Many families express strong preferences for smaller, home-like care during a child's earliest years, and openings in these programs tend to fill quickly, contributing to persistent access challenges even when some center-based capacity remains available.

Childcare supply in Great Falls is best understood not as a static count of licensed slots, but as a dynamic system in which usable capacity shifts in response to staffing levels, age-group mix, and operational constraints. While large, center-based providers account for most licensed capacity, smaller and group-based models play a critical role in how families actually access care. Survey results and provider feedback suggest that more nimble, small-scale settings are often better aligned with family preferences and operational realities, offering flexibility without the staffing intensity of larger centers. This gap between licensed capacity and functional availability shapes how families experience childcare access across the city and provides essential context for interpreting demand, feasibility, and future strategies.

Childcare Facility Types and Capacity, Great Falls, Jan 2026

Facility Type	Licensed Capacity	Percent of Total Capacity
Child Care Center	2,712	87.6%
Group Home Child Care	327	10.6%
Family Home Child Care	52	1.7%
Family, Friend & Neighbor (FFN)	4	0.1%
Total	**3,095**	**100.0%**

Source: Montana Early Childhood Service Bureau

Estimated Childcare Demand Overview

Childcare demand in Great Falls reflects a stable but constrained market, shaped less by population growth and more by workforce participation, household economics, and age-specific service needs. Demand is steady and persistent, with the greatest pressure concentrated among families with very young children.

Survey results, stakeholder feedback, and demographic data indicate that unmet demand is both meaningful in scale and structurally concentrated, reflecting ongoing gaps rather than short-term fluctuations. The gaps are driven by age-specific staffing requirements, affordability pressures, and misalignment between standard childcare models and how families need to use care.

Demand by Age Cohort

Childcare demand in Great Falls is not evenly distributed across age groups, and this imbalance is central to understanding system pressures and feasibility.

- **Newborn care (0–12 months)** represents the most constrained segment of the market. Although infants make up a smaller share of total children, they account for a disproportionate share of unmet need due to lower child-to-staff ratios required, higher staffing intensity, and specialized space and care requirements. These factors make infant care the most difficult and costly to operate and expand.
- **Preschool-aged children (3–5 years)** account for the largest share of potential demand, but unmet need is uneven. While this cohort accounts for the highest volume of enrollment interest, provider outreach indicates that preschool capacity is more available than infant or toddler care. Open slots are reported in some programs, reflecting competition in this age group, including public preschool, HeadStart, and subsidized options, as well as sensitivity to cost and scheduling. Demand for this age group is therefore driven less by lack of available space and more by alignment with affordability, hours, and program structure.
- **School-age care (6-12 years)** generates more episodic demand tied to before- and after- school hours, summer programming, and school breaks. This cohort exhibits comparatively lower unmet demand and greater flexibility, though needs remain for summer, school-break, and backup care.

The age-based distribution of demand has direct implications for feasibility: the cohorts with the highest unmet need are also the most difficult for providers to staff and operate sustainably, reinforcing structural constraints within the system.

Great Falls Childcare Center Estimated Demand

Estimated childcare demand in Great Falls reflects sustained pressure across all early childhood age groups, with the greatest need concentrated among newborns and preschool-aged children. As shown in the table, total net demand is estimated to range from approximately **500 to 860 children**, with a midpoint estimate of roughly 680 children. Demand is modeled under three scenarios—low, mid, and high—each incorporating different assumptions about labor force attachment and the expected utilization of formal center-based childcare.

This unmet demand is not experienced as an absence of providers, but as limited access to care that is affordable, available when needed, and appropriate for children's ages. It reflects children who are not currently served by existing childcare facilities or whose current arrangements are unsustainable, informal, or insufficient to meet household needs. These age cohorts account for the majority of unmet demand and present the most significant implications for facility design, staffing requirements, and financial feasibility.

Summary of Great Falls Childcare Center Demand

Age Cohort	Low	Mid	High
Newborns (up to 12 months)	120	162	205
Toddlers (13 to 23 months)	109	147	186
Young Preschooler (24 to 35 months)	105	142	179
Preschool (3 to 5 years)	168	228	288
Total	**502**	**680**	**858**

Source: Camoin Associates

Supply and Demand Alignment and Market Implications

The childcare market in Great Falls is best characterized not by a short-term shortage of licensed facilities, but by a structural misalignment between household needs and the conditions under which childcare capacity can be reliably offered. Demand is steady and sufficient to support additional care, yet staffing constraints, operating economics, and service design limit how effectively the market can respond independently.

Licensed capacity alone overstates market readiness and the amount of care that is consistently usable. Provider outreach and stakeholder engagement indicate that capacity fluctuates based on staffing availability, enrollment risk, age-mix decisions, and operating costs. As a result, access challenges persist even in areas where licensed slots exist. This confirms that the core issue is not the number of facilities, but whether capacity can be activated and sustained in ways that align with family needs.

Market pressure is strongest where operational risk is highest. Infant and toddler care, and to a lesser extent full-day preschool aged care, face the greatest constraints due to staffing intensity, ratio requirements, and cost structures. Providers respond rationally by limiting exposure in these age groups, which concentrates unmet demand even as other age segments show more flexibility.

Affordability acts as a binding constraint on both sides of the market. Households demonstrate strong interest in childcare at more affordable cost, yet providers operate within narrow financial margins shaped by labor, compliance, and operating expenses. This creates a persistent gap between what families can pay and what it costs to deliver care, limiting enrollment, expansion, and the market's ability to self-correct.

Parent prefer flexibility over scale. Survey results and provider feedback indicate that families value flexible schedules, smaller settings, and care that accommodates nontraditional work hours. Smaller group and home-based models are often better positioned to meet these needs, but their expansion is limited by workforce, regulatory, and financial barriers. This suggests that future capacity gains are more likely to come from enabling adaptable models rather than expanding large, center-based facilities alone.

The childcare market in Great Falls is best described as **structurally constrained but responsive**. Demand is real and persistent, providers are operating responsibly within existing constraints, and misalignment drives unmet need. **Expanding licensed capacity alone will not resolve these access gaps. Strategies that reduce operating risk, support workforce stability, and better align care models with how families would prefer to access childcare are required.**

Great Falls Childcare Center Demand by Age Cohort, 2021 and 2025

Age Cohort	2021		2025	
	Low	High	Low	High
Newborns (up to 12 months)	117	205	120	205
Toddlers (13-23 months)	88	154	109	186
Young Preschooler (23-35 months)	78	137	105	179
Preschool (3 to 5 years)	137	240	168	288
Total	**420**	**736**	**502**	**858**

Source: Camoin Associates

Comparison to 2021 Childcare Feasibility Study Findings

This analysis builds on the 2021 Childcare Feasibility Study, which was conducted during the COVID-19 pandemic and identified an acute shortage of licensed childcare capacity driven by widespread closures and disruptions. While market conditions have evolved since that time, the underlying structural challenges identified in 2021 remain and, in several cases, have intensified.

Demand for childcare has persisted and increased modestly since 2021, particularly among infants, toddlers, and preschool-aged children. While overall demand levels are similar, unmet need is now more clearly concentrated in age cohorts that require higher staffing intensity and carry greater financial and operational risk for providers.

On the supply side, constraints have shifted from pandemic-driven closures to structural limitations rooted in workforce availability, affordability pressures, and provider sustainability. The system has moved from crisis conditions to a constrained steady state, where capacity exists on paper but remains difficult to activate consistently.

Several risks identified in 2021—particularly workforce participation impacts and affordability pressures—are now sustained conditions. Childcare access continues to influence work hours, job mobility, and household financial stability, reinforcing the need for coordinated, long-term solutions.

Overall, the comparison confirms that childcare challenges in Great Falls have not resolved with post-pandemic stabilization. Instead, the market remains structurally constrained, underscoring the importance of strategies that address workforce stability, operating economics, and alignment between childcare models and household needs.

Strategy Signals for Great Falls Childcare

- **Stabilizing the existing system will unlock more capacity than building new facilities alone.**
  Provider-reported constraints point to staffing, affordability, and operating risk as the primary barriers to expansion.
- **Smaller, more flexible care models warrant targeted support.**
  Group and home-based providers are better positioned to respond to infant care and nontraditional schedules but face disproportionate startup and operating barriers.
- **Affordability interventions must address both sides of the market.**
  Without mechanisms that reduce risk for providers while lowering out-of-pocket costs for families, demand will continue to outpace usable capacity.
- **Workforce-aligned childcare solutions offer the clearest near-term gains.**
  Strategies that align childcare supply with shift work, military schedules, and employer needs are likely to produce the strongest access improvements.

Recommendations and Strategies

The findings show that childcare challenges identified in the 2021 study remain relevant today, while also clarifying where market conditions have shifted. Addressing unmet childcare demand in Great Falls will require coordinated strategies that improve functional capacity, workforce stability, and affordability, rather than focusing solely on expanding licensed slots.

The following strategies build on the three core challenges identified in 2021 (staffing shortages, affordability constraints, and funding feasibility) and incorporate new insights from this update regarding system volatility, age-specific demand, and the limits of market-driven solutions.

Pillar 1: Prioritize, Strengthen, and Stabilize the Childcare Workforce

Strategy: Prioritize strengthening and stabilizing the childcare workforce to improve access to care and support long-term system reliability. Workforce stability is essential to ensuring that existing childcare capacity remains available and that providers can operate consistently across age groups and schedules.

Actionable Steps:

- Support recruitment and retention efforts of early childhood educators, including wage supports, benefit enhancements, and retention incentives.
- Explore mechanisms that reduce childcare costs for childcare workers' own children, improving retention within the workforce. This could include direct financial support through subsidized childcare slots, wage supplements/stipends earmarked for childcare expenses, and/or establishing a municipal fund to reimburse providers for the cost of employee childcare discounts.
- Partner with workforce and training organizations to expand access and knowledge of training and credentialing pathways, apprenticeships, and local talent pipelines including outreach to high school and postsecondary programs.
- Explore shared staffing or substitute pools that help providers cover short-term absences and reduce classroom closures. (Coordination with Family Connections and state partners)
- Coordinate regional messaging that positions childcare as essential workforce infrastructure, not just an early education service.

Pillar 2: Reduce Provider Risk to Activate and Sustain Capacity

Strategy: Reduce financial and operational risk for childcare providers so existing and new capacity, particularly for younger children, can be sustainably operated and utilized.

Actionable Steps:

- Prioritize support mechanisms, such as startup grants, enrollment guarantees, or tiered reimbursement rates, that offset the higher operating risk of infant, toddler, and full-day preschool care.
- Encourage phased, mixed-age, or incremental expansion models that allow providers to balance revenue stability with community demand, reducing exposure during enrollment fluctuations.
- Strengthen supports specifically for home-based and small-scale providers serving younger children, addressing operational barriers such as licensing costs, insurance requirements, or facility modifications that disproportionately burden smaller operations.

Supporting the Supply Side

Childcare providers face persistent workforce turnover and higher operating costs for infant care compared to preschool- and school-age care. Without addressing provider economics and workforce stability, expanding usable childcare capacity remains limited regardless of demand.

Pillar 3. Expand Flexible and Nontraditional Care Options Through Partnerships

Strategy: Encourage and support operating models that better align with local needs and respond to nontraditional schedules and household preferences through targeted provider support and regulatory streamlining.

Actionable Steps:

- Support targeted pilots or partnerships that enable extended hours, early start times, or school-break care, particularly for sectors with nontraditional schedules.
- Partner with major employers and institutions, particularly those with nontraditional schedules, to identify care gaps and develop collaborative solutions.
- Recognize and resource flexibility as core access and utilization factor, not an operational enhancement to standard care models.

Pillar 4. Improve Affordability While Supporting Provider Sustainability

Strategy: Advance solutions that reduce household cost burdens while protecting provider financial viability through layered funding sources that reduce dependence on tuition alone.

Actionable Steps:

- Support approaches that bridge affordability gaps for households just above subsidy thresholds without relying solely on tuition reductions.
- Expand awareness and enrollment in childcare subsidies and scholarship programs, particularly among families who fall just above eligibility thresholds.
- Encourage layered funding models that combine employer contributions, philanthropy, and public resources that provide operational stability for providers while lowering family costs.
- Support providers in implementing flexible enrollment models (part-time, drop-in, staggered schedules) by addressing the administrative and financial complexity these options create.

Pillar 5. Leverage Employer Participation Through Scalable, Shared Models

Strategy: Build sustainable employer-provider partnerships that position employers as contributors to childcare access through shared, scalable models.

Actionable Steps:

- Facilitate pooled employer models, such as reserved slot agreements, tuition co-pays, or shared subsidy funds, that provide guaranteed revenue or reduced vacancy risks for participating providers.
- Offer "tiered" employer participation options, ranging from low-lift contributions to deeper partnerships, that reduce barriers to entry while creating pathways to deeper investment.
- Coordinate employer engagement across providers and align with public funding to create complementary (not competing) support structures.

Pillar 6. Address Military-Affiliated Childcare Needs Through Targeted Provider Support

Strategy: Strengthen provider capacity to serve military and base-affiliated households through coordination, specialized supports, and partnerships that address unique scheduling and eligibility requirements.

Actionable Steps:

- Provide technical assistance to providers navigating military subsidy programs, security clearances, or base access requirements that create operational barriers.
- Facilitate partnerships between local providers and base childcare systems to create overflow capacity, backup care, or waitlist relief arrangements.
- Coordinate with military leadership and housing partners to reduce administrative and housing-related barriers to Family Child Care (FCC) participation.

7. Support System Coordination and Provider Resilience

Strategy: Strengthen the childcare ecosystem through coordination, shared resources, and data infrastructure to reduce volatility, improve utilization, and support long-term resilience, while positioning Great Falls as a convener and coordinator rather than a sole implementer.

Actionable Steps:

- Improve childcare navigation and referral systems that reduce provider administrative burden while helping families access available slots more efficiently, reducing vacancy-related revenue loss.
- Use this study as a baseline to track progress, capacity changes, enrollment patterns, and workforce outcomes over time
- Identify high-leverage, near-term investment opportunities, such as shared staffing pools, substitute networks, or administrative services, that reduce operational costs and improve provider resilience.
- Facilitate shared services models (i.e., HR, payroll, licensing support, professional development) that allow providers to focus on care delivery while reducing overhead.
- Continue cross-sector collaboration to ensure childcare planning remains integrated with workforce development, economic development, and housing efforts.
- Align local supports with state and federal programs to maximize provider access to resources and reduce compliance complexity.

2 INTRODUCTION

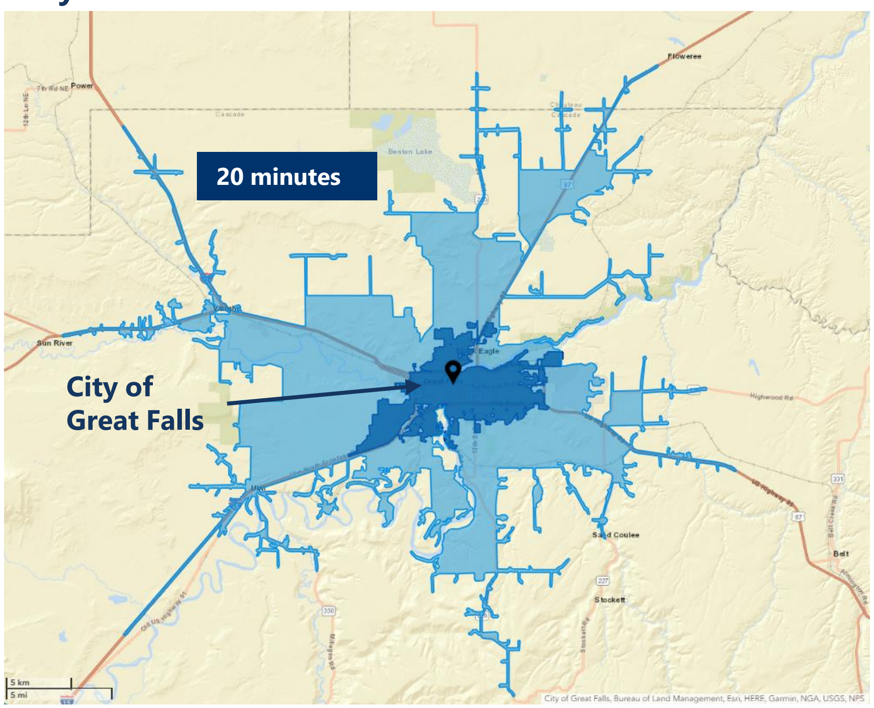
The Great Falls Childcare Feasibility Study begins by reviewing the area's economic and demographic characteristics. This sets the context for the subsequent review of childcare market supply, demand, and employer-supported childcare analysis. A review of current demographic and economic trends profiles the market setting facing the population that needs childcare. This analysis will highlight trends and data that may influence future childcare demand in Great Falls.

Study Area

The study area examines the local and regional trends impacting the City of Great Falls, Montana. The following geographies were used:

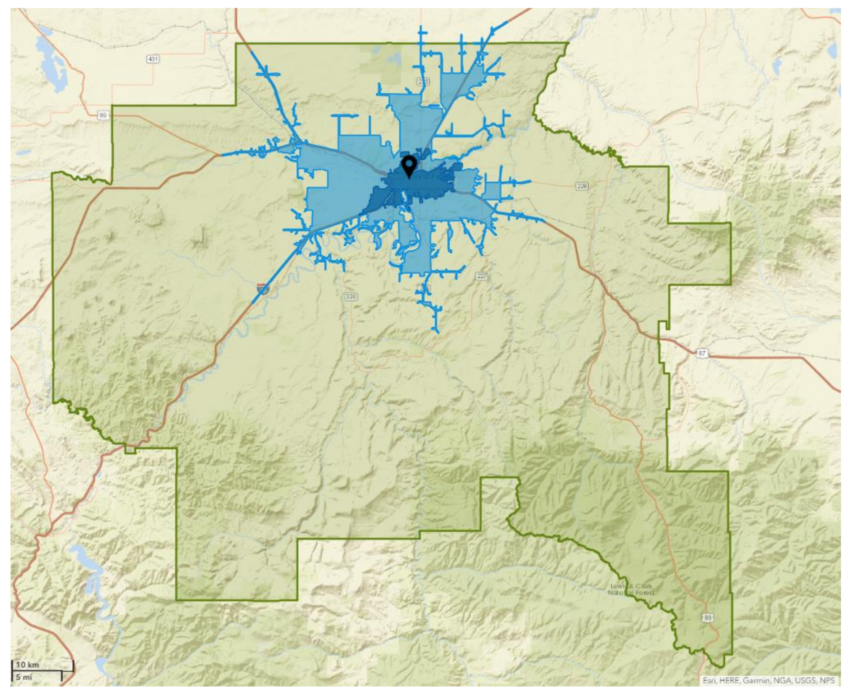
- **City of Great Falls:** Great Falls is the primary geography for the analysis.
- **Commuter Shed:** The Commuter Shed for the City of Great Falls is a 20-minute drive time radius from central Great Falls. This boundary covers the City of Central Falls, Gibson Flats, and Black Eagle, and extends into parts of Malmstrom, Sun Prairie, Vaughn, Ulm, and Sand Coulee.
- **Cascade County:** The City of Great Falls is located within Cascade County. The county is used to provide regional context on demographic and economic trends surrounding the City of Great Falls.
- **Montana:** The State of Montana is used to provide further regional context for demographic and socioeconomic, and economic trends.

City of Great Falls with Commuter Shed



Source: Esri

City of Great Falls within Cascade County, Montana



Source: Esri

Voices of the Community

Childcare Demand Survey

Childcare Survey

Camoin Associates conducted a targeted childcare demand survey to support the assessment of childcare supply, demand, and workforce impacts in Great Falls. The survey captured insights from parents, caregivers, military affiliated, and non-affiliated members of the community to better understand childcare needs, preferences, and barriers to access, including availability, affordability, scheduling, and program type. Designed to complement stakeholder interviews and system-level analysis, the survey aimed to ground the study in lived family experiences and inform strategies to strengthen childcare availability and workforce participation.

Methodology

The surveys were distributed over eight weeks (November 18, 2025–January 14, 2026) through a combination of direct outreach and partner networks. Distribution methods included digital outreach with QR-code flyers, social media posts and email campaigns, as well as partner-led sharing and community-based promotion. The survey targeted parents and caregivers seeking or currently using childcare in the Great Falls area. Only responses from individuals with children were included in the analysis. While the sample size is not statistically significant, the findings offer important insights to inform childcare demand and the needs of the state of the childcare ecosystem in Great Falls.

The full **Survey Results** and Summary can be found in **Appendix A.**

By the Numbers...

116

Total Respondents

25

Military- or Base-Affiliated Respondents

63%

of all respondents report difficulty finding childcare

80%

of military-affiliated respondents reported their childcare needs are not met on base

79%

of respondents feel they are paying too much for childcare

70%

of respondents would use a new facility if more affordable options were available

Engagement Insights

A wide variety of voices were heard to identify assets, challenges, and opportunities for the childcare ecosystem in Great Falls.

Childcare Providers

Childcare providers consistently reported having physical space to serve additional children but lacking sufficient staff to meet ratio requirements. Even minor staffing changes, such as the loss of one employee, can result in classroom closures or reduced enrollment, making capacity highly volatile.

Families/Parents

Parents emphasized preferences for smaller programs, infant care, and familiar or home-like settings. As a result, demand is concentrated among a limited number of providers, while other programs may have openings but are not viewed as viable options.

Community Employers

Employers noted that when childcare arrangements fall through, employees often reduce hours, decline certain shifts, or miss work altogether. These disruptions affect productivity and retention, even when childcare technically exists elsewhere in the community.

System Navigators and Community Partners

Organizations that support families in navigating childcare reported that waitlists are often outdated or inflated, reflecting parental preferences, staffing fluctuations, or precautionary sign-ups rather than true unmet demand. This limits their usefulness as a sole planning tool.

Statewide Ecosystem and Context

Montana is undergoing a major restructure of childcare contracts, centralizing provider technical assistance and separating family-facing services. While stakeholders understood the intent, the transition has created short-term disruption, confusion about roles, temporary gaps in provider support, and capacity strain at the local level.

Workforce and Training Stakeholders

Workforce and training stakeholders highlighted persistent challenges in recruiting and retaining early childhood educators due to low wages, limited advancement opportunities, and competition from other sectors.

The full **Engagement Summary** can be found in **Appendix B.**

3 DEMOGRAPHIC AND SOCIOECONOMIC TRENDS

The discovery phase of this study included a review of demographic, economic, and workforce data to understand how population change, household characteristics, and employment patterns shape current and future childcare needs in Great Falls. The findings summarized below provide the foundation for assessing childcare demand, affordability, and market sustainability.

Findings

1. **Population growth is modest and stabilizing.** Great Falls has experienced slow, steady growth over the past two decades and is projected to continue growing gradually through 2030, at a pace well below state and national averages.
2. **Household formation is growing slowly and shifting outward.** While the number of households has increased modestly since 2010, surrounding areas in the commuter shed have grown faster, suggesting new family formation is occurring primarily outside city limits.
3. **The population is aging, with steady but limited growth in children.** The median age has risen steadily, and while there are approximately 10,400 children under age 14 in Great Falls, the size of the childcare-age population has remained relatively stable since 2020.
4. **Affordability constraints shape household decision-making.** Over one-third of Great Falls households earn less than $50,000 per year, underscoring the importance of affordable childcare in a predominantly middle-income community.

What We Learned From the Data

Great Falls is entering a period of demographic stability. Slow population growth, an aging household base, modest income levels, and limited new housing development suggest that future childcare demand will be driven less by population increases and more by the evolving needs of existing families and workers.

These conditions underscore the importance of aligning childcare supply with affordability, workforce participation, and the geographic patterns of where families reside and work across the city and its surrounding commuter shed.

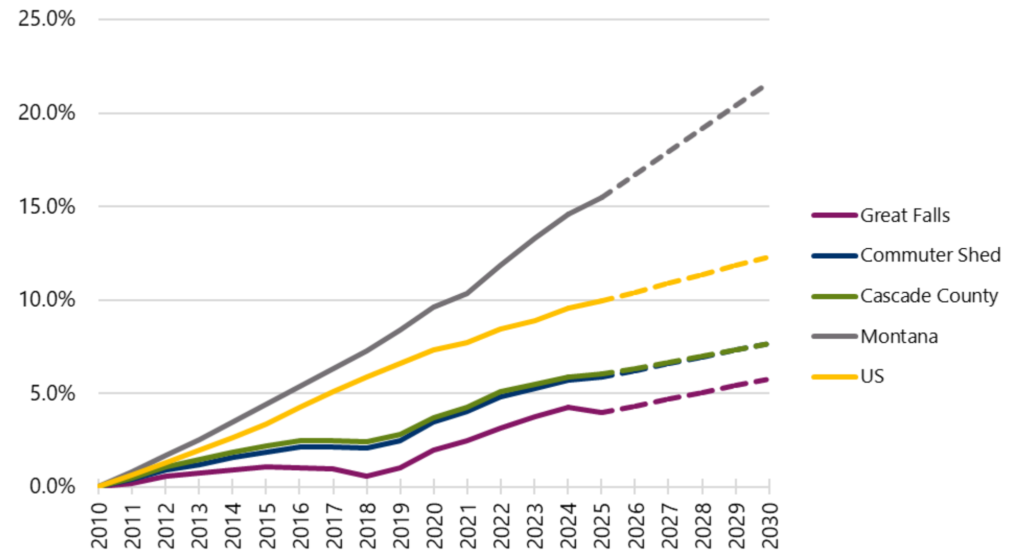
Population

Over the past two decades, Great Falls has seen steady but modest growth. The city welcomed nearly 3,000 new residents between 2000 and 2020, growing from 57,669 to 60,456, a 4.8% increase. Growth is projected to remain modest, reaching 62,908 residents by 2030.

This pattern of gradual growth shows that Great Falls is growing more slowly than Montana as a whole. The state is expected to grow by 11% between 2020 and 2030, fueled by people moving to western communities and suburban areas.

Great Falls' growth rate is expected to slow, dropping from 2.3% (2020–2025) to 1.7% (2025–2030). The cumulative population growth since 2010 remains below both state and national averages, suggesting limited in-migration and modest housing development.

Cumulative Percent Change in Population Since 2010

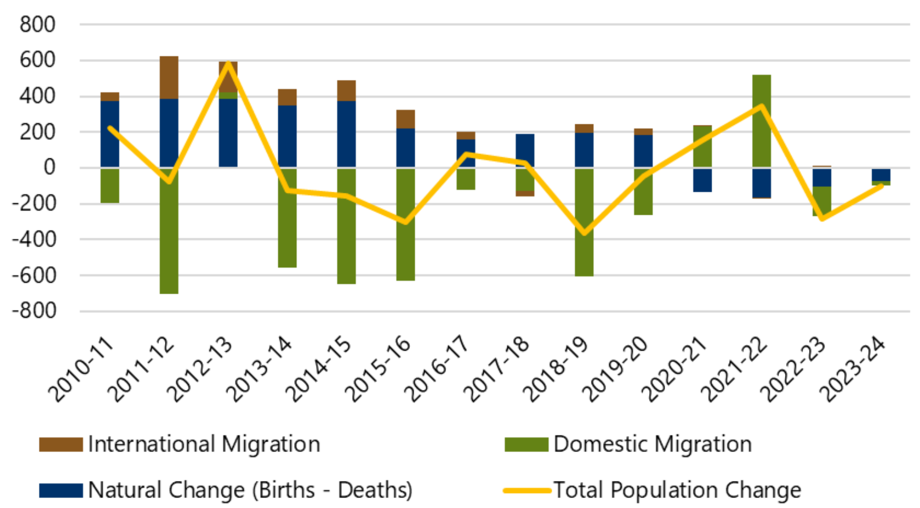


Source: Esri

Cascade County Components of Population Change

- Natural change in Cascade County has been consistently low or negative since 2016, indicating that population growth is no longer driven by births but depends largely on migration patterns.
- Domestic migration has fluctuated sharply year to year, serving as the primary driver of overall population change, with notable spikes in 2020-2021 and 2021–2022 followed by declines in 2022–2023.
- Total population change (yellow line) has remained modest overall, showing that Cascade County's population stability depends on attracting and retaining new residents to offset natural population decline.

Cascade County, Components of Population Change



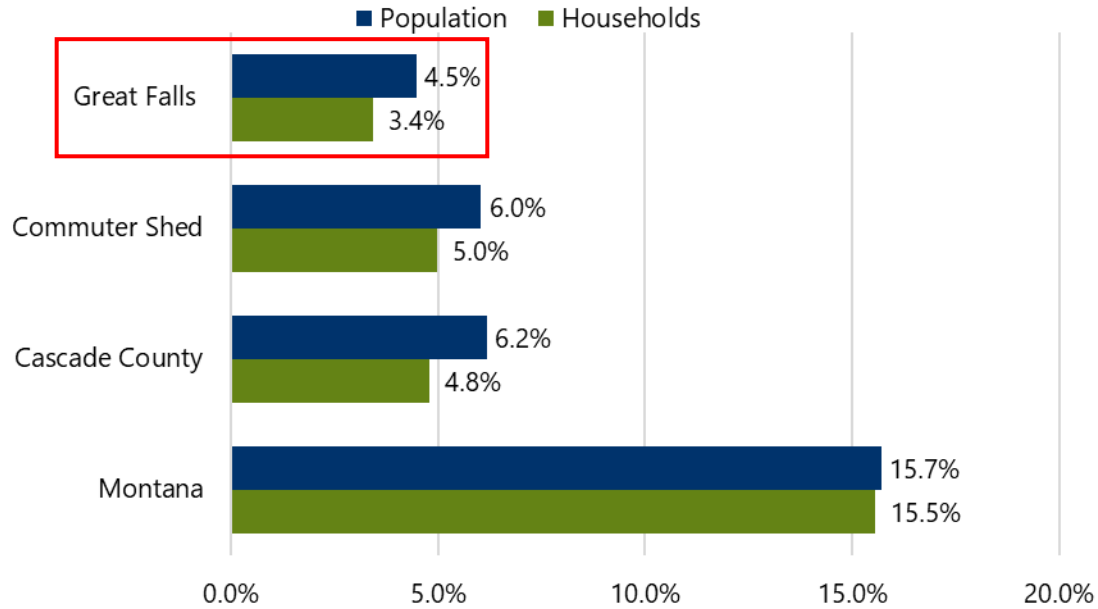
Source: Census Population Estimates

Households

Between 2010 and 2025, Great Falls' population increased by roughly 4.5%, accompanied by a 3.4% rise in the number of households. This modest rate of growth reflects a stable, slowly expanding community. Nearby areas within the commuter shed and Cascade County grew slightly faster, suggesting that much of the region's new household formation has occurred just outside city limits.

Statewide, Montana's population and household growth were far more robust with each increasing by more than 15% over the same period. The contrast underscores Great Falls' comparatively slow demographic change and points to a childcare market shaped less by population expansion and more by the evolving needs of existing families and workers.

Change in Population and Households, 2010-2025



Source: Decennial Census; Esri

Population and Households

	Population			Households			Average Household Size		
Geography	**2010**	**2020**	**2025**	**2010**	**2020**	**2025**	**2010**	**2020**	**2025**
Great Falls	59,186	60,456	61,842	25,475	26,080	26,352	2.26	2.24	2.27
Commuter Shed	71,881	74,441	76,224	30,096	31,188	31,596	2.32	2.30	2.33
Cascade County	81,325	84,414	86,357	33,808	35,011	35,428	2.33	2.32	2.35
Montana	989,413	1,084,225	1,144,799	409,606	447,812	473,271	2.35	2.36	2.36

Source: Decennial Census, Esri

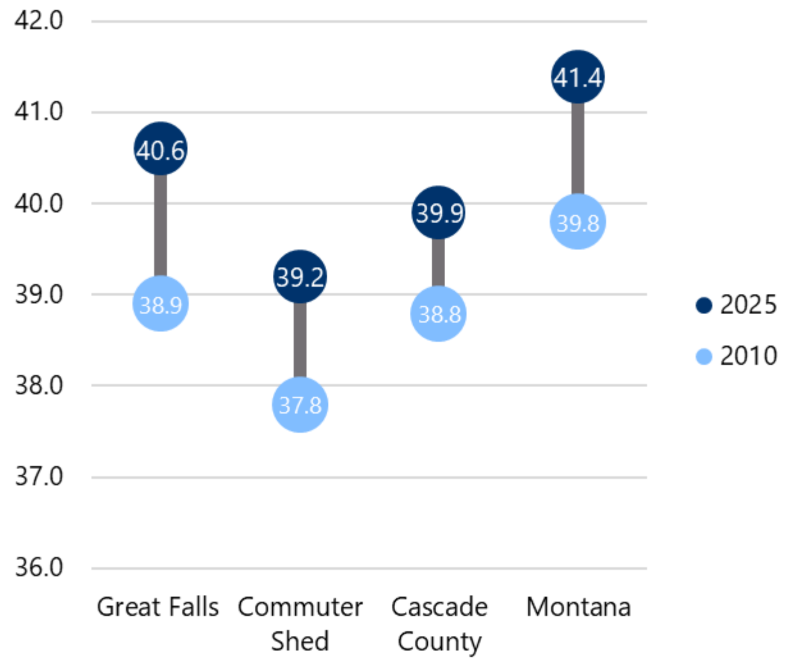
Median Age and Distribution

The population of Great Falls is gradually aging, with the median age rising from 38.9 in 2010 to 40.6 in 2025. This shift mirrors broader statewide and national trends but remains slightly below the Montana median age of 41.4. The region's Commuter Shed and Cascade County have also aged modestly over the past decade, signaling a slow but steady transition toward an older population profile.

In 2025, young adults ages 20 to 39 account for roughly one-quarter of residents in Great Falls, while middle-aged adults (40 to 59) make up another 22 to 23%. These groups are the segment most likely to have childcare needs. Meanwhile, the share of younger seniors ages 60 to 79 continues to grow, reflecting the region's aging workforce and potential future caregiving pressures.

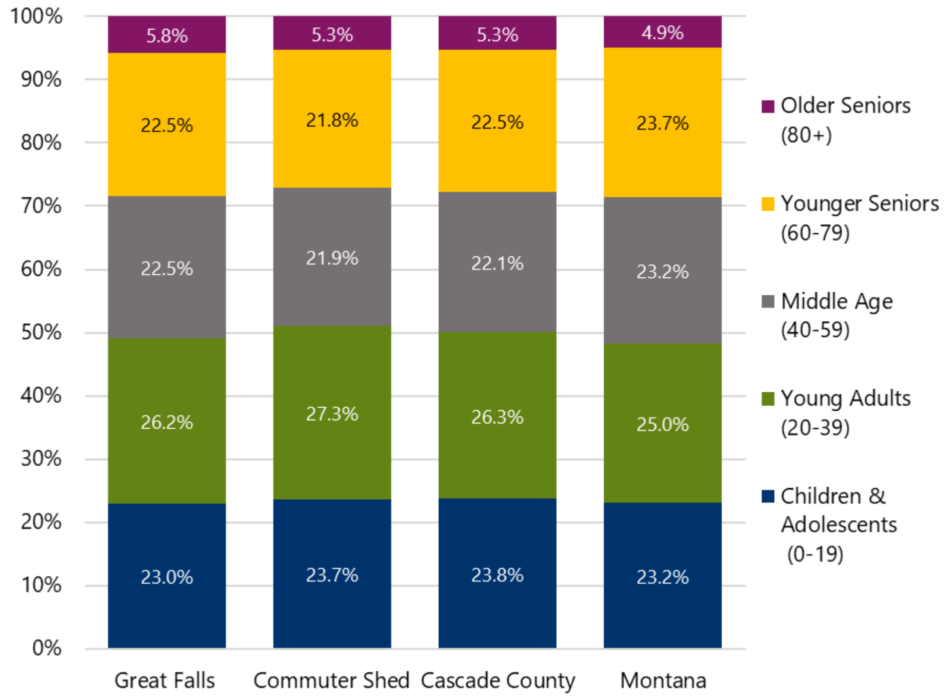
As of 2025, there are approximately 10,400 children under the age of 14 and over 13,000 in the Commuter Shed. These children represent the demand pool for childcare services in the area. This distribution suggests that childcare demand in Great Falls will remain steady but not rapidly expand, as the number of children entering early education and childcare programs is expected to stay relatively consistent in the near term as it has since 2020.

Median Age



Source: Decennial Census; Esri

Composition by Age Cohort, 2025



Source: Esri

Household Shifts

Fewer young families and limited new housing construction are reshaping the local household base, resulting in an increase in older, smaller, and more income-polarized households. These shifts have long-term implications for the childcare market, housing affordability, workforce replacement, and local service demand, which are core issues for a community aiming to sustain growth and vitality over the next decade.

Child Dependency Ratio, 2025 - 2030

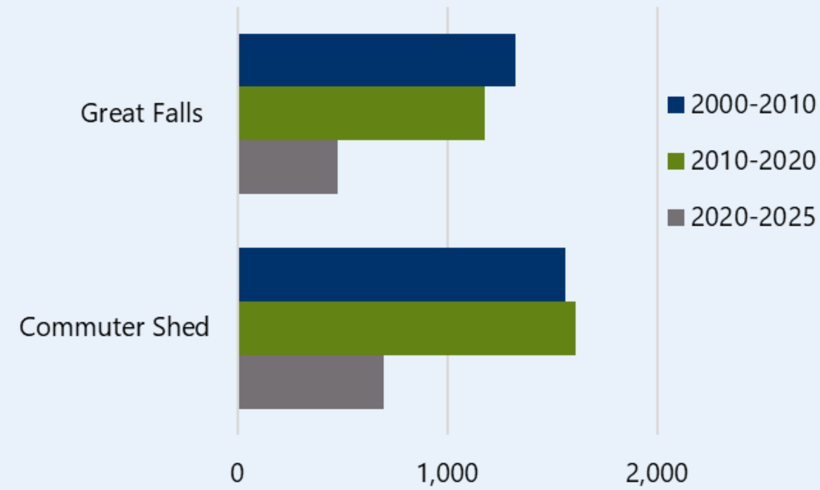
	2025	2030	Pct. Change 2025- 2030
Great Falls	35.7%	34.3%	3.9%
Commuter Shed	36.5%	35.2%	3.6%
Cascade County	37.1%	35.9%	3.2%
Montana	35.8%	34.2%	4.5%

Source: Esri

The child dependency ratio is the share of children (dependents) aged 0-17 compared to the working-class population, individuals aged 18-64. The child dependency ratio is the highest in Cascade County at 37.1% followed by the Commuter Shed at 36.5%. The child dependency ratio is declining across Great Falls, Cascade County, and the commuter shed, projected to drop by roughly 3–4% between 2025 and 2030. This signals slower family formation and a shrinking base of young families, consistent with broader state and national trends in aging.

Both Great Falls and the commuter shed experienced robust housing growth between 2000 and 2020; however, the period from 2020 to 2025 shows a steep slowdown, particularly in the city.

Change in Housing Inventory, 2000-2025



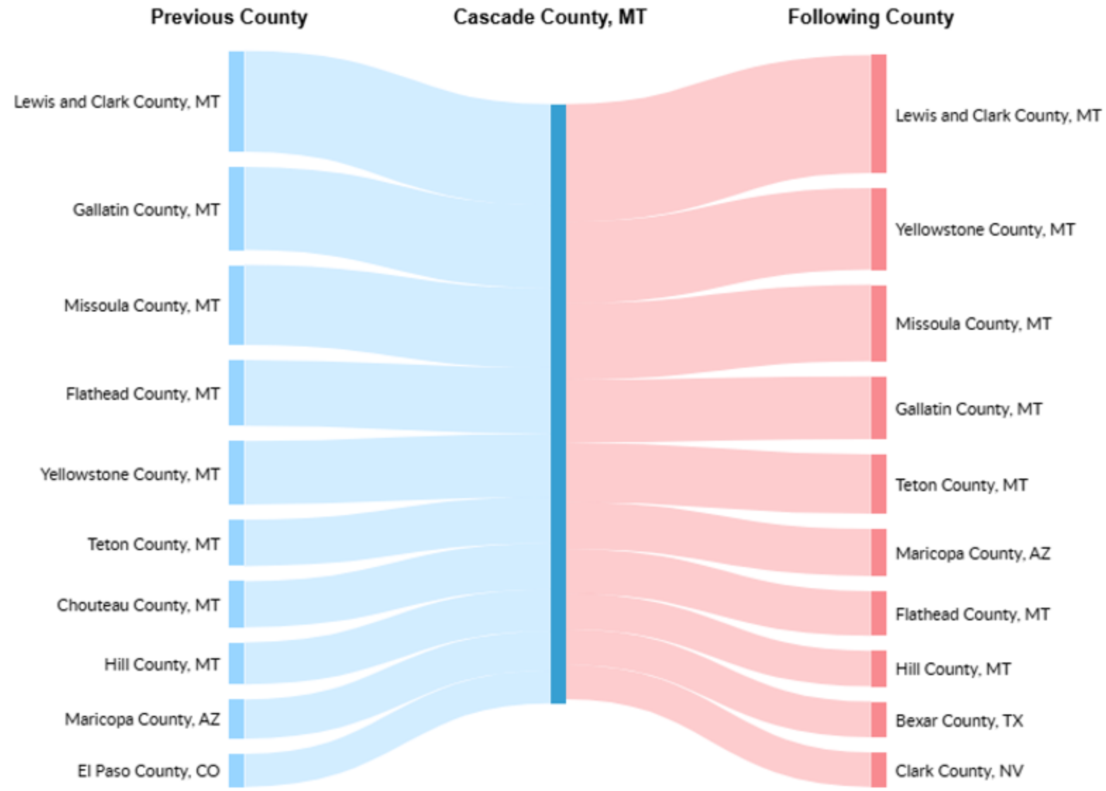
Source: Decennial Census; Esri

Migration

In addition to demographic shifts, inbound and outbound migration in Cascade County highlights how the population in the City of Great Falls and surrounding region will be impacted. The table to the right analyzes past and current residents of Cascade County. The left column shows residents of other counties migrating to Cascade County. The right column shows residents migrating from Cascade County.

In 2022, more people moved into Cascade County than moved out, with a total net migration of 73 people. The top counties from which people are migrating to Cascade County include Lewis and Clark County, Gallatin County, Missoula County, and Flathead County. The top counties where Cascade residents are migrating to include Lewis and Clark County, Yellowstone County, Missoula County, and Gallatin County.

Inbound and Outbound Migration for Cascade County, 2022



Source: Lightcast

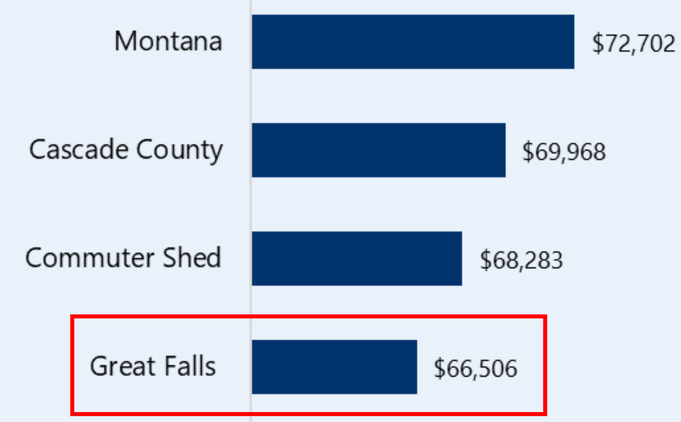
Household Income and Distribution

The median household income in Great Falls is estimated at $66,506 in 2025, below both Cascade County ($69,968) and the statewide median of $72,702. Rather than reflecting lower wage opportunities within the city, this difference likely stems from housing market dynamics as higher-income households increasingly settle in nearby communities where newer and more spacious housing is available. This pattern contributes to ongoing suburban growth and income sprawl around the city.

In Great Falls, over 35% of households earn less than $50,000 per year, a share higher than state and national averages. About one in five households earn between $50,000 and $74,000.

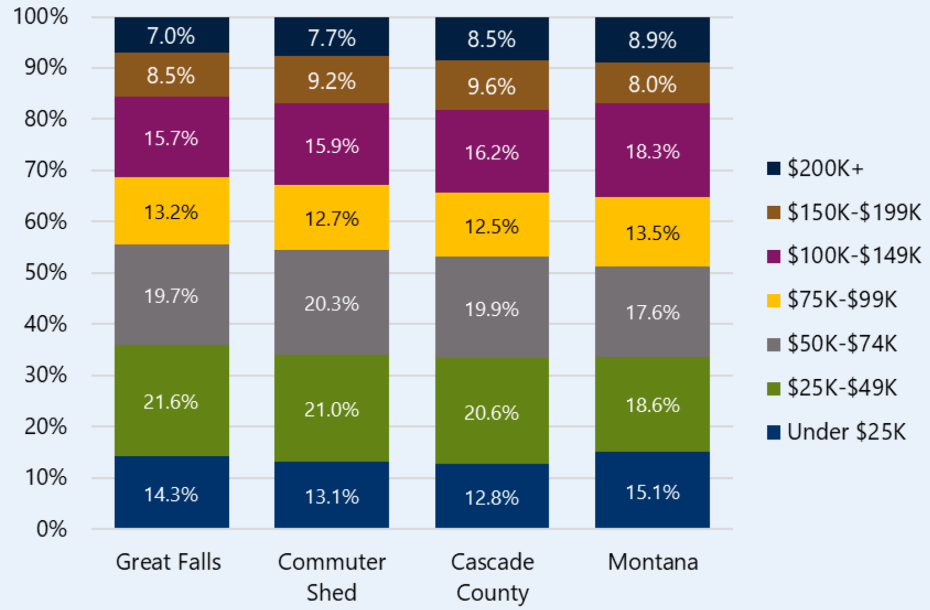
These figures reflect a predominantly middle-income community with limited representation at the highest income tiers. For childcare providers, this means that affordability will remain a key factor shaping demand, as many families operate within income ranges where childcare costs account for a significant share of their household budgets.

Median Household Income, 2025



Source: Esri

Households by Income Group, 2025



Source: Esri

Employment Trends – Cascade County

- **Steady but slowing growth**: Total employment in Cascade County is projected to increase by just 0.2% (+102 jobs) between 2024 and 2029, following stronger growth of 2.4% (≈1,100 jobs) between 2019 and 2029.
- **Construction** and **Manufacturing** are projected to remain growth leaders, adding roughly 270 jobs combined and continuing their momentum from earlier in the decade.
- **Health Care** and **Social Assistance**, the largest sector (7,471 jobs in 2024), will see slower growth (+2.5%), suggesting stabilization after significant pandemic-era expansion.
- Average earnings ($65,943) vary widely, from $26,960 in food services to over $130,000 in utilities, highlighting the continued divergence in local wage levels across industries.

Cascade County Jobs by Industry, 2019-2029

NAICS	Description	2019 Jobs	2024 Jobs	2029 Jobs	Change in Jobs 2019-2024	Pct. Change 2019-2024	Change in Jobs 2024-2029	Pct. Change 2024-2029	Avg. Earnings Per Job
11	Agriculture, Forestry, Fishing and Hunting	572	533	490	(40)	-6.9%	(43)	-8.1%	$53,853
21	Mining, Quarrying, and Oil and Gas Extraction	<10	20	27	Insf. Data	Insf. Data	7	36.4%	$42,019
22	Utilities	175	187	184	12	7.0%	(3)	-1.7%	$134,367
23	Construction	2,638	3,122	3,288	484	18.3%	166	5.3%	$83,798
31	Manufacturing	1,215	1,378	1,485	163	13.4%	107	7.7%	$93,561
42	Wholesale Trade	1,412	1,525	1,530	113	8.0%	5	0.3%	$82,733
44	Retail Trade	5,023	5,034	4,839	11	0.2%	(195)	-3.9%	$45,588
48	Transportation and Warehousing	1,391	1,436	1,471	44	3.2%	36	2.5%	$69,601
51	Information	422	225	156	(197)	-46.7%	(68)	-30.5%	$79,508
52	Finance and Insurance	1,969	1,808	1,724	(161)	-8.2%	(84)	-4.6%	$97,243
53	Real Estate and Rental and Leasing	507	474	453	(33)	-6.5%	(21)	-4.5%	$54,559
54	Professional, Scientific, and Technical Services	1,393	1,504	1,531	110	7.9%	27	1.8%	$87,303
55	Management of Companies and Enterprises	201	360	436	159	78.9%	76	21.1%	$100,916
56	Administrative and Support and Waste Management and Remediation Services	2,085	1,939	2,088	(146)	-7.0%	149	7.7%	$56,498
61	Educational Services	664	687	680	23	3.5%	(7)	-1.0%	$38,260
62	Health Care and Social Assistance	7,179	7,471	7,654	292	4.1%	184	2.5%	$74,857
71	Arts, Entertainment, and Recreation	1,069	991	932	(78)	-7.3%	(58)	-5.9%	$28,891
72	Accommodation and Food Services	4,048	4,396	4,499	348	8.6%	103	2.3%	$26,960
81	Other Services (except Public Administration)	1,991	1,990	1,973	(1)	0.0%	(17)	-0.9%	$40,697
90	Government	9,173	9,063	8,789	(110)	-1.2%	(274)	-3.0%	$77,290
99	Unclassified Industry	<10	28	42	Insf. Data	Insf. Data	14	48.2%	$35,652
	Total	**43,137**	**44,169**	**44,271**	**1,032**	**2.4%**	**102**	**0.2%**	**$65,943**

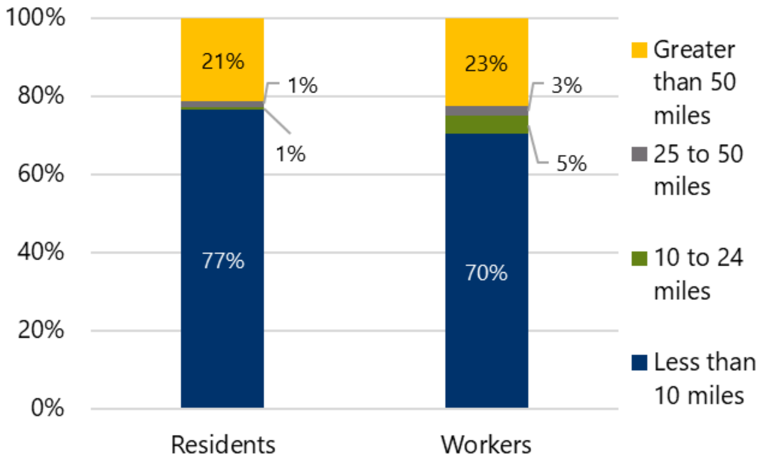
Source: Lightcast

Commuting Patterns

- The average commute time for Great Falls residents is just 14.7 minutes, well below the state average of 19.2 minutes, highlighting the community's compact geography and limited congestion.
- About 77% of residents and 70% of workers travel less than 10 miles to work, indicating that most employment and housing opportunities are locally aligned.
- Only about 1 in 5 residents (21%) and roughly 1 in 4 workers (23%) commute more than 10 miles, suggesting a relatively contained labor market with modest regional inflows and outflows.
- Nearly 18,600 people both live and work in Great Falls, while 12,063 commute in and 8,122 commute out, reflecting the city's role as an employment hub in Cascade County.

Source: Census On The Map

Commuting Distance for the City of Great Falls Residents and Workers, 2022



Source: Census OnTheMap

Commuting Data for Workers Aged 16+, 2023

	Great Falls	Commuter Shed	Cascade County	Montana
Average Commute to Work (Minutes)	14.7	NA	16.6	19.2
15-19 Minutes	6,967	8,189	8,743	88,636
10-14 Minutes	7,766	8,867	9,234	93,346
5-9 Minutes	6,327	7,454	7,812	86,483
<5 Minutes	1,179	1,731	1,981	32,995
Total within <20 Minutes	**22,239**	**26,241**	**27,770**	**301,460**

Source: Esri, ACS 5-Yr

4 CHILDCARE FACILITY INVENTORY

The following is a list of childcare facilities in Great Falls, MT. According to the Montana Early Child Service Bureau, there are 73 childcare facilities with a total capacity of 3,095 children up to 12 years old. There are 18 facilities that care only for children aged 6 and under. Childcare facility types are broken into the following categories:

- **Child Care Centers** – Child care centers are larger, out-of-home care facilities that provide care to 16 or more children on a regular basis. These facilities are typically divided into groups/classrooms of similarly aged children. In Great Falls, there are 42 childcare centers with a capacity of 2,712 children under the age of 12.

- **Group Home Childcare** – Group childcare providers care for up to 12 children at a time in a residence. There are 22 group childcare facilities in Great Falls with a capacity for 327 children.

- **Family Home Childcare** – Family childcare occurs in a residential setting where providers care for small groups of children with low child-to-provider ratios. There are 7 Family childcare providers with the capacity for up to 52 children.

- **Family, Friend, Neighbor Childcare (FFN)** – A Family, Friend, and Neighbor childcare provider can provide care for no more than six children from separate families or all children from a 'sibling group' and who opts to be registered. There are 2 FFN providers in Great Falls with the capacity for 4 children.

Between 2021 and 2025, licensed childcare capacity in Great Falls increased from 2,531 to 3,095 slots, alongside growth in the number of licensed facilities from 67 to 73. This growth has been driven primarily by the expansion of center-based and group childcare, while family childcare capacity has declined modestly. Despite these increases, providers indicate that much of the licensed capacity added since 2021, particularly for preschool-ages and school-aged children, remains underutilized.

Note: Unlicensed providers are not included in the capacity below. Only Licensed Childcare Providers have been evaluated for the purposes of this study.

Summary of Types of Childcare Facilities

Facility Type	Typical Setting	Typical Capacity	Ages Served	Staffing Model	Key Strengths	Key Constraints / Risks
Child Care Centers	Commercial or institutional facility	16+ children (often segmented by classroom)	Infants through school-age	Multiple staff; higher credential and staffing requirements	Largest source of licensed capacity; structured programming; consistent hours	High operating costs; staffing shortages have outsized impact; less flexible for families
Group Home Childcare	Provider residence	Up to 12 children	Mixed ages	Small staff; owner-operator with assistants	Smaller scale allows flexibility; lower overhead than centers	Capacity limited by staffing and home size; closures quickly reduce supply
Family Home Childcare	Provider residence	Small group (typically 6–8)	Mixed ages, often younger children	Single provider or minimal staff	Home-like environment; low child-to-provider ratios	Highly vulnerable to burnout; limited expansion potential
Family, Friend, Neighbor (FFN)	Provider residence	Up to 6 children	Typically related or known children	Sole provider	Most flexible care option; culturally and family responsive	Very limited capacity; not a scalable supply solution

Inventory of Childcare Facilities by Provider Type

Childcare Facility Inventory in Great Falls, Jan 2026

Provider Name	Provider Type	Zip Code	Licensed Capacity	Licensed Age Range
A Kids Nest Childcare LLC	Child Care Center	59405	50	0 - 12
Community Early Education Center	Child Care Center	59405	120	0 - 12
EduCare Preschool & Childcare	Child Care Center	59405	60	0 - 12
Hands/Giant Springs Elementary School	Child Care Center	59401	40	5 - 12
Hands/Chief Joseph School	Child Care Center	59405	28	5 - 12
Hands/Lewis & Clark Elementary School	Child Care Center	59405	42	5 - 12
Hands/Lincoln Elementary School	Child Care Center	59405	65	5 - 12
Hands/Loy Elem School	Child Care Center	59405	20	5 - 12
Hands/Meadowlark Elementary School	Child Care Center	59404	75	5 - 12
Hands/Morningside School	Child Care Center	59405	28	5 - 12
Hands/Mountain View School	Child Care Center	59405	28	5 - 12
Hands/Riverview Elementary School	Child Care Center	59404	50	5 - 12
Hands/Sacajawea Elementary School	Child Care Center	59404	60	5 - 12
Hands/Sunnyside School	Child Care Center	59405	40	5 - 12
Hands/Valley View School	Child Care Center	59404	50	5 - 13
Hands/West Elementary School	Child Care Center	59404	40	5 - 12
Hands/Whittier School	Child Care Center	59401	14	5 - 12
Holy Spirit Extended Care	Child Care Center	59401	40	3 - 12
Kidz Kreations / Stacie Lynn Olson	Child Care Center	59405	20	2 - 5
Leap Ahead Learning Center	Child Care Center	59404	60	0 - 12
Little Daisies Daycare	Child Care Center	59405	32	0 - 12
Little Learners Academy	Child Care Center	59405	40	0 - 12
Nature's Way Early Learning	Child Care Center	59405	64	1 - 6

Childcare Facilities by ZIP Code and Type, Great Falls, Jan 2026

ZIP Code	Facility Type				Total
	Child Care Center	Group Home Child Care	Family Home Child Care	Family, Friend, Neighbor (FFN)	
59401	9	6	2	1	**18**
59404	9	10	3	1	**23**
59405	24	6	2	-	**32**
Total	**42**	**22**	**7**	**2**	**73**

Source: Montana Early Childhood Service Bureau

Inventory Continued

Childcare Facility Inventory in Great Falls, Jan 2026

Provider Name	Provider Type	Zip Code	Licensed Capacity	Licensed Age Range
Opportunities Inc Head Start DC Annex	Child Care Center	59405	80	3 - 6
Opportunities Inc Head Start DC Emerson	Child Care Center	59405	200	4 - 6
Opportunities Inc Head Start DC McKinley	Child Care Center	59404	180	5 - 6
Opportunities Inc Head Start DC Roosevelt	Child Care Center	59401	162	6 - 6
Peace Place Inc.	Child Care Center	59405	36	1 - 12
Play 'N' Learn Academy	Child Care Center	59405	105	0 - 12
Play N Learn PreSchool Daycare Inc	Child Care Center	59405	48	3 - 12
River's Edge Early Learning Academy, Inc	Child Care Center	59405	67	0 - 12
Robyn's Nest Daycare / Robyn Brantner	Child Care Center	59405	90	0 - 12
Schoolhouse Preschool And D/C	Child Care Center	59401	40	0 - 12
St Thomas Child Family Center/South	Child Care Center	59405	120	0 - 12
St. Patrick's Academy West Extended Care	Child Care Center	59405	58	2 - 12
The Next Best Thing	Child Care Center	59404	120	0 - 12
The Walk Preschool and Daycare	Child Care Center	59401	28	0 - 5
TLC Center BLC / Madison Ameline	Child Care Center	59404	60	0 - 12
TLC Center-MSU / Alexandra Albert	Child Care Center	59405	80	0 - 12
Ursuline Centre Preschool / Wende Curry	Child Care Center	59401	76	3 - 5
Wee Disciples	Child Care Center	59401	80	0 - 12
Young Parents Education Center	Child Care Center	59401	16	0 - 6
Danielle Mangold / Tiny Sprouts Childcare	Family Home Child Care	59405	8	0 - 5
Diana Kundey / Busy Little Bees Daycare	Family Home Child Care	59404	6	0 - 7
Edgar Woods II / Knowledge is Power	Family Home Child Care	59401	8	0 - 12
Gloria Davis / Moms Home Day Care	Family Home Child Care	59401	8	0 - 12
Jennie Yates / The Rocking Horse	Family Home Child Care	59405	8	0 - 12
Kat Whitish / Little Halo's Childcare	Family Home Child Care	59404	6	0 - 12
Kim Brooks / Little Darlins' Daycare	Family Home Child Care	59404	8	0 - 12

"The system doesn't have much margin. Small disruptions turn into big problems fast."

GREAT FALLS CHILDCARE STAKEHOLDER

Inventory Continued

Childcare Facility Inventory in Great Falls, Jan 2026

Provider Name	Provider Type	Zip Code	Licensed Capacity	Licensed Age Range
Anna Kraus / Wee Care	Group Home Child Care	59405	14	0 - 12
Ashley Andersen / BRB Preschool	Group Home Child Care	59404	15	0 - 12
Brenda Kueffler/Oodles of Fun Preschool	Group Home Child Care	59401	15	0 - 12
Charlie Patterson/Little Tree Preschool	Group Home Child Care	59404	15	3 - 5
Chris Parenteau / Just 4 Kidz 2	Group Home Child Care	59404	15	0 - 12
Explore's Adventures	Group Home Child Care	59405	15	0 - 10
Gibson Grove Preschool and Childcare	Group Home Child Care	59401	15	0 - 5
Gibson Grove Preschool and Childcare 2.0	Group Home Child Care	59401	15	0 - 6
Happy Hearts Caring Hands/Opportunities	Group Home Child Care	59401	15	0 - 12
Jill Skinner / Ms. Jill's Place	Group Home Child Care	59404	15	0 - 12
Kalli Poindexter / Just 4 Kidz	Group Home Child Care	59404	15	0 - 3
Lindsey's Littles	Group Home Child Care	59404	15	0 - 12
Little Daisies Academy	Group Home Child Care	59404	15	0 - 12
Lorang / Adventurous Learning Place	Group Home Child Care	59405	14	0 - 6
Nichole Davalos / Adventure Awaits	Group Home Child Care	59401	15	2 - 6
Pat Mendez / Great Beginnings Child Care	Group Home Child Care	59405	15	0 - 12
Peace of Mind Child Care at Victory	Group Home Child Care	59405	15	0 - 8
Smith / Four Seasons Learning Academy	Group Home Child Care	59404	14	0 - 12
The Lashley Learning Express Daycare	Group Home Child Care	59404	15	0 - 11
The Lashley Learning Express Daycare 2	Group Home Child Care	59404	15	0 - 11
Toby's House Crisis Nursery	Group Home Child Care	59401	15	0 - 12
Wendy Tedford / Sunshine Montessori	Group Home Child Care	59405	15	3 - 10
Deedra Jene Suek	Family, Friend & Neighbor (FFN)	59404	2	0 - 12
Emily Rose Jones	Family, Friend & Neighbor (FFN)	59401	2	0 - 12

Source: Montana Early Childhood Service Bureau

Childcare Center Costs

Across Montana, typical full-time childcare ranges from $840 to $1,170 per month, depending on the child's age and care setting. Infant care is the most expensive, averaging approximately $1,165–$1,170 per month, while care for four-year-olds averages closer to $1,000 per month. School-age care is less costly, averaging $840–$850 per month. These figures represent statewide averages and do not account for city-level variations or provider-specific pricing.

Cascade County Overview

Across Cascade County, childcare costs account for a significant and increasing share of household income, particularly for families with young children. In 2024, the county's median family income was $79,780, while women's median earnings totaled $30,338, despite a relatively high female labor force participation rate of 74.2%. For households relying on a single income, or where childcare costs are weighed against one parent's wages, infant and toddler care can approach or exceed one-third of annual earnings, creating strong financial disincentives to full-time employment. These figures underscore the importance of childcare access and affordability as a factor influencing workforce participation, especially for mothers.

Childcare prices increased by nearly 11% between 2022 and 2024 across all age groups and care settings. Center-based care consistently costs more than home-based care, with the highest financial burden falling on families with newborns and toddlers. In 2024, center-based infant care averaged $12,692 annually, equal to 14.3% of median family income, while toddler care averaged $13,226, or 14.9% of income. Even home-based options require more than 11% of median family income for newborns and toddlers.

Cost differentials by age reflect staffing ratios, licensing requirements, and care intensity, with infant and toddler care requiring significantly higher staffing levels. As a result, families with children under age three face the highest financial burden and the most limited availability.

Costs moderate slightly for preschool and school-age children, though they remain substantial. Center-based preschool and school-age care each averaged $11,342 annually, representing 12.8% of the median family income, while home-based options ranged from 11.0% to 11.8%. For many households, particularly those earning closer to women's median wages or living near the county's 8.1% family poverty rate, these costs pose a significant affordability challenge.

The data indicates that childcare in Cascade County routinely exceeds commonly cited affordability benchmarks, which often suggest that childcare should not exceed 7% of household income.

For families with newborns and toddlers, current costs are roughly double that level, even before accounting for housing, transportation, or healthcare expenses. Rising prices between 2022 and 2024 have further intensified this pressure.

For the 8.1% of families living in poverty, as well as households just above the poverty threshold, market-rate childcare is largely out of reach without subsidies or informal care arrangements, increasing reliance on patchwork solutions.

Childcare Prices as a Share of Median Family Income by Age of Children and Care Setting, Cascade County, 2022 and 2024

Age Group		2022	2024	Childcare Price as Share of Median Family Income
Infant				
	Center	$11,445	$12,693	14.3%
	Home	$9,253	$10,262	11.6%
Toddler				
	Center	$11,926	$13,226	14.9%
	Home	$9,450	$10,480	11.8%
Preschool				
	Center	$10,227	$11,342	12.8%
	Home	$9,450	$10,480	11.8%
School Age				
	Center	$10,227	$11,342	12.8%
	Home	$8,752	$9,706	11.0%

Source: National Database of Childcare Prices 2019-2022, Women's Bureau, US Department of Labor. UPDATED November 2024

Great Falls Childcare Cost

Childcare costs in Great Falls vary widely by provider, child age, and program structure. Rates differ most significantly between newborn and toddler care (ages 0-3) and preschool care (ages 3 and up), reflecting differences in staffing ratios, program intensity, and operating costs. As a result, averaging costs across age groups or providers can obscure meaningful variation and lead to misleading conclusions about affordability.

To reflect real-world conditions, this study examined a representative sample of publicly available childcare pricing and verified with 30% of childcare providers in Great Falls to understand pricing by provider type and age group. Rates are presented as advertised by providers, reflect full-time care, and are shown by age group.

Based on this review, infant (0-12 months) and toddler (ages 1-3) care represents the highest-cost segment of the childcare market in Great Falls. Weekly rates for children under age three typically range from **$270 to $320 per week**, equivalent to approximately $1,170 to $1,390 per month. These higher costs are driven by higher operating costs and higher staff intensity, which providers consistently cited as a financial and operational pressure.

For preschool-aged children (ages 3-5), weekly rates are modestly lower, generally ranging from **$245 to $275 per week**, or approximately $1,060 to $1,190 per month. While less expensive than infant care, preschool tuition remains a substantial household expense, particularly for families with multiple children or limited access to public or subsidized preschool options.

The table illustrates the range of weekly childcare costs across six licensed childcare centers in Great Falls and highlights consistent pricing patterns by age cohort. The variation in pricing indicates a relatively narrow band of weekly rates within each age group. This variation underscores that childcare affordability in Great Falls is shaped less by a single "average" cost and more by child age, household composition, and access to financial supports factors that directly influence workforce participation and enrollment decisions.

"Infant care fills first and empties last. It's the hardest to staff and hardest to afford."

GREAT FALLS CHILDCARE STAKEHOLDER

Childcare Center Rate Examples, Great Falls, 2025

Childcare Center	Age Group	Price
Community Early Education Center		
	0 - 3 yrs	$285/week
	3 yrs and older	$260/week
River's Edge Early Learning Academy Inc		
	6 weeks - 24 months	$270/week
	2 - 3 yrs	$260/week
	3 - 5 yrs	$245/week
Nature's Way Early Learning		
	6 weeks - 24 months	$319/week
	2 - 5 yrs	$250/week
Play 'N' Learn Academy		
	0 - 3 yrs	$290/week
	3 yrs and up	$275/week
	Before and After School Care	$150/week
TLC Center - MSU		
	0 - 35 months	$280/week
	3 yrs and up	$260/week
Wee Disciples		
	Infant up to 3 yrs	$290/week
	3 yrs and up	$260/week

Note: All rates shown are for full-time care and can vary by age and schedule.
Source: Rates publicly available on websites.

Great Falls Childcare Cost Continued

A comparison of childcare pricing between the 2021 Great Falls study and current publicly advertised rates indicates a clear upward shift in the cost of full-time childcare across all age groups, along with a move toward more standardized, age-specific pricing ranges.

In the 2021 study, childcare costs in Great Falls were reported on a daily or monthly basis, with typical rates ranging from $40–$45 per day for children under two, $30–$45 per day for children ages two to three, and $30–$40 per day for older children. When converted to full-time equivalents, these daily rates correspond to approximately **$200 to $225 per week** for infants, **$150 to $225 per week** for toddlers, and **$150 to $200 per week** for preschool-aged children. On a monthly basis, this equates to roughly **$650 to $975 per month**, depending on age and provider.

Based on publicly available pricing and provider verification, infant and toddler care (ages 0–3) now typically ranges from $270 to $320 per week, while preschool-age care (ages 3–5) generally ranges from $245 to $275 per week. These rates translate to monthly costs of approximately $1,050 to $1,400, with the highest costs concentrated in infant and toddler care. When viewed on a comparable basis, **current rates represent an increase of approximately 40 to 60% from 2021 pricing**, with the largest absolute and proportional increases occurring in care for children under age three. This shift reflects rising labor costs, more explicit alignment of tuition with staffing ratios and regulatory requirements, and broader cost pressures within the childcare sector.

In addition to higher costs, the current pricing landscape reflects greater stratification by age and program type, suggesting that providers are increasingly aligning tuition with operational realities. This evolution highlights the increasing cost pressures within the childcare sector and underscores the importance of expanding childcare capacity in a way that balances affordability with financial sustainability for providers.

Childcare Waitlists

Childcare waitlists in Great Falls reflect a combination of age-specific demand, family provider preferences, and enrollment dynamics, rather than a uniformed shortage of licensed childcare facilities. Based on provider interviews, many licensed facilities are operating below licensed capacity, particularly for preschool-aged children, even as families continue to inquire about availability. This pattern suggests that waitlists are driven more by concentrated demand in younger age cohorts than by systemwide capacity shortages.

In addition, family preferences play a significant role in waitlist dynamics. Many families, particularly those with infants, expressed a strong preference for smaller, home-based or group childcare settings, which have limited licensed capacity and fill quickly. As a result, families may enroll in center-based care as an interim solution while remaining on waitlists for preferred providers. This contributes to the persistence of waitlists even when licensed capacity exists elsewhere in the system.

Provider interviews suggest that recent growth in licensed childcare capacity has occurred primarily through center-based providers, while demand pressures remain strongest for smaller, home-based and group childcare settings. This structural misalignment helps explain persistent waitlists despite overall capacity growth and highlights the importance of supporting provider types that align most closely with family preferences. Waitlists in Great Falls are best understood as an indicator of misalignment between the type of care families seek and the care that is most readily available, rather than as evidence of a generalized lack of childcare supply.

Demand Exists, but Not Where Capacity Has Grown

Although **48.7% of households seeking care are not currently enrolled**, many providers report open preschool slots. **Demand is concentrated in infant care and smaller, home-based settings,** highlighting a misalignment between supply growth and family preferences.

4 DEMAND AND FEASIBILITY

Demand and feasibility for childcare capacity in Great Falls was determined through community survey, stakeholder interviews, and review of previous childcare studies/reports including:

- Child Care & The Workforce Study Summary, Final Report to the 69th Montana Legislature – 2023-2024
- Child Care Deserts: An Analysis of Child Care Supply and Demand Gaps in Montana – Amy Watson, Jan 2024
- Impacts of Child Care on the Montana Workforce: Results from a Survey of Montana Businesses – Nov 2020
- Childcare in Montana: Exploring the Causes and Impacts of a Lack of Childcare on the Montana Economy – Mar 2024
- Montana Child Care Business Connect: Building Capacity in Montana's Child Care Ecosystem – 2022-2024
- A Comprehensive Fiscal Analysis of the Prenatal to Five System in Montana – Dec 2025

Based on previous reports, the licensed childcare capacity in Montana only meets 44% of current demand across the state in 2023.[1] This combined evidence base provides the context for interpreting local conditions in Great Falls and informs the assessment of current childcare supply, capacity constraints, and market feasibility.

Findings

1. **Childcare demand exceeds usable capacity, not licensed slots.** Estimated 500 to 860 children under age five would enroll in childcare centers if care were affordable, available, and aligned with household needs. While licensed capacity exists, not all slots are accessible or usable for families currently seeking care.

2. **Unmet demand is concentrated in newborn and preschool age groups.** Children under age five account for the majority of unmet need, with preschool-aged children (3–5) and infants (under 12 months) representing the largest pressure points due to staffing intensity and operating costs, while preschool demand is shaped by affordability and competition.

3. **Affordability and workforce economics limit both access and expansion.** Nearly **four in five households** report spending too much on childcare, while providers face staffing challenges and rising operating costs that limit their ability to expand capacity or lower tuition. The pressures affect enrollment decisions and provider sustainability, even where capacity exists.

4. **Childcare access functions as a workforce constraint for families and employers.** More than **60% of households** report difficulty finding care, contributing to reduced work hours, delayed career advancement, and challenges for employers seeking to recruit and retain workers.

[1] Watson, Amy. Childcare in Montana: Exploring the Causes and Impacts of a Lack of Childcare on the Montana Economy – Mar 2024

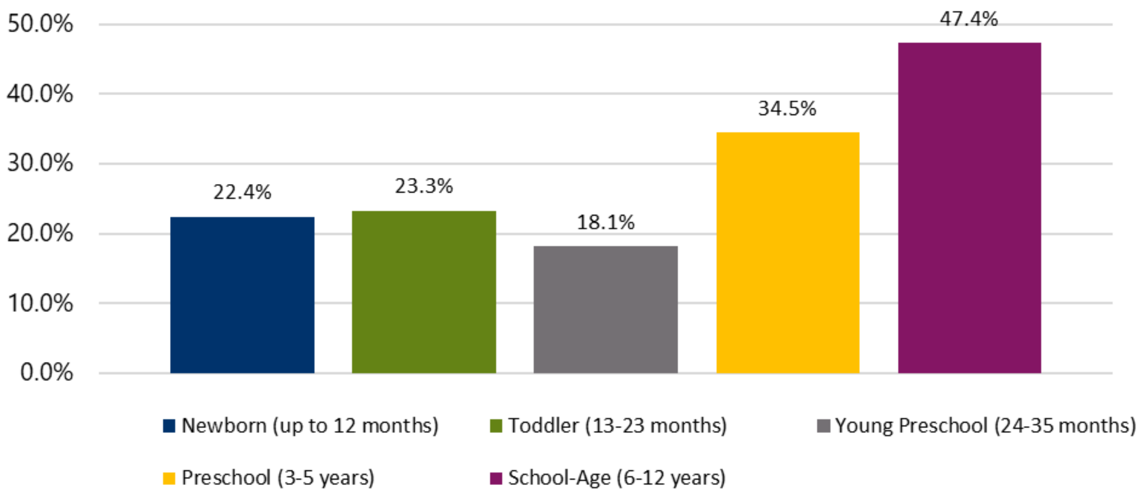
Community Survey

To understand the childcare demand in Great Falls a digital survey was conducted to assess current childcare arrangements and demand. Stakeholder interviews with local childcare providers, family resource experts, and childcare and family experts were also conducted to gain a full understanding of the childcare landscape as well as opportunities and challenges. Findings from the Great Falls Childcare Demand Survey indicate clear and sustained demand for additional childcare capacity, driven by affordability pressures, operational constraints, and unmet needs among both civilian and military-affiliated households. A total of 116 participants provided input in the Great Fall Childcare Demand Survey from November 18, 2025 to January 9, 2026. All respondents completed the survey in its entirety, though some respondents skipped select questions.

Approximately 63% of respondents indicated that it was difficult to very difficult to find childcare, with nearly four in five indicating they are spending too much on care. These challenges persist across households with children of different ages and reflect ongoing constraints related to cost, availability, and scheduling flexibility.

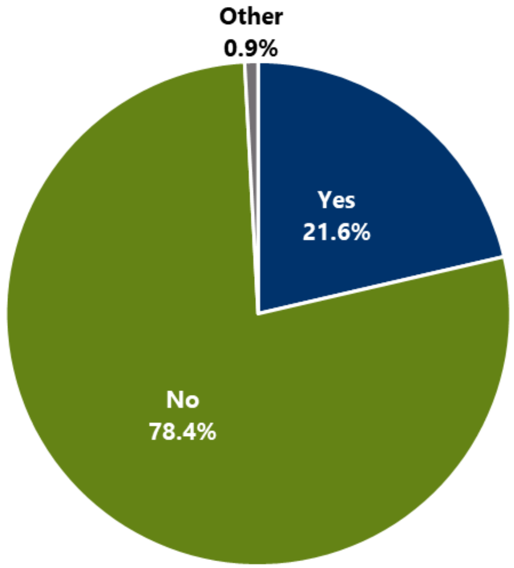
Military- and base-affiliated households represent a notable share of unmet demand. More than one-fifth of respondents (21.6%) reported that they or someone in their household is military- or base-affiliated. Among those households, 80% indicated that their childcare needs are not met through on-base facilities, suggesting continued reliance on off-base childcare options. Survey responses from this group point to gaps in availability, limited infant and toddler capacity, and misalignment between childcare hours and military work schedules.

Q1. Percentage of Respondents that have Children in the Following Age Groups (n=116)



Source: Great Falls Childcare Demand Survey, Camoin Asssociates

Q2. Are you or someone in your household military- or base-affiliated? (n=116)



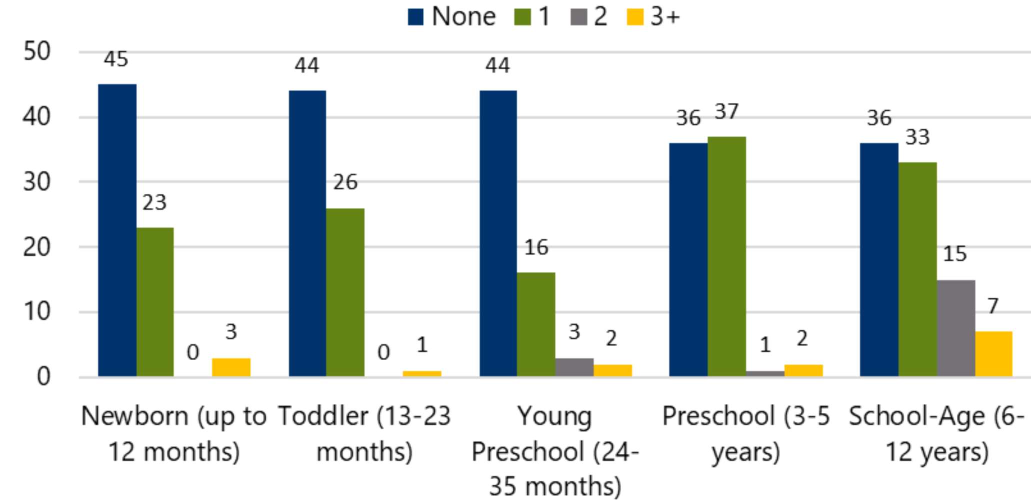
Source: Great Falls Childcare Demand Survey, Camoin Asssociates

Survey respondents included households with children across all age groups, with 47% reporting at least one school-aged child (ages 6–12) and 34% reporting preschool-aged children (ages 3–5). Younger children were also well represented, including 23% with toddlers and 21% with newborns, age groups where respondents most frequently cited limited availability and higher costs. Across age groups, families reported childcare needs concentrated on weekdays, with additional demand for early morning start times, late afternoon or evening pickup, summer and school-break care, and, to a lesser extent, weekend and emergency backup care.

With this respondent profile established, the survey examined current childcare arrangements to understand how families are meeting their childcare needs and where unmet demand may exist. Just over half of respondents (51%) reported that they currently use a childcare facility in Great Falls, while remaining households rely on a mix of family-based, informal, or alternative care arrangements. Most respondents (84%) indicated that they do not anticipate changes to their childcare arrangements in the next few months, suggesting near-term stability in existing care patterns, though 16% anticipate changes that may generate incremental demand.

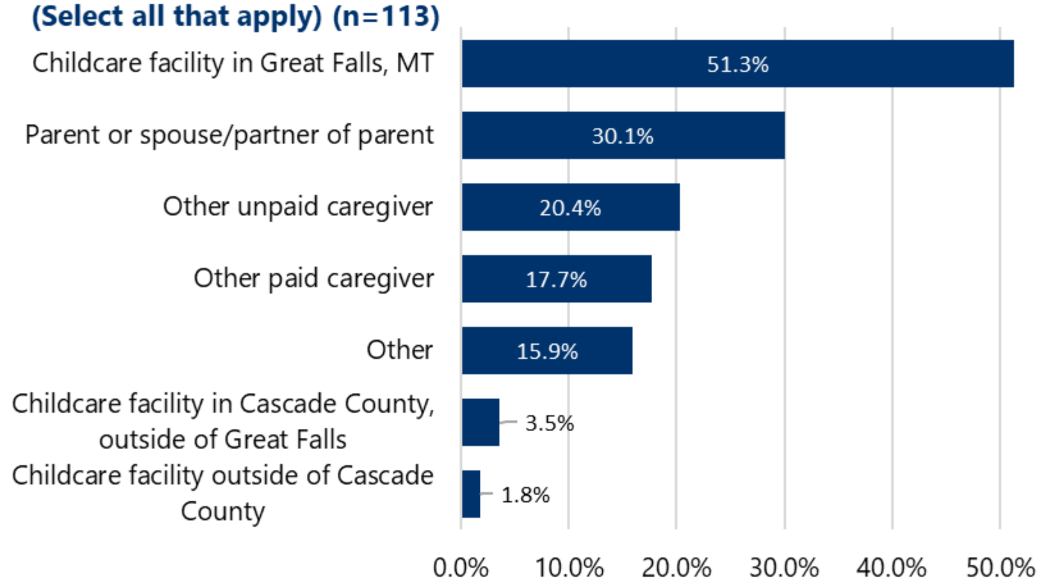
The survey also assessed future childcare demand beyond current arrangements. More than half of respondents (55%) indicated that they do not anticipate additional childcare needs in the next few years, while 34% expect additional needs and 11% remain unsure. Among households anticipating future childcare needs, preferences were divided between childcare in a provider's home (35%) and childcare centers (33%), with a smaller share preferring care provided by a parent, spouse, or partner (21%). Preferences for care provided by a relative or a caregiver in the home were less common.

Please indicate how many children you have in the following age groups. (n=116)



Source: Great Falls Childcare Demand Survey, Camoin Associates

What are your current childcare arrangements? (Select all that apply) (n=113)



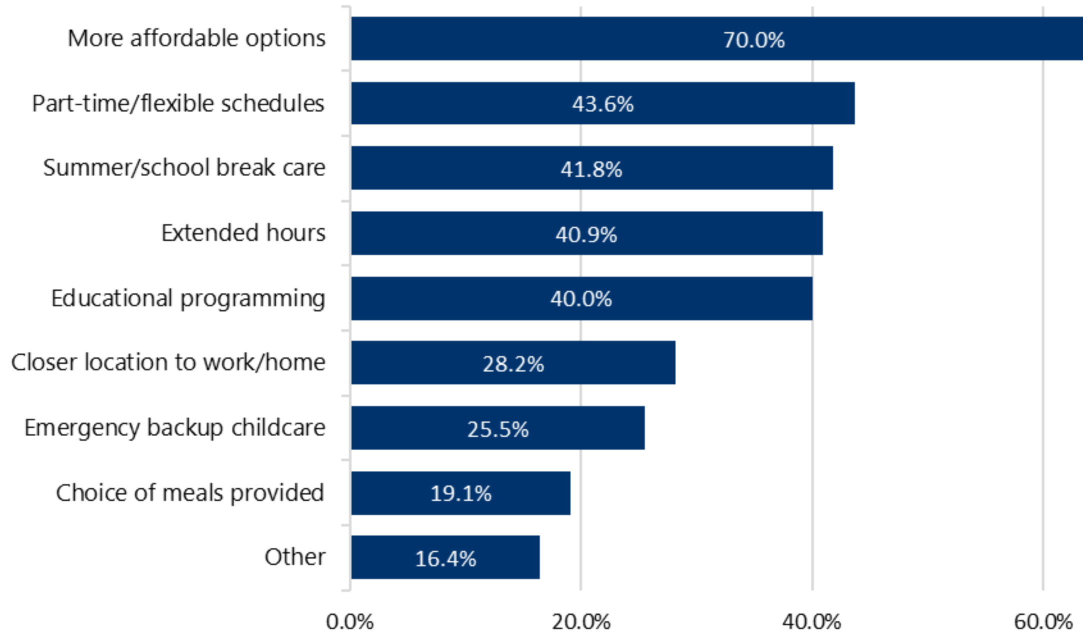
Source: Great Falls Childcare Demand Survey, Camoin Associates

Interest in a new childcare facility in Great Falls is strong under reasonable assumptions of cost and location. Respondents reported an average interest rating of 7.18 out of 10, with nearly two-thirds indicating high interest (ratings of 8–10). This indicates a meaningful latent demand for additional childcare options if key needs are addressed.

Survey responses indicate that affordability is the single most important driver of potential enrollment. 70% of respondents identified more affordable options as a factor that would encourage them to use a new childcare facility. Beyond cost, demand is shaped primarily by greater flexibility and service coverage, including flexible schedule (43.6%), summer or school-break care (41.8%), and extended hours (40.9%). Interest in higher-quality or educational programming (40.0%) further underscores that families are seeking care models that better align with work schedules, seasonal needs, and perceived value.

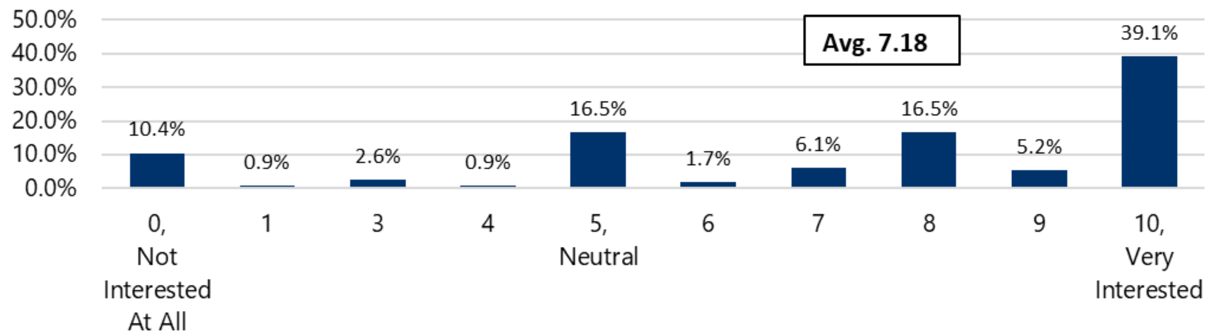
Notably, location ranked lower than service-related factors, with fewer than one-third of respondents (28.2%) citing proximity to home or work as a primary driver. This suggests that while location remains an important consideration, families place greater emphasis on affordability, flexibility, and program quality when evaluating new childcare options.

Which of the following would encourage you to use a new childcare facility in Great Falls? (Select all that apply) (n=110)



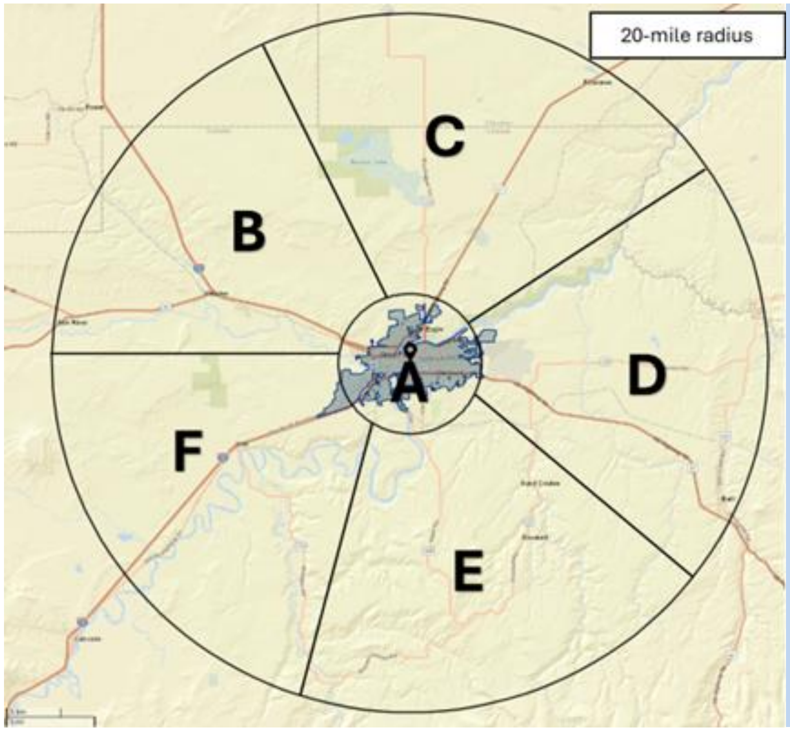
Source: Great Falls Childcare Demand Survey, Camoin Associates

Rate your interest in a new childcare facility in Great Falls, assuming a reasonable cost and location. (n=115)



Source: Great Falls Childcare Demand Survey, Camoin Associates

Map of Great Falls and Surrounding Area



Geographic Preference for New Childcare Facility

A	**77.6%**
B	1.9%
C	2.8%
D	2.8%
F	2.8%

None of the Above
7.5%
Other
4.7%

Geographic preference results reinforce this interpretation. Approximately 78% of respondents indicated a preference for locating a new childcare facility within Area A, encompassing the City of Great Falls. This finding reflects a desire for general accessibility within the city, rather than in specific sections of the surrounding area.

This preference aligns with the current distribution of licensed childcare capacity, which is already concentrated within the city particularly in ZIP Code 59405, which accounts for more than half of all licensed childcare slots citywide. Despite this concentration, provider interviews and survey responses indicate that families continue to experience access challenges, underscoring that geographic proximity alone does not resolve gaps in childcare availability.

Taken together, these findings suggest that families are less concerned with where a new facility is located within the city than with what it offers. A centrally accessible facility that prioritizes affordability, flexible scheduling, extended hours, and strong programming would be more responsive to family needs than a location-driven approach alone, particularly if it complements existing center-based capacity with services that better align with family preferences and unmet demand.

A full **ZIP Code map** can be found in **Appendix D.**

Childcare Facilities by ZIP Code and Type, Great Falls, Jan 2026

	Facility Type				
ZIP Code	Child Care Center	Group Home Child Care	Family Home Child Care	Family, Friend, Neighbor (FFN)	Total
59401	9	6	2	1	**18**
59404	9	10	3	1	**23**
59405	24	6	2	-	**32**
Total	**42**	**22**	**7**	**2**	**73**

Source: Montana Early Childhood Service Bureau

Demand Potential Summary

To estimate the childcare demand potential in Great Falls, survey results were paired with household and age cohort data from the US Census American Community Survey. Households with children under age six served as the base demand. Survey responses measuring interest in a new childcare facility at a reasonable cost and location were used to develop low- and high-case demand scenarios. The low-case scenario reflects households indicating the highest likelihood of enrollment (rating 10), while the high-case scenario includes households reporting strong interest (ratings 7–10). Together, these scenarios provide a bounded estimate of potential enrollment demand to inform feasibility and sizing considerations. These estimates reflect *potential demand* under reasonable assumptions of affordability, availability, and geographic access and represent the number of children seeking care rather than full-time equivalent slots.

To estimate net new demand, only households expressing interest in enrolling and reporting that they are not currently using a childcare facility in Great Falls were included. Demand by age cohort was then calculated by applying survey-derived averages for the number of children under age six per household to the estimated number of net new enrolling households. The survey asked respondents to report the number of children in each age group within their household, allowing the analysis to reflect local family composition rather than assuming a single child per household. These averages were used to translate household-level enrollment interest into estimated demand for childcare slots by age group. This approach reflects that enrollment decisions are made at the household level, while childcare capacity needs are driven by the number and age of children served.

The estimated net demand for childcare in Great Falls ranges from approximately 502 to 858 children in need of childcare, representing headcount demand rather than full-time equivalent slots, with the greatest demand for Preschool (3-5 year old) and Newborn (up to 12 months) spots. Under the low case scenario, there is enough unmet demand in Great Falls for 120 newborns, 109 toddlers, 105 young preschoolers, and 168 preschoolers. In the high case scenario, there is an unmet demand for 205 newborns, 186 toddlers, 179 young preschoolers, and 288 preschoolers.

Compared to the 2021 study, updated 2026 estimates show a modest rise in childcare demand with **a total net demand increase by roughly 80-120 children.**

Great Falls Families with Children Under 6 years Old, 2023

	2019	2023	Change (2019-2023)
Total Families	15,042	14,798	-1.6%
Average Family Size	2.83	2.93	3.5%
Households with own children of the householder under 18 years	6,139	5,953	-3.0%
Under 6 years only	1,553	1,339	-13.8%
Under 6 years and 6 to 17 years	1,234	941	-23.7%
6 to 17 years only	3,352	3,673	9.6%

Source: US Census Bureau, ACS 5-Year Estimates, 2019 and 2023

Childcare Demand Estimates by Age Cohort

	Low Case	High Case
Households with children under 6 years old	2,280	2,280
Percent of households that would enroll in a new center	39.1%	66.9%
Households that would enroll in new center	891	1,525
Percent of households not currently enrolled in a childcare facility in Great Falls	48.7%	48.7%
Number of households that would enroll and are not currently enrolled in a childcare facility in Great Falls	434	743
Demand by numbers of children and age range		
Newborns (up to 12 months)	120	205
Toddlers (13 to 23 months)	109	186
Young preschooler (24 to 35 months)	105	179
Preschool (3 to 5 years)	168	288
Total net demand for childcare facilities in Great Falls (Number of Children)	**502**	**858**

Note: Demand estimates reflect potential demand assuming adequate supply, pricing, and geographic accessibility. Estimates represent the number of children (headcount) rather than full-time equivalent (FTE) childcare slots and do not account for part-time enrollment or schedule variation.

Source: Camoin Associates, American Community Survey, Childcare Demand Survey

Demand Estimates Relative to Existing Capacity

While Great Falls reports 3,095 licensed childcare slots, licensed capacity does not reflect the number of slots that are actively operating, financially viable, or aligned with household needs. Provider interviews validated that licensed capacity overstates the effective supply in Great Falls. Through direct outreach, 97% of childcare facilities were validated as operating with approximately 3% no longer in business and no longer representing active capacity. Among operating providers, staff consistently reported functioning below licensed capacity due to enrollment levels, enrollment risk, and staffing decisions made to ensure financial and operational sustainability.

When estimated net new demand of 502 to 858 children is considered alongside this context, the findings indicate that childcare access challenges in Great Falls are not driven by a simple lack of licensed slots, nor do they suggest existing providers are operating under flawed or unviable models. Rather, the analysis points to a misalignment between household needs and preferences and how available capacity is currently accessed and deployed.

Survey results and provider interviews show that families are seeking childcare that is more affordable, flexible, and responsive to the needs of younger children and nontraditional schedules. At the same time, providers are operating responsibly within regulatory, staffing, and financial constraints; making enrollment, staffing, and expansion decisions based on sustainability rather than maximum licensed capacity**. As a result, unmet demand persists not because capacity is absent, but because available capacity is not usable, affordable, or aligned with how families need to access care.** This distinction is critical for interpreting market feasibility and identifying strategies that activate existing capacity rather than simply expanding licensing totals.

This comparison also masks important differences by age cohort and care type. Demand is concentrated among newborns (120–205) and preschool-aged children (168–288). For infant care, higher staffing intensity and operating costs constrain functional capacity, even where demand exists. In contrast, many providers reported open preschool slots, reflecting competition from public preschool, Head Start, and subsidized programs rather than a lack of underlying household need.

It is important to note that demand estimates represent headcount demand rather than full-time equivalent (FTE) slots and assume reasonable cost, availability, and geographic access. Survey responses indicate that affordability, flexibility, and operating hours are primary drivers of enrollment decisions, suggesting that some demand will remain unmet even where licensed capacity exists if care models do not align with household needs.

These findings indicate that childcare challenges in Great Falls reflect a market alignment issue rather than a pure supply shortage. While licensed capacity is sufficient in aggregate, gaps persist due to age-specific constraints, affordability pressures, staffing risk, and differences between standard childcare operating models and how families need to access care. Addressing these challenges will require strategies that activate and better align existing capacity, rather than focusing solely on expanding licensed totals.

Is Childcare in Great Falls a Supply Issue or an Alignment Issue?

Age Group	Demand Pressure	Capacity Reality	What This Means
Newborns (0–12 months)	High	Constrained	High staffing intensity and operating costs limit viable supply
Toddlers (13–23 months)	Moderate–High	Partially constrained	Staffing and cost pressures restrict expansion
Young Preschool (24–35 months)	Moderate	Capacity available	Enrollment risk limits utilization
Preschool (3–5 years)	Moderate	Open slots reported	Affordability and competition
Overall Market	**Moderate**	**Capacity exists**	**Mismatch between care offered and care needed**

Estimating Functional Care Capacity

Licensed childcare capacity reflects the maximum number of children providers are authorized to serve, but it does not capture how many slots are actively operating or available to families at a given time.

To better understand functional capacity, this analysis incorporates findings from direct outreach to childcare providers; input was received from approximately 30% of licensed providers citywide. Providers were asked about current enrollment, classroom operations, and whether licensed slots were being held offline or left unfilled due to staffing availability, enrollment risk, or economic considerations.

Estimating Non-Operating Capacity

Provider outreach confirmed that a small share of licensed capacity is not currently operating due to permanent closures, inactive classrooms, or economic risk considerations that are licensed but not offered. Based on this outreach, **approximately 5% of licensed slots** are estimated to be non-operational at any given time. This assumption reflects observed enrollment pressures and inactive capacity while avoiding overstatement of system disruption.

Estimated Licensed, Non-Operating, and Unfilled Childcare Capacity

Capacity Measure	Description	Share of Licensed Capacity	Estimated Slots
Total Licensed Capacity	Total licensed childcare slots in Great Falls	100%	3,095
Estimated Non-Operating Capacity	Licensed slots held offline due to staffing or operational decisions	5%	155
Estimated Operating but Unfilled Slots	Open slots available but not currently enrolled	15%	464
Estimated Functional Capacity	Slots realistically available for enrollment	Residual	2,476
Projected Net New Demand	Children needing care under low–high scenarios	502-858	-

Note: Estimates are derived from assumptions and reflect conditions observed through provider outreach. They are intended to illustrate order-of-magnitude alignment rather than exact vacancy counts.

Source: Camoin Associates

Estimating Operating but Unfilled Capacity

Many providers reported enrollment below licensed limits due to staffing availability, enrollment risk, or age-specific cost considerations. While open slots were observed among engaged providers, these facilities are more likely to report availability, meaning raw vacancy rates likely overstate systemwide conditions. To account for this, the analysis applies a conservative adjustment, estimating that **approximately 15% of licensed slots are operating but unfilled** across the broader market.

Observed ratios from this outreach were conservatively applied to the licensed capacity to estimate market-wide functional availability. This approach assumes that providers not directly engaged face similar structural conditions affecting staffing, enrollment decisions, and financial sustainability.

The resulting functional capacity estimate was then compared to projected net new childcare demand to distinguish between capacity that exists on paper and care that is realistically accessible to families.

This methodology is intended to illustrate order-of-magnitude market conditions derived from assumptions rather than exact capacity counts and should be interpreted as indicative of system-level dynamics.

Implications for Supply–Demand Alignment

These estimates suggest that roughly 620 licensed slots are either not operating or not filled, compared to estimated net new demand of 500 to 858 children. This comparison does not indicate surplus capacity. Instead, it highlights a misalignment between demand and usable supply, driven by staffing constraints, provider risk, age-specific cost structures (particularly for infant and toddler care), and affordability pressures.

Many unfilled or inactive slots are not readily interchangeable with unmet demand. Providers are not holding capacity open; instead, enrollment reflects the interaction of household preferences, affordability, and staffing feasibility. Providers often operate below licensed limits to balance staffing availability with financial viability. As a result, unmet demand persists not because capacity exists only "on paper," but because licensed capacity **cannot be fully or sustainably deployed** under current conditions.

Market Alignment and Opportunity

Survey findings highlight several structural conditions shaping the childcare landscape in Great Falls. Together, these insights point to the types of facilities, operating models, and system supports most likely to be viable in the local market.

- **Demand is shaped by age-specific misalignment rather than a uniform shortage.** Net new demand is concentrated among preschool-aged children (168–288) and newborns (120–205). While infant demand reflects true capacity constraints driven by staffing ratios and specialized care requirements, preschool demand is influenced by competition from public preschool and subsidized programs, resulting in open slots at some providers despite continued household need. Future facilities will therefore need to be intentionally designed for younger age groups and flexible enrollment patterns, rather than relying on school-age or afterschool programming to drive utilization.
- **Affordability is a threshold condition for market participation.** Nearly 79% of respondents reported that they are spending too much on childcare, and 70% identified more affordable options as the primary factor that would encourage use of a new facility. These findings indicate that demand is highly price-sensitive and that facilities relying solely on tuition revenue may struggle to achieve stable enrollment without layered funding sources, operating subsidies, or employer partnerships that reduce household cost burden.
- **Nontraditional schedules represent both unmet demand and operational complexity.** A substantial share of households reported the need for extended hours (40.9%), part-time or flexible schedules (43.6%), and summer or school-break care (41.8%), highlighting a persistent misalignment between standard childcare operating models and local work patterns. Facilities able to offer extended-day coverage, flexible enrollment options, or hybrid scheduling models may be better positioned to capture unmet demand, particularly among shift workers and military-affiliated households.
- **Households are assembling care across multiple sources, signaling system fragility.** While 51% of respondents currently use a childcare facility in Great Falls, many also rely on parental care (30.1%), unpaid caregivers (20.4%), or other paid caregivers (17.7%). This layering of arrangements suggests that families are compensating for gaps in availability, hours, or affordability, rather than choosing informal care as a preferred option. Facilities that reduce the need for patchwork care could improve stability for both households and employers.
- **Military- and base-affiliated households represent a distinct opportunity segment.** More than 21% of respondents identified as military- or base-affiliated, and 80% of those households reported that their childcare needs are not met through on-base facilities. Survey responses from this group consistently cited limited infant capacity, long waitlists, and schedules that do not align with military duties. This points to an opportunity for off-base facilities that can provide predictable availability, extended hours, and backup care options.
- **Interest in a new facility is strong but conditional.** While 66.9% of respondents expressed high interest in a new childcare facility (ratings of 7–10), this interest is contingent around reasonable cost, accessibility, and flexibility. This reinforces that market demand is real, but not unconditional, and successful facilities will need to align design and operations closely with household needs, staffing realities, and affordability constraints.

What This Means for Childcare in Great Falls

- **The core challenge is alignment, not demand.** Families need affordable, flexible, age-appropriate care, while much of the current system is structured around standard schedules and center-based models.
- **Affordability determines whether demand becomes enrollment.** High interest alone is insufficient without mechanisms that bridge the gap between tuition rates and what households can afford.

July 4th Parade in Great Falls, Montana. Photo courtesy of the Great Falls Talent Attraction and GFDA.

Childcare Center Development Challenges

Survey results and stakeholder engagement identify several interrelated challenges that shape the feasibility of new childcare development in Great Falls. These challenges highlight that barriers to expansion are not driven by a single factor, but by a combination of workforce constraints, affordability pressures, operating complexity, and misalignment between household needs and traditional childcare models.

- **Staffing constraints interact with enrollment risk to limit capacity.** Difficulty finding childcare was reported by 63% of respondents, a challenge that stakeholders frequently linked to workforce availability, particularly for infant and toddler care, which requires higher staffing intensity. However, providers indicate that staffing decisions are closely tied to enrollment levels, with many providers reluctant to hire ahead of demand. As a result, staffing constraints often reflect a broader risk environment rather than an absolute labor shortage, limiting the ability of new facilities to operate at planned capacity without mechanisms to stabilize enrollment and staffing simultaneously.
- **Households are assembling care across multiple arrangements, signaling system fragility.** While just over half of respondents currently use a childcare facility in Great Falls, many supplement formal care with parental care, unpaid caregivers, or other paid caregivers. This reliance on patchwork solutions suggests that existing childcare options do not fully meet household needs in terms of availability, hours, or affordability. New facilities may face pressure to provide more consistent and comprehensive coverage in order to reduce reliance on multiple care arrangements.
- **Rising expectations for specialized care and safety increase operational complexity.** Engagement findings and open-ended survey responses point to growing expectations around caregiver training, particularly for special needs care, as well as heightened standards for vetting, security, and staff-to-child ratios.[2] While these expectations support quality and trust, they also increase staffing requirements, training costs, and operational complexity for new facilities.

[2] Respondent views on staff-to-child ratios varied. Licensed childcare facilities in Montana operate within staffing ratios established by the Montana Department of Public Health and Human Services.

- **Military- and base-affiliated households face distinct access constraints.** Childcare constraints for this special population is driven by limited on-base capacity and misalignment with military schedules. Approximately 21.6% of survey respondents identified as military- and base-affiliated, and 80% of those households reported their childcare needs are not met through on-base facilities. Respondents cited long waitlists for specific age groups, limited infant capacity, and hours that do not align with military schedules. Stakeholders noted that the on-base Child Development Center (CDC) is constrained by staffing availability and is operating at or near capacity for its staffing levels.
    - Family Child Care (FCC) providers—a military-specific, home-based licensed model intended to supplement CDC capacity and support nontraditional or extended-hour care—were identified as a viable alternative to center-based care. However, FCC participation in Great Falls remains limited. Stakeholders indicated that constraints related to housing policies, provider support, and administrative requirements have limited uptake of FCC, despite its alignment with military family needs. These constraints suggest that while FCC represents a targeted opportunity to address childcare gaps for military families, expanding its role would require coordination with installation leadership, housing management, and supporting agencies.
- **Systemic workforce barriers constrain the childcare labor supply.**
    - **Childcare workers face an affordability gap that limits workforce participation.** Provider interviews indicated that many childcare workers earn too much to qualify for assistance programs such as Best Beginnings scholarships, yet still face childcare costs that consume a substantial share of their earnings. This eligibility gap reduces the ability of workers to enter or remain in the childcare workforce, particularly those with young children of their own.
    - **Providers absorb financial losses to retain staff, constraining sustainability.** To address workforce shortages, multiple providers reported offering employee childcare discounts for employees' children as a retention strategy. While effective in supporting staff, these discounts reduce tuition revenue and can displace full-paying enrollments, creating a direct financial burden for providers, particularly smaller facilities operating with thin margins.
    - This dynamic creates a **self-reinforcing constraint** on the childcare labor supply. Workers struggle to remain in the field without affordable care for their own children, while providers absorb financial losses to retain staff, limiting their ability to raise wages, expand capacity, or invest in program quality. Without mechanisms to bridge this eligibility and affordability gap, workforce constraints are likely to persist even where demand for childcare is strong.
- **Affordability pressures limit both household access and provider sustainability.** Nearly 79% of respondents indicated they are spending too much on childcare, while 70% cited more affordable options as the primary factor that would encourage use of a new facility. This creates a structural tension between families can afford and the cost structure required to deliver high-quality care, particularly for younger children. New facilities will need to balance tuition rates with operating costs, potentially requiring subsidies, partnerships, or mixed-revenue models to remain viable.
- **Operating hour expectations exceed traditional childcare models.** A substantial share of households expressed the need for extended hours (40.9%), part-time or flexible schedules (43.6%), and summer or school-break care (41.8%). These needs reflect work patterns that extend beyond standard weekday schedules, including shift work and variable hours. Meeting this demand increases staffing complexity and operating costs, posing challenges for facilities relying on conventional staffing models.

What This Means for Childcare in Great Falls

- **Development is constrained by compounding risks, not demand.** Staffing, affordability, operating hours, and administrative requirements limit feasibility even where interest is strong.
- **Workforce affordability directly affects provider viability.** Gaps between wages, childcare costs, and eligibility for supports increase financial strain on providers and limit expansion.

Employer-Supported Childcare

Survey and stakeholder engagement findings indicate that childcare is not solely a household challenge—it functions as a constraint on labor force stability and the ability of providers to expand capacity. While many households report strong interest in new childcare options, feasibility is shaped by staffing limitations and affordability pressures. Employer-supported childcare can help bridge this gap improving affordability for working families, stabilizing enrollment for providers, and strengthening recruitment and retention for employers.

Key themes from community employers:

- **Childcare affects families and workers, but employers are not always directly involved in access.** It was consistently identified as a workforce challenge, particularly for roles with nontraditional schedules or inflexible schedules.
- **Partnership-base models are preferred over employer-owned facilities.** Employers showed greater interest in shared approaches, such as reserved slots, subsidies, or coordinated partnerships with existing providers, rather than developing and operating standalone employer-owned childcare centers.
- **Workforce characteristics shape viable childcare solutions.** Employers with shift-based, early-start, or variable schedules emphasized the importance of extended hours, reliability, and coverage beyond standard daytime care.
- **Employer capacity varies, reinforcing the need for tiered entry points.** Differences in workforce size, budgets, and benefits infrastructure suggest that no single model will fit all employers, pointing to the value of offering multiple levels of participation from low-lift benefits to deeper partnerships.

Employer-Supported Childcare Case Studies

Model 1: i2M – Child Care Partnership to Support a 24/7 Manufacturing Workforce

- **Location:** Pennsylvania
- **Industry:** Advanced Manufacturing
- **Description:** i2M, manufacturing company operating 12-hour shifts, partnered with an existing childcare center to directly address employees' childcare challenges, particularly extended hour coverage, and provide a targeted, subsidized childcare solution aligned with workforce needs.
- **Key Features:**
    - Reserved childcare slots across five provider locations
    - Extended hours beginning before 6 am to align with 12-hr shifts; Drop-in care options.
    - Subsidized childcare cost of $100 per month, per child.
    - Transportation support program.

For More Information: i2M Case Study

Model 2: Michigan Tri-Share Program — Public-Private Cost-Sharing Childcare Model

- **Location:** Michigan (statewide)
- **Industry:** Multi-sector (290+ participating employers)
- **Description:** A nationally recognized public-private partnership in which childcare costs are split three ways: one-third by the employer, one-third by the employee, and one-third by the state. The program has rapidly expanded from three pilot hubs to 13 regional hubs covering most of the state.
- **Key Features:**
    - Shared financial responsibility, making childcare significantly more affordable.
    - Regional hub agencies manage administrative coordination.
    - Broad employer participation across diverse industries.

For More Information: MI Tri-Share Program

Childcare Case Studies

Family Care Hub Model: Adaptive Reuse, Shared Space

- **Location:** Multiple rural communities across the United States (examples in Kansas, Indiana, and beyond)
- **Description:** In response to acute childcare shortages and available commercial real estate, several rural communities have developed community childcare hubs by repurposing vacant retail or office space into multi-provider childcare facilities. Rather than each provider operating independently, these hubs create shared spaces where multiple childcare operators, after-school programs, or service partners co-locate. The hub approach leverages community assets, supports flexible scheduling, and reduces startup costs for providers while expanding flexible care options for families.
- **Key Features:**
    - Resilient hub of family childcare providers
    - Adaptive reuse of vacant buildings
    - Multi-provider co-location allows different providers to share staffing resources, extend hours, diversify programs, etc.

For More Information: Governing article — *From Empty Stores to Child Care Hubs: Rural America's Answer to the Care Crisis*

Apprenticeship Program Model: Neighborhood Villages Early Childhood Education Registered Apprenticeship Program

- **Location:** Massachusetts (statewide focus, anchored in Boston)
- **Description:** Apprenticeship program that creates paid, earn-and-learn career pathways for early childhood educators. The program combines on-the-job training with structured instruction to help childcare workers earn industry-recognized credentials while employed, reducing barriers to entry and improving retention across the sector.
- **Key Features:**
    - Paid, earn-as-you-learn apprenticeship model, educators gain credentials without leaving workforce.
    - Industry-recognized credentials, two tracks.
    - No-cost participation for apprentices.
    - Multi-language instruction
    - Employer participation includes sponsoring apprentices

For More Information: Neighborhood Villages Apprenticeship Program

Salary Supplement Model: Maine Early Childhood Workforce

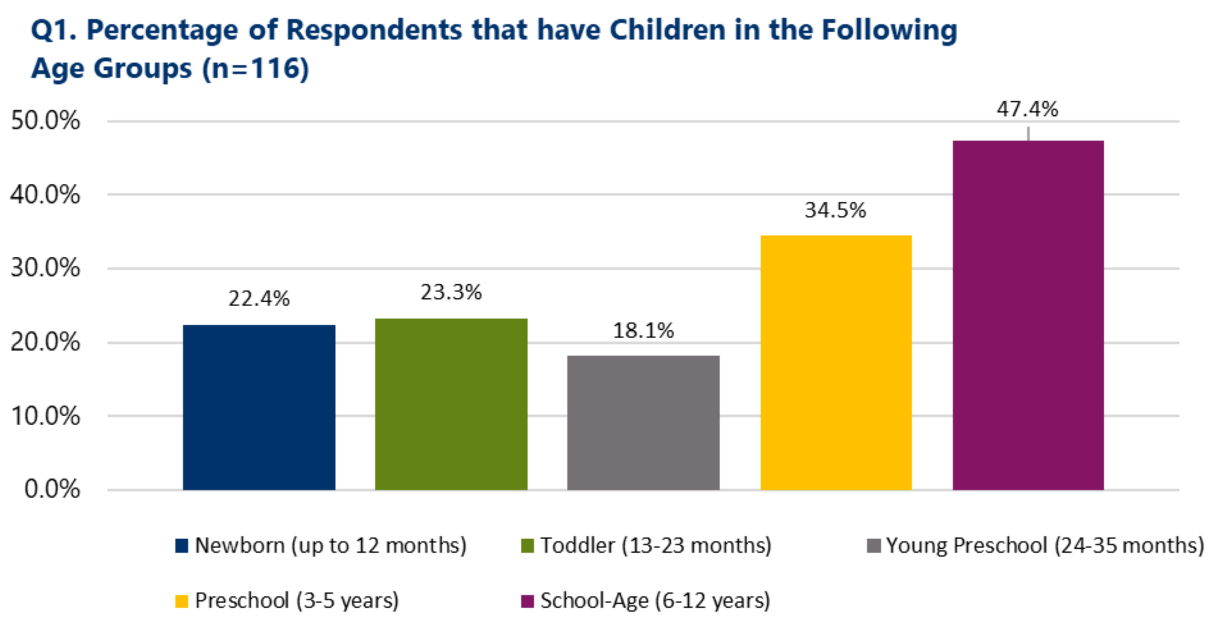
- **Location:** Maine
- **Description:** A salary supplement system that provides monthly wage supplements to early childhood educators and childcare providers. The program uses a tiered payment structure to boost compensation in a low-wage sector and help recruit and retain childcare workers in licensed family and center-based settings.
- **Key Features:**
    - Monthly stipend payments
    - Eligibility tied to professional registry
    - Available to staff in licensed care-based facilities and family childcare providers
    - Supplements paid in addition to regular wages

For More Information: ECE Workforce Salary System | Department of Health and Human Services

APPENDIX A: CHILDCARE DEMAND SURVEY RESULTS

Responses

- A total of 116 responses were collected and analyzed as part of the Great Falls Childcare Demand Survey from, November 18, 2025 to January 9, 2026. All respondents completed the survey in its entirety, though some respondents chose to skip select questions.
- Among the respondents, 22% (26) had one or more newborns (up to 12 months), 23% (27) had one or more toddlers (13-23 months), 18% (21) had young preschooler(s) (24-35 months), 35% (40) had preschool children (3-5 years old), and 47% (55) had school-aged children (6-12 years old).
- Approximately 51% of respondents have a child currently enrolled in a childcare facility in Great Falls, MT.
- The majority of respondents do not anticipate additional childcare needs in the next few months for a child who may join their household (55%, 64 respondents) while some stated they do have plans to expand their families.
- Approximately 78% (83 respondents) would prefer a new childcare facility to be located within the City of Great Falls (Area A).



Source: Great Falls Childcare Demand Survey, Camoin Asssociates

Question 1: Please indicate how many children you have in the following age groups.

- A total of 116 responses indicated their children by age category. Approximately 47% of respondents (55) indicated that they have at least one school-aged child (6–12 years) in their household. Preschool-aged children (3–5 years) were present in 34% of respondent households (39). Newborns (up to 12 months) and young preschoolers (24–35 months) were each reported by 21% (24) and 18% (21) of respondents, respectively, while 23% (27) reported having one or more toddlers (13–23 months). Few respondents reported having multiple children within the same age category, particularly among newborns, toddlers, and young preschool-aged children.

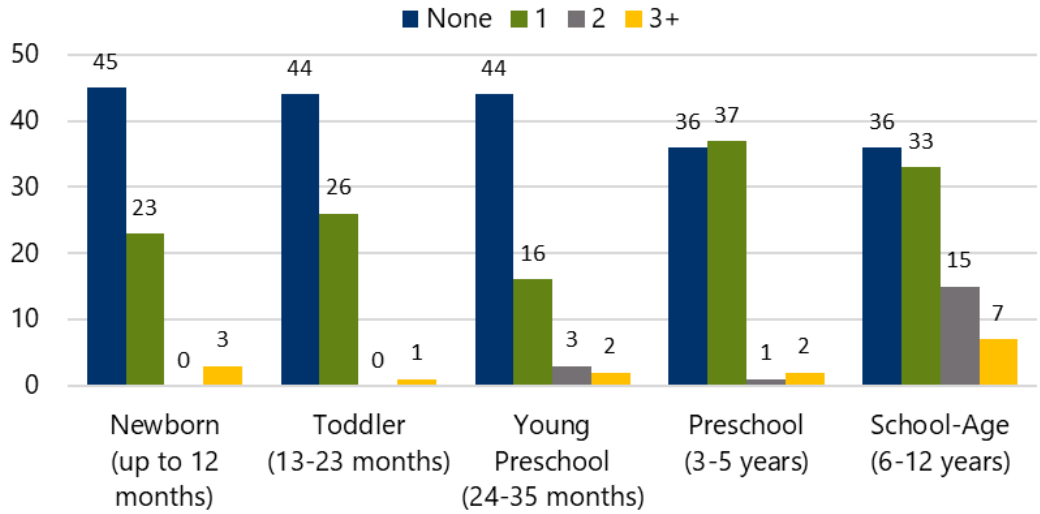
Question 2: Are you or someone in your household military- or base-affiliated?

- Among survey respondents, 21.6% (25) reported that they or someone in their household is military- or base-affiliated, while 78.4% (91) indicated no military or base affiliation. A very small share (0.9%, 1) selected "other."

Question 3: Are your childcare needs met at on-base facilities?

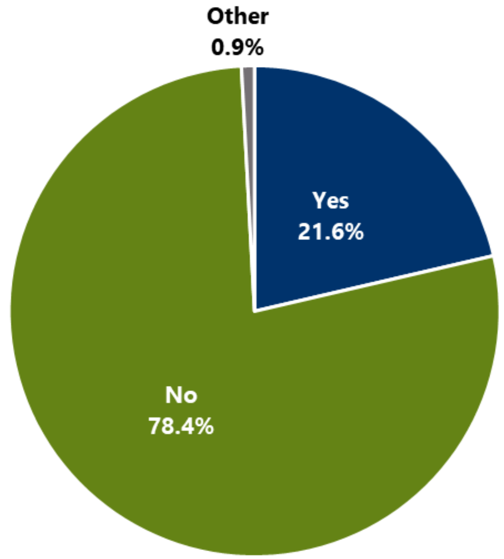
- Of the 25 respondents who reported military or base affiliation, 80.0% (20) indicated that their childcare needs are not met through on-base facilities. Only 12.0% (3) reported that their childcare needs are met on base, while 8.0% (2) selected "other."

Please indicate how many children you have in the following age groups. (n=116)



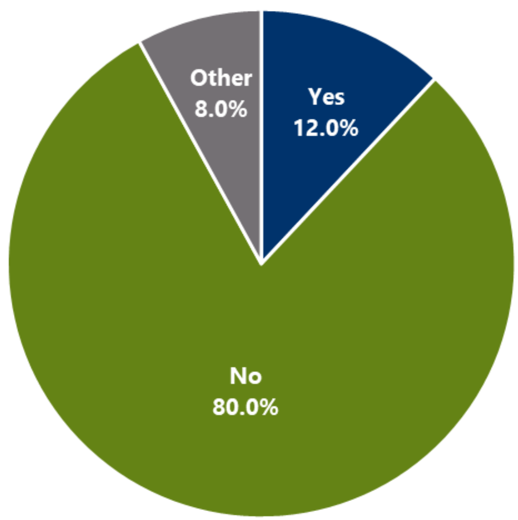
Source: Great Falls Childcare Demand Survey, Camoin Asssociates

Are you or someone in your household military- or base-affiliated? (n=116)



Source: Great Falls Childcare Demand Survey, Camoin Asssociates

Are your childcare needs met at on-base facilities? (n=25)



Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 4: Are there any specific needs or challenges related to your military affiliation that you think the community should consider?.

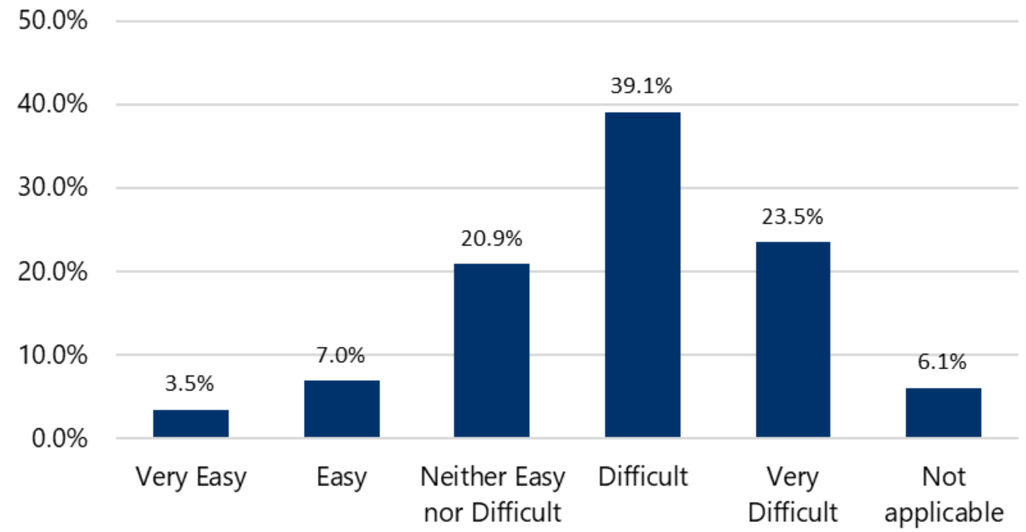
Common themes:

- Lack of affordable quality childcare
- Severe shortage of infant and newborn care
- Limited FCC providers; long waitlists for infant slots both on and off base
- Insufficient on-base childcare availability; lack of capacity, long waiting lists, and limited options for drop-in or part-time care.
- Childcare hours do not align with military work schedules; need for extended hours, early opening, late pickup, and overnight/night-shift options
- Gaps in care; no weekend care
- Challenges related to military specific events and duties; daycare closes on family days even when some personnel still must work; unpredictability of coverage
- Lack of backup care due to families living far from support networks
- Need for part-time, drop-in, or flexible childcare to accommodate last-minute obligations, irregular shifts, or spouses changing work schedules

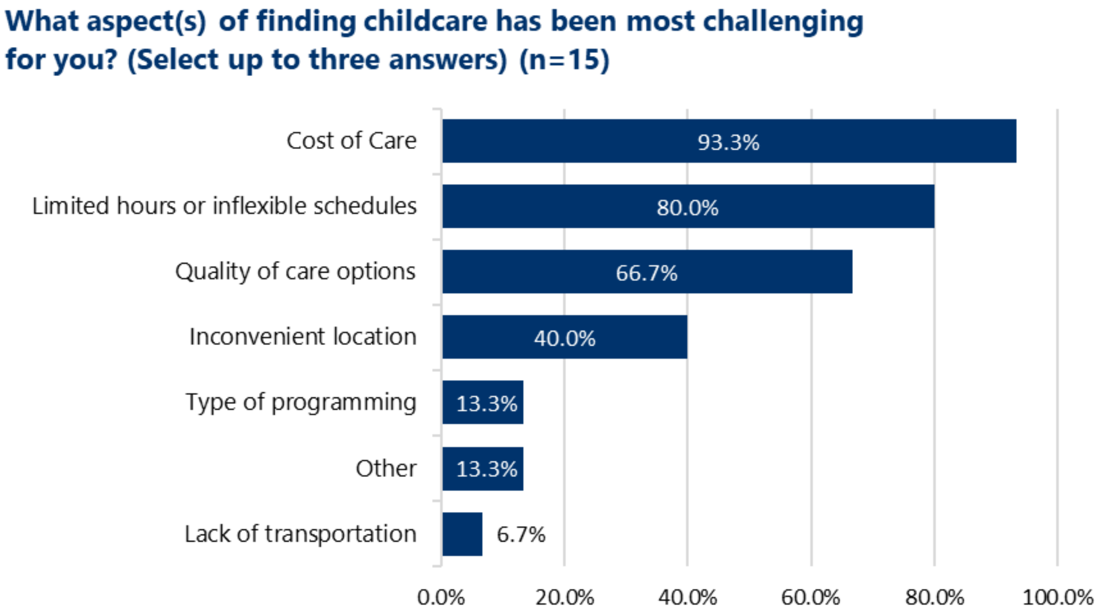
Question 5: How easy or difficult has it been to find childcare arrangements?

- Among the 115 respondents who answered this question, the majority reported difficulty securing childcare. Approximately 63% of respondents (72) indicated that finding childcare has been difficult (39.1%, 45) or very difficult (23.5%, 27). An additional 20.9% (24) reported that the process was neither easy nor difficult. By comparison, only 10.5% of respondents (12) reported that finding childcare was easy (7.0%, 8) or very easy (3.5%, 4). 6.1% (7) selected "not applicable."

How easy or difficult has it been to find childcare arrangements? (n=115)



Source: Great Falls Childcare Demand Survey, Camoin Associates



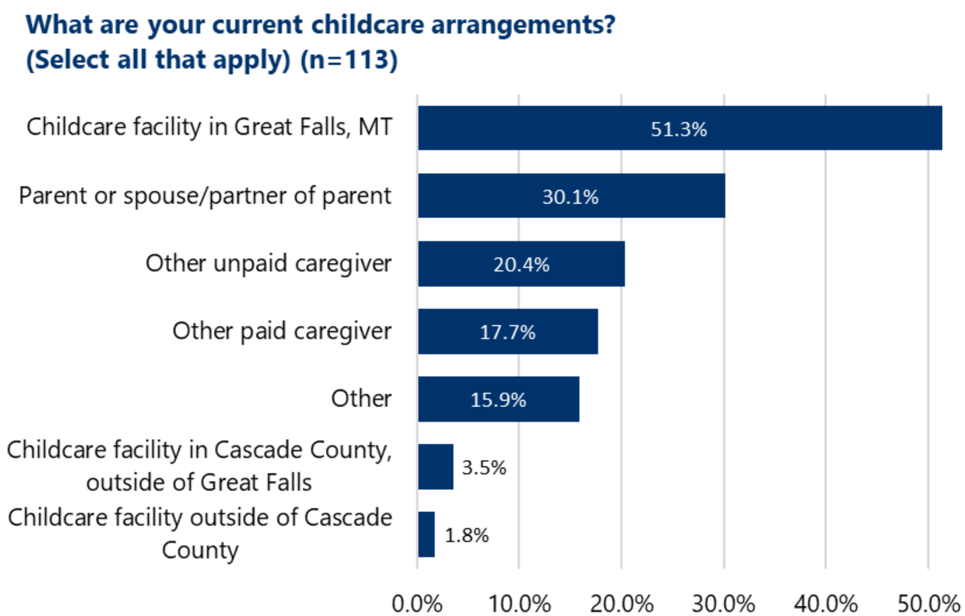
Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 6: What aspect(s) of finding childcare has been most challenging for you? (Select up to three answers)

- For the 15 respondents who answered, cost of care was the most frequently noted challenge, identified by 93% as a barrier to finding childcare in Great Falls. Limited hours or inflexible schedules were cited by 80% (12), followed by quality of care options (67%, 10). Fewer respondents identified inconvenient location (40%, 6), while type of programming and other factors were each cited by 13% (2). Lack of transportation was cited by 7% (1). Respondents were able to select up to three responses.
- *This question received a limited number of responses (n=15). Findings should be interpreted with caution and viewed as indicative rather than representative.*

Question 7: What are your current childcare arrangements? (Select all that apply)

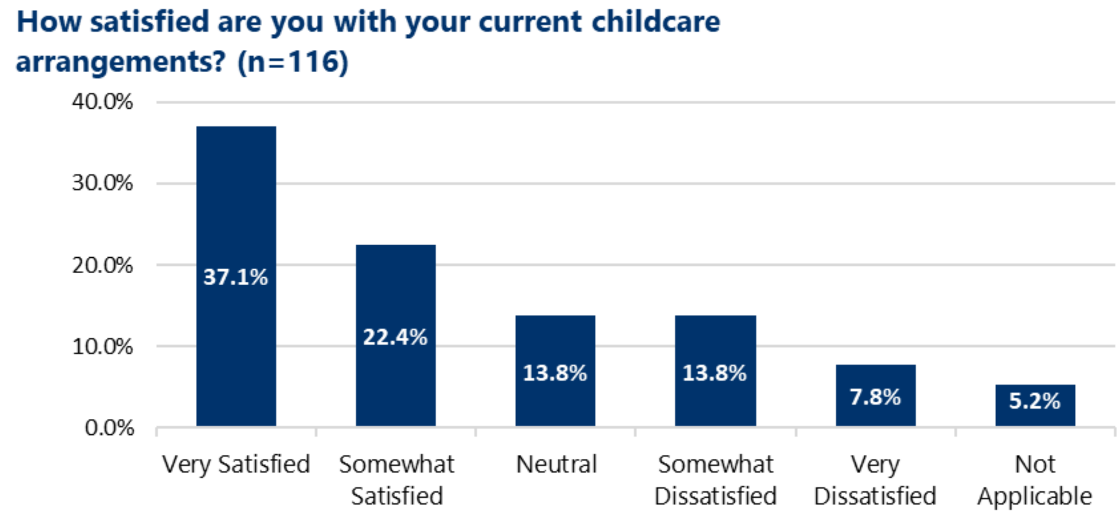
- Survey responses indicate that childcare arrangements in Great Falls are often layered across multiple care types. While a majority of respondents (51.3%) reported using a childcare facility within Great Falls, many households rely on additional or alternative arrangements. 30.1% indicated that care is provided by a parent, spouse, or partner, and 20.4% reported relying on an unpaid caregiver. Use of paid caregivers outside of formal childcare facilities was also common (17.7%). Relatively few respondents reported using childcare facilities outside the city, including 3.5% elsewhere in Cascade County and 1.8% outside the county altogether.



Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 8: How satisfied are you with your current childcare arrangements?

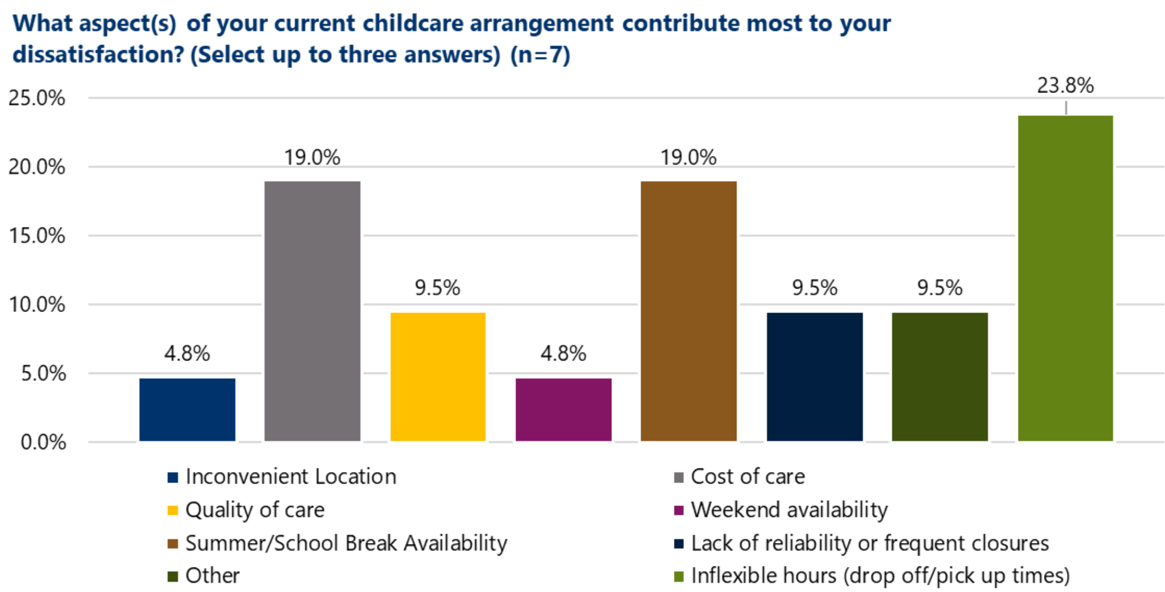
- The largest share of respondents reported being very satisfied (37.1%), followed by somewhat satisfied (22.4%). Smaller but comparable shares indicated feeling neutral (13.8%) or somewhat dissatisfied (13.8%), while 7.8% reported being very dissatisfied. An additional 5.2% selected "not applicable." Overall, responses reflect a mix of positive experiences alongside a meaningful share of households expressing dissatisfaction with their current childcare arrangements.



Source: Great Falls Childcare Demand Survey, Camoin Associates

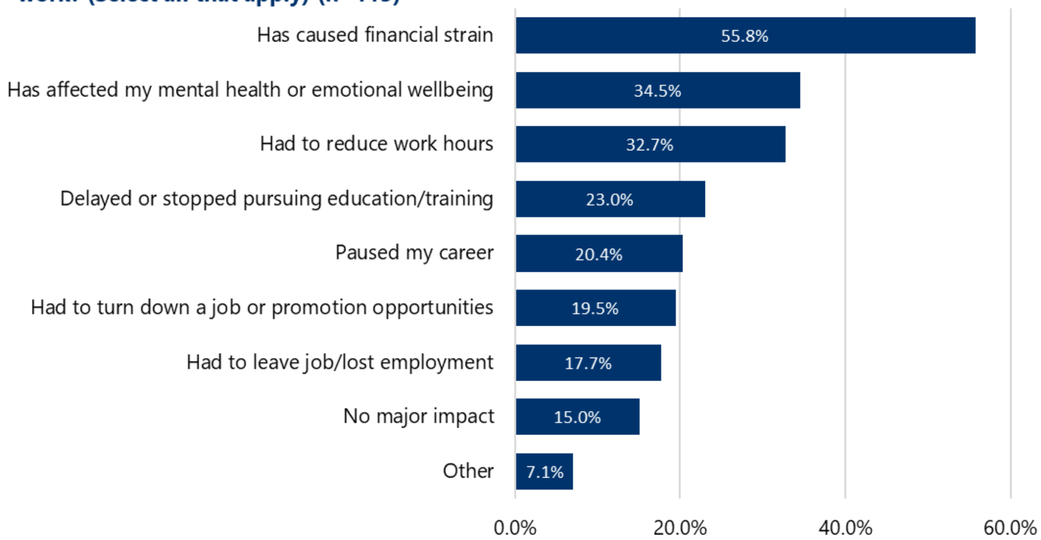
Question 9: What aspect(s) of your current childcare arrangement contribute most to your dissatisfaction? (Select up to three answers)

- Among the 7 respondents who reported dissatisfaction with their current childcare arrangements and answered the follow-up question, inflexible hours (drop-off and pick-up times) were the most frequently cited issue (23.8% of responses). Cost of care and summer or school break availability were each cited by 19.0% of responses. Additional factors included quality of care (9.5%), lack of reliability or frequent closures (9.5%), and other reasons (9.5%). Inconvenient location and weekend availability were least frequently cited, each accounting for 4.8% of responses. Respondents were able to select up to three options.
- *This question received a limited number of responses (n=7). Findings should be interpreted with caution and viewed as directional rather than representative.*



Source: Great Falls Childcare Demand Survey, Camoin Associates

How has access to childcare (or lack of it) impacted you, your family, or your work? (Select all that apply) (n=113)



Source: Great Falls Childcare Demand Survey, Camoin Associates

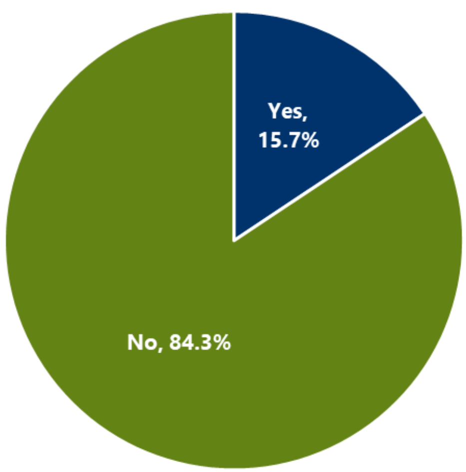
Question 10: How has access to childcare (or lack of it) impacted you, your family, or your work? (Select all that apply)

- Responses indicate that limited access to childcare has had broad financial, workforce, and personal impacts for many households. More than half of respondents (55.8%) reported experiencing financial strain, making it the most commonly cited impact. Workforce-related effects were also prevalent, with 32.7% reporting reduced work hours, 20.4% pausing their career, 19.5% turning down a job or promotion, and 17.7% leaving a job or losing employment altogether. In addition, 34.5% indicated that childcare challenges have affected their mental health or emotional wellbeing, while 23.0% reported delaying or stopping education or training. Only 15.0% indicated that childcare access had no major impact. Respondents were able to select all impacts that apply.

Question 11: Do you think your childcare arrangements will change in the next few months?

- Only 15.7% of respondents anticipate changes to their childcare arrangements in the next few months, while 84.3% of respondents anticipate no changes.

Do you think your childcare arrangements will change in the next few months? (n=115)



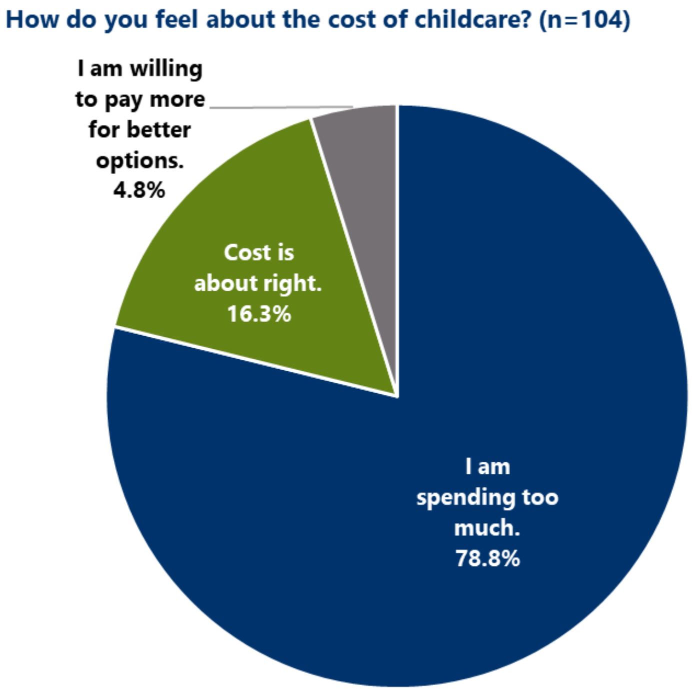
Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 12: Please explain how you anticipate your childcare arrangements will change in the next few months?

- Childcare instability remains a pervasive challenge—families often rely on fragile arrangements that can change with little warning.
- Work schedule mismatch, especially for shift workers and single parents, continues to drive the need for extended, flexible, or 24-hour childcare.
- Family support plays a significant role, and changes in that support create ripple effects.
- Quality concerns and the need for more reliable providers motivate some families to change care settings.
- Financial strain is an underlying factor for many, especially with added children or reduced family support.
- Considerations of moving outside of the county or area.
- Child will age out of childcare or specific care age groups with more difficulty finding care.

Question 13: How do you feel about the cost of childcare?

- Among respondents, 78.8% reported that they are spending too much on childcare, compared with 16.3% who felt costs are about right, and 4.8% who indicated they would be willing to pay more for better options. Perceptions of childcare affordability skew heavily negative.

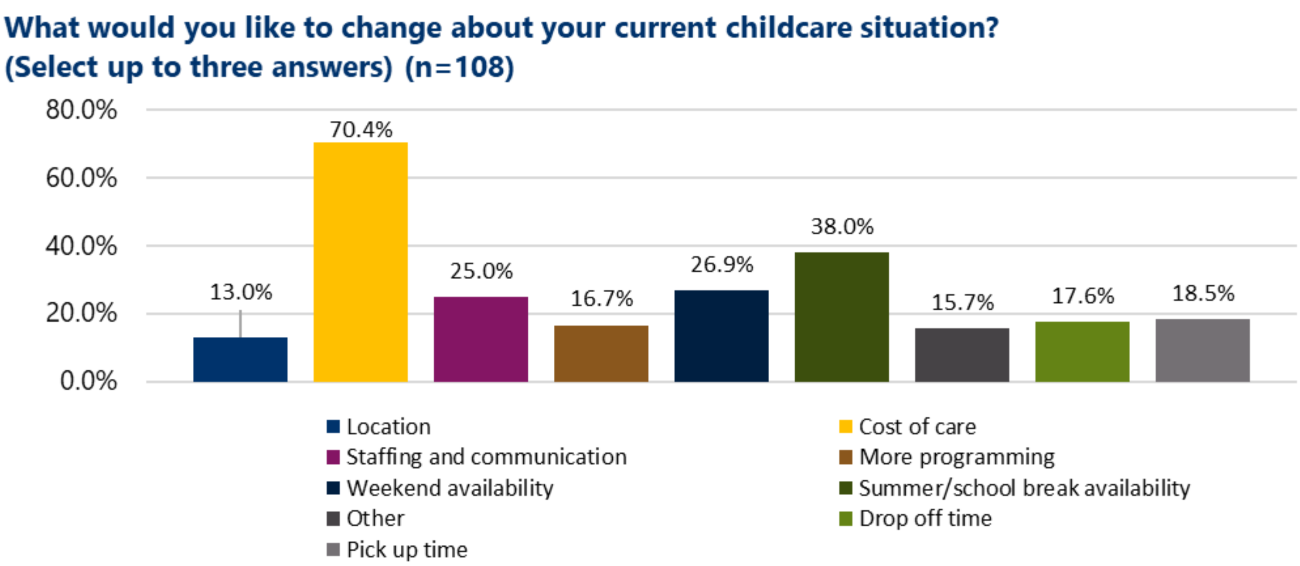


Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 14: What would you like to change about your current childcare situation? (Select up to three answers)

- Responses indicate that desired changes to childcare arrangements are primarily focused on affordability and scheduling flexibility. Cost of care was the most commonly cited area for improvement, selected by 70.4% of respondents. Beyond cost, respondents frequently identified challenges related to summer or school-break availability (38.0%), weekend availability (26.9%), and staffing and communication (25.0%). Additional areas of interest included drop-off and pick-up times (17.6% and 18.5%, respectively), additional programming (16.7%), and location (13.0%). Respondents were able to select up to three options.

- "Other" (write-ins) was selected by 15.7% of respondents who cited a range of additional concerns, including the need for later operating hours, more highly trained and experienced caregivers, and staff with expertise in supporting children with autism, anxiety, and other special needs. Additional themes included higher staff quality, safety and security concerns, stronger vetting and background checks for staff and individuals entering facilities, improved pricing, lower child-to-teacher ratios, and more part-time or flexible care options.



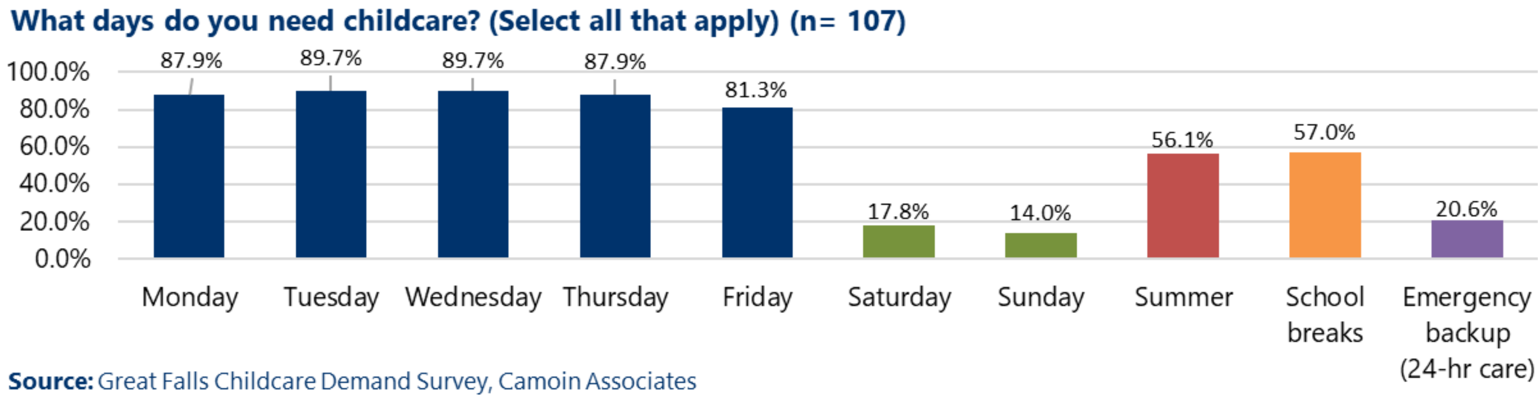
Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 15: Please describe the type of programming you would like to see. (n=11)
(Question was available for those who selected "more programming" for Question 14)

- Responses emphasized demand for intentional, developmentally focused programming, particularly for preschool and after-school care. Common themes included hands-on and outdoor activities, screen-free environments, and programming that supports socialization, early learning, physical activity, fine motor skills, and social-emotional development. Respondents also expressed interest in more educational enrichment, field trips, flexible part-time or drop-in options, and affordable daycare for younger children, particularly to support families new to the community.

Question 16: What days do you need childcare? (Select all that apply)

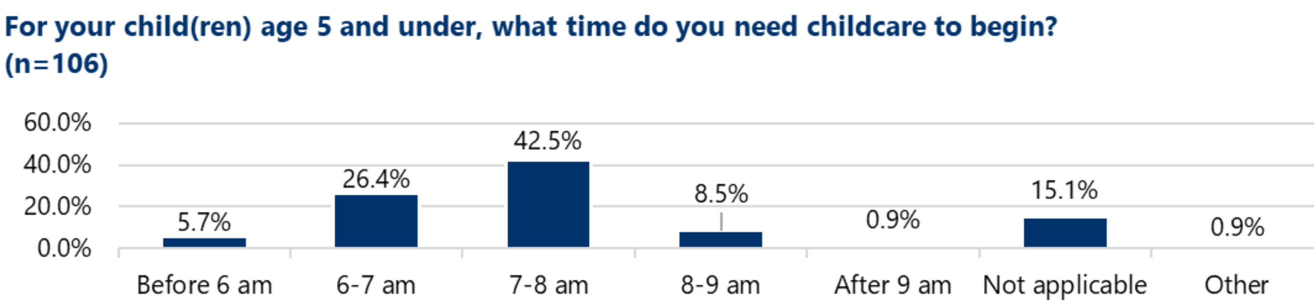
- Survey responses show that demand for childcare is concentrated on weekdays, with Monday through Thursday each cited by approximately 88%–90% of respondents and Friday cited by 81.3%. Weekend care needs were far less common, with 17.8% indicating a need for Saturday care and 14.0% for Sunday care. In addition to weekly schedules, more than half of respondents reported a need for childcare during school breaks (57.0%) and the summer (56.1%), while 20.6% indicated a need for emergency backup care. Respondents were able to select all days that apply.



Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 17: For your child(ren) age 5 and under, what time do you need childcare to begin?

- Responses show that early-morning start times are most common. The largest share of respondents indicated a need for childcare to begin between 7 and 8 am (42.5%), followed by 6 to 7 am (26.4%). Smaller shares reported a need for care beginning before 6 am (5.7%) or between 8 and 9 am (8.5%), while very few indicated start times after 9 am (0.9%). 15.1% selected "not applicable" and 0.9% selected "other."

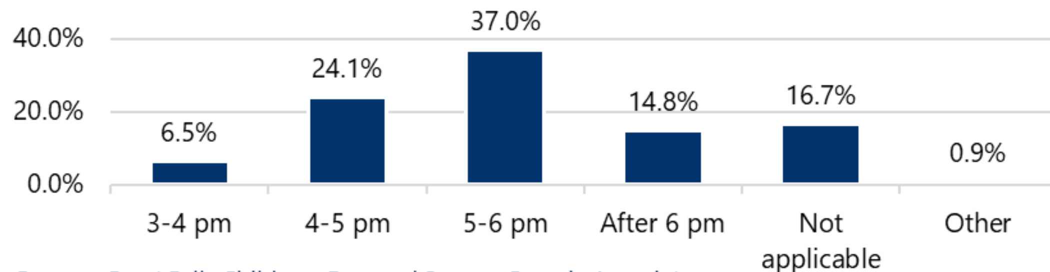


Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 18: For your child(ren) age 5 and under, what time do you need to pick up them up from childcare?

- Pickup times are most commonly clustered in the late afternoon and early evening. The largest share of respondents reported needing pickup between 5 and 6 pm (37.0%), followed by 4 to 5 pm (24.1%). A notable portion of respondents indicated a need for later pickup, with 14.8% reporting pickup after 6 pm. Smaller shares reported earlier pickup needs between 3 and 4 pm (6.5%), while 16.7% selected "not applicable" and 0.9% selected "other."

For your child(ren) age 5 and under, what time do you need to pick up them up from childcare? (n=108)

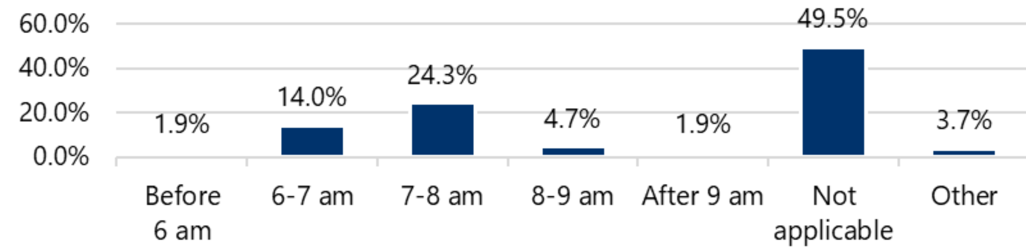


Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 19: For your child(ren) age 6-12, what time do you need childcare to begin?

- Responses show a more mixed pattern for school-aged children, with a substantial share indicating that early-morning childcare is not applicable. Nearly half of respondents (49.5%) selected "not applicable," reflecting limited need for early care for this age group. Among those who do require morning childcare, the most common start time was 7 to 8 am (24.3%), followed by 6 to 7 am (14.0%). Very small shares reported start times before 6 am (1.9%), 8 am to 9 am (4.7%), or after 9 am (1.9%), while 3.7% selected "other."

For your child(ren) age 6-12, what time do you need childcare to begin? (n=107)

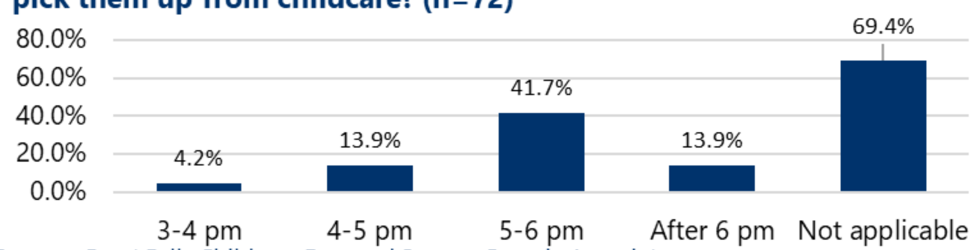


Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 20: For your child(ren) age 6-12, what time do you need to pick them up from childcare?

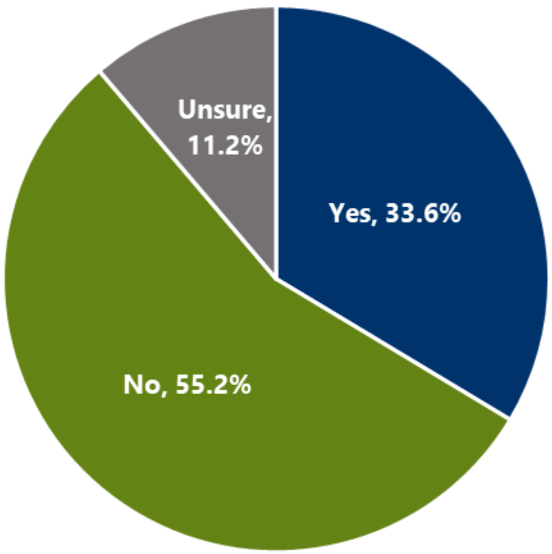
- Most respondents indicated that childcare pickup for school-aged children is not applicable (69.4%), reflecting limited need for after-care pickup among many households. Among those who do require pickup, the most common time was 5 to 6 pm (41.7%), followed by 4 to 5 pm (13.9%) and after 6 pm (13.9%). Early afternoon pickup between 3 and 4 pm was least common (4.2%).

For your child(ren) age 6-12, what time do you need to pick them up from childcare? (n=72)



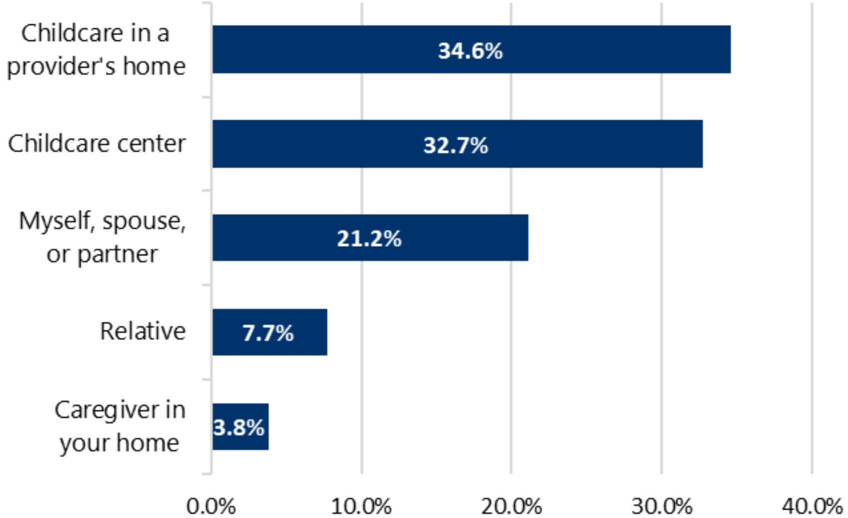
Source: Great Falls Childcare Demand Survey, Camoin Associates

Do you anticipate additional childcare needs in the next few years for a child who may join your household? (n=116)



Source: Great Falls Childcare Demand Survey, Camoin Associates

What is your preferred type of childcare for the anticipated child? (n=52)



Source: Great Falls Childcare Demand Survey, Camoin Associates

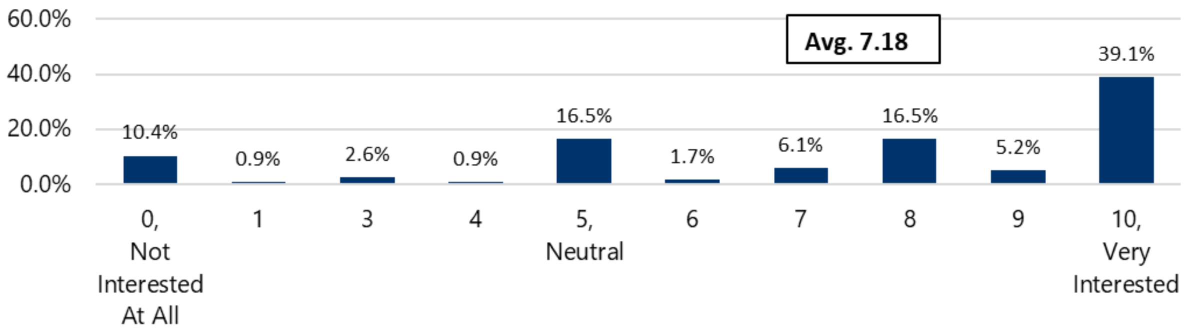
Question 21: Do you anticipate additional childcare needs in the next few years for a child who may join your household?

- More than half of respondents (55.2%) do not anticipate additional childcare needs in the next few years, while 33.6% expect additional needs and 11.2% remain unsure.

Question 22: What is the preferred type of childcare for the anticipated child?
(Question was available for those who selected "Yes" or "Unsure" for Question 21)

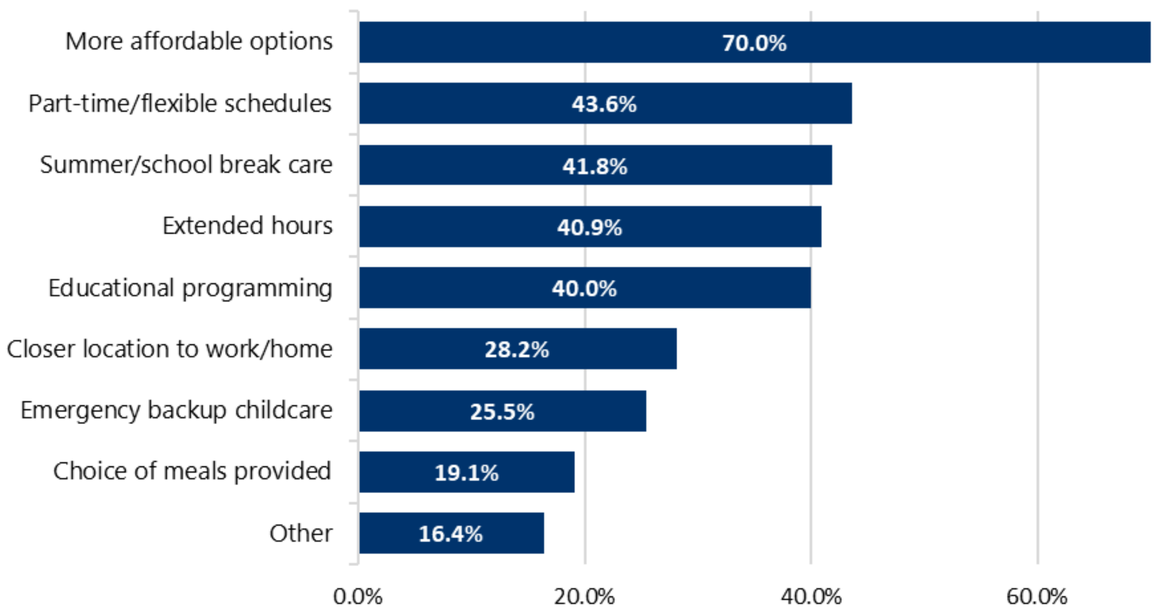
- Among the 52 respondents who anticipate additional childcare needs or responded 'unsure', preferences were distributed across several care types. The most frequently preferred option was childcare in a provider's home (34.6%), followed closely by a childcare center (32.7%). A notable share of respondents (21.2%) indicated a preference for care provided by themselves, a spouse, or a partner. Smaller shares preferred care provided by a relative (7.7%) or a caregiver in their own home (3.8%).

Rate your interest in a new childcare facility in Great Falls, assuming a reasonable cost and location. (n=115)



Source: Great Falls Childcare Demand Survey, Camoin Associates

Which of the following would encourage you to use a new childcare facility in Great Falls? (Select all that apply) (n=110)



Source: Great Falls Childcare Demand Survey, Camoin Associates

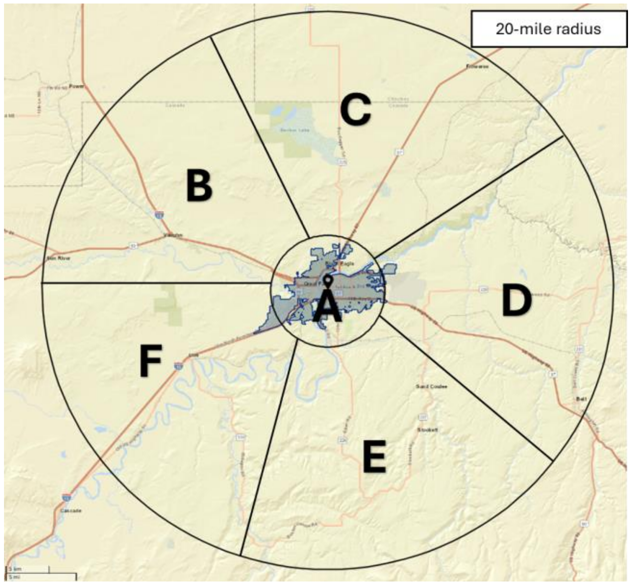
Question 23: Rate your interest in a new childcare facility in Great Falls, assuming a reasonable cost and location.

- Interest in a new childcare facility in Great Falls was generally strong. The average interest rating was 7.18 out of 10, with 39.1% of respondents selecting 10 (very interested) and an additional 27.8% rating their interest 8 or 9. A smaller share of respondents expressed neutral interest (16.5% selected 5), while relatively few respondents reported low interest, with 10.4% selecting 0 (not interested at all) and fewer than 5% selecting ratings between 1 and 4.

Question 24: Which of the following would encourage you to use a new childcare facility in Great Falls? (Select all that apply)

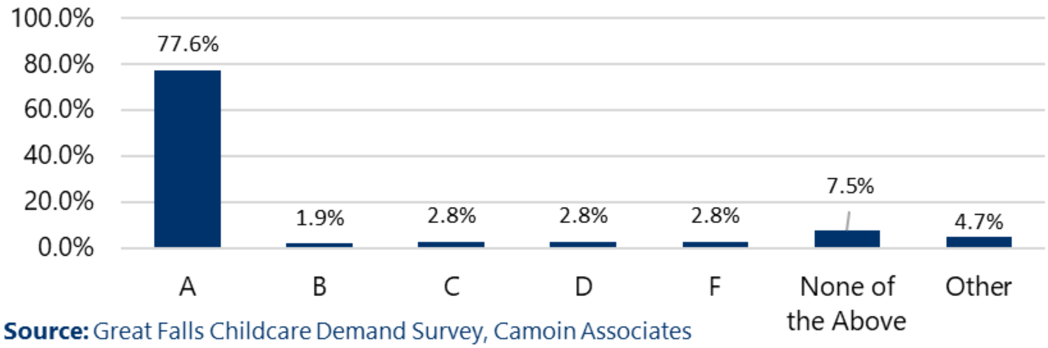
- Responses indicate that **affordability and flexibility** are the strongest drivers of interest in a new childcare facility. More affordable options were cited by a clear majority of respondents (70.0%), far exceeding any other factor. Operational features were also important, including part-time or flexible schedules (43.6%), summer or school-break care (41.8%), extended hours (40.9%), and educational programming (40.0%). Location-based considerations were somewhat less prominent, with 28.2% indicating that a closer location to work or home would encourage use. Additional features such as emergency backup childcare (25.5%) and meals provided (19.1%) were cited by smaller shares of respondents. Respondents were able to select all options that apply.

Question 25: Please select where you would prefer a new childcare facility to be located. *(Map was included with the question for respondents to review)*



- Responses indicate a strong geographic preference for locating a new childcare facility within Area A, which encompasses the City of Great Falls. More than three-quarters of respondents (77.6%) selected Area A as their preferred location. All other areas received minimal support, with Areas B, C, and D each selected by fewer than 3% of respondents. A small share of respondents indicated no preference among the listed areas (7.5%) or selected "other" (4.7%). Overall, results suggest that proximity to the city core is a primary consideration in preferred facility location.
- "Other" respondents were able to write-in responses which included F (3 respondents), east section of A, Ulm, and closer to those who live near the airport.

Please select where you would prefer a new childcare facility to be located. (n= 107)



Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 26: Tell us more about why you chose that area of Great Falls for a new Childcare facility. (n= 77)

Common themes included:

- Convenience and Proximity: most respondents selected their area because it is close to home, close to work, on their daily commute, and/or centrally located in Great Falls.
- Reduced Travel Time: respondents emphasized wanting to avoid driving across town, childcare that minimizes daily travel time, and preferring locations in the city limits to avoid long or inconvenient commutes.
- Alignment with Work Patterns: many families work in Great Falls, near the base, in areas requiring frequent relocation within town, and in jobs that demand quick access to childcare during emergencies.
- Community Connectivity: a smaller but notable set of responses highlighted access to public transportation, opportunities for field trips and neighborhood exploration, locations near downtown schools for ease of coordination, and central areas that serve multiple neighborhoods fairly.
- Rural Commuter Considerations: some families traveling from rural areas (e.g., Ulm, south of Great Falls, etc.) choose areas that align with their inbound commute.
- Overall, parents want childcare where their daily lives already take them. Convenience, centrality, and reduced drive time.

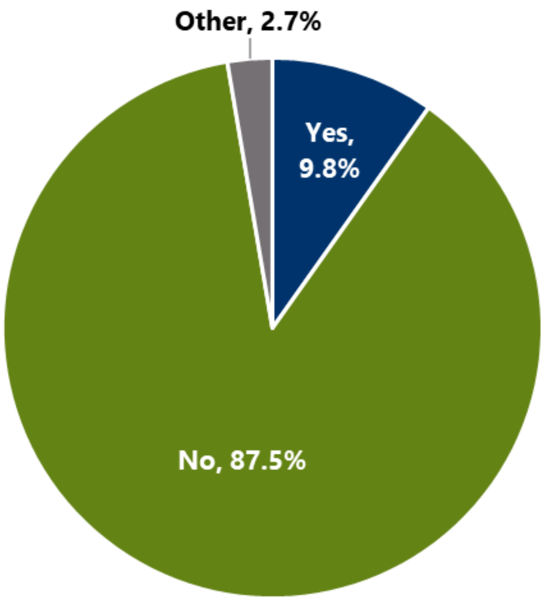
Question 27: Do you currently receive any financial assistance or additional help to cover childcare costs?

- Most respondents reported that they do not receive financial assistance to help cover childcare costs. Among the 112 respondents who answered this question, 87.5% indicated that they receive no assistance, while 9.8% reported receiving some form of financial help. A small share (2.7%) selected "Other."

Question 28: What type of assistance or help do you receive? *(Question was available for those who selected "Yes" or "Other" for Question 27)*

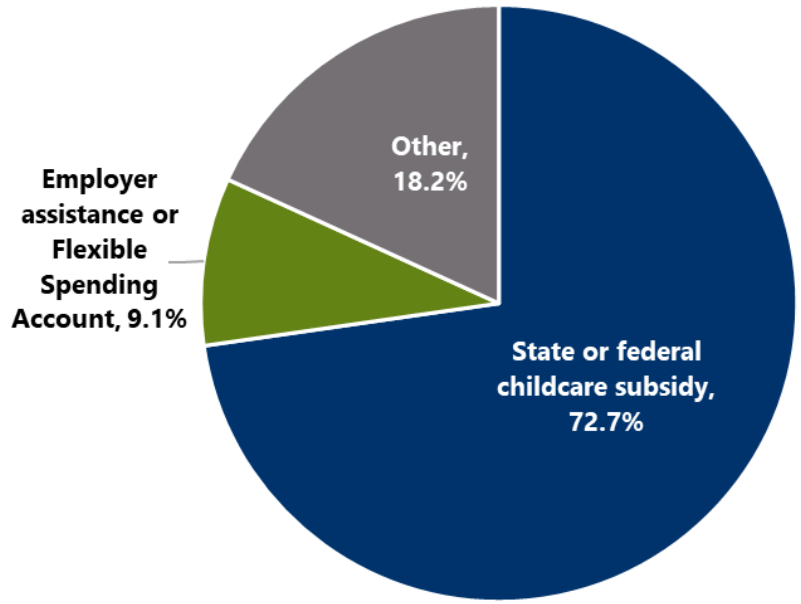
- Among the 11 respondents who reported receiving childcare assistance, the majority indicated reliance on state or federal childcare subsidies (72.7%). A smaller share reported receiving employer assistance or support through a flexible spending account (9.1%), while 18.2% selected other forms of assistance.
- "Other" respondents were able to write in a response, which included Child Care Aware Military Support Program.

Do you currently receive any financial assistance or additional help to cover childcare costs? (n=112)



Source: Great Falls Childcare Demand Survey, Camoin Associates

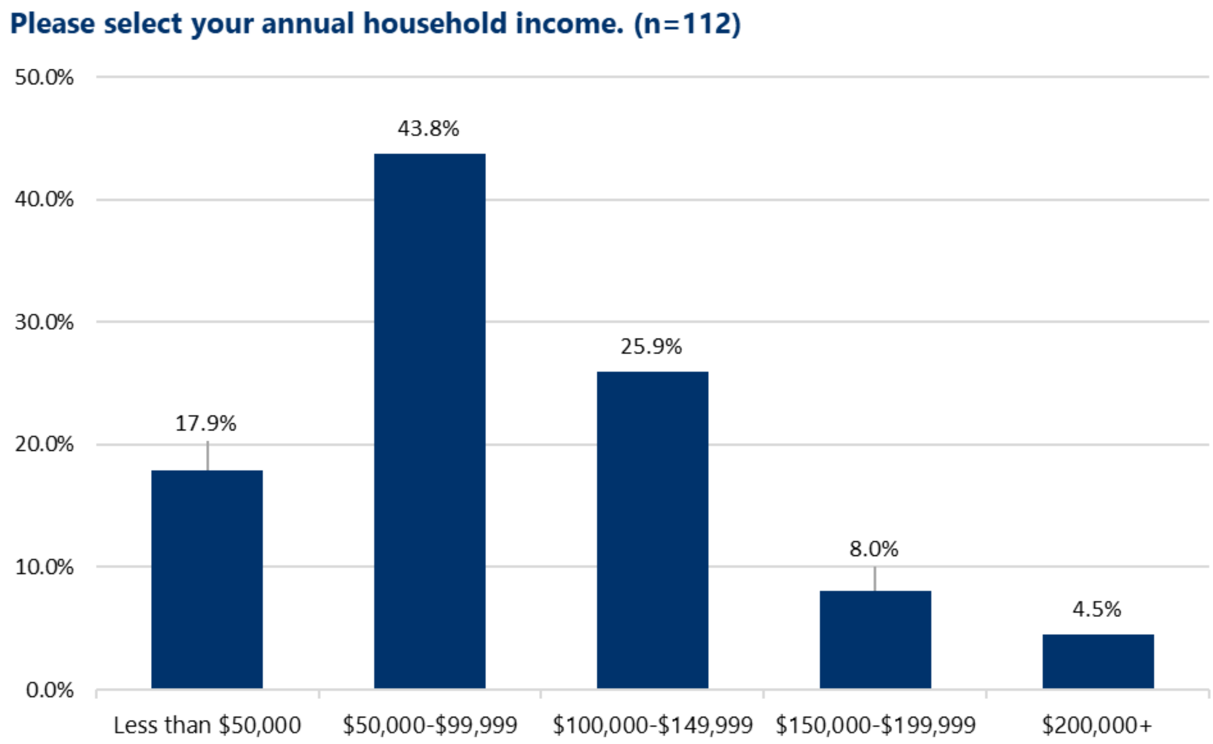
What type of assistance or help do you receive? (n=11)



Source: Great Falls Childcare Demand Survey, Camoin Associates

Question 30: Please select your annual household income.

- Survey respondents represented a range of household income levels. The largest share of respondents reported annual household incomes between $50,000 and $99,999 (43.8%), followed by $100,000 to $149,999 (25.9%). 17.9% of respondents reported household incomes below $50,000, while smaller shares reported incomes between $150,000 and $199,999 (8.0%) and $200,000 or more (4.5%).



Source: Great Falls Childcare Demand Survey, Camoin Associates

APPENDIX B: STAKEHOLDER ENGAGEMENT SUMMARY

Engagement Overview

Camoin Associates staff conducted interviews with a broad cross-section of the childcare ecosystem, including statewide system builders; local childcare providers (center-based and home-based); crisis and respite care operators; military family support representatives; school-based early learning programs; employers across healthcare, manufacturing, and energy sectors; and workforce and policy intermediaries. Engagement focused on childcare access, affordability, workforce constraints, non-traditional care needs, employer involvement, and system-level opportunities for Great Falls and the surrounding region.

Key Themes and Findings

Access Is Constrained by Workforce, Not Physical Capacity

Across interviews, staffing shortages consistently emerged as the primary driver of waitlists and under-enrollment. Many licensed programs reported having physical capacity to serve more children but lacking sufficient staff to meet required ratios, particularly for infant and toddler care. This dynamic has resulted in the appearance of availability alongside persistent access challenges for families. Infant care was repeatedly cited as the most constrained segment of the system due to lower staff-to-child ratios, higher operating costs, and greater qualification requirements. As a result, mixed-age programs often rely on preschool and school-age slots to cross-subsidize infant care.

Childcare Is a High-Cost, Low-Margin Business

Providers emphasized that childcare operates as a structurally fragile market. Staffing costs typically account for a majority of operating expenses, leaving little room for wage growth or benefit provision. Providers described being forced to choose between raising tuition for families or maintaining sub-livable wages for staff, neither of which is sustainable long-term.

Licensing and compliance requirements were described as necessary but burdensome, particularly for new or small providers. The complexity of the licensing process, facility requirements, and insurance costs can deter entry and slow system growth.

Workforce Recruitment and Retention Are System-Wide Challenges

Low wages, limited benefits, high stress, and limited career advancement were consistently identified as barriers to recruiting and retaining childcare workers. Many workers rely on public assistance despite full-time employment, and turnover remains high statewide. Stakeholders emphasized that childcare workforce challenges mirror broader workforce issues in the region, including competition from higher-paying sectors and limited awareness of childcare as a viable long-term career. Several noted the importance of high school pathways, apprenticeships, and credentialing programs to build a more stable workforce pipeline.

Non-Traditional Schedules Are Persistent and Under-Served

Families working non-traditional schedules—including healthcare workers, emergency responders, manufacturing shift workers, and military personnel—face the greatest access challenges. Evening, overnight, weekend, and holiday care options are extremely limited and, where available, often cost-prohibitive.

Crisis and respite care providers play a critical stabilizing role for families experiencing housing instability, domestic violence, health crises, or sudden work disruptions. These services were widely viewed as essential community assets but operate with limited and often unstable funding.

System Navigation Is Complex for Families and Employers

Families frequently struggle to understand eligibility, availability, and quality differences across childcare options. Stakeholders noted that families often accept interim placements while waiting for preferred programs, particularly smaller or higher-quality providers.

Employers expressed interest in supporting childcare access but reported limited understanding of the system and uncertainty about effective models. Discount-based partnerships and referral platforms were viewed as more feasible than direct provision or subsidized care models, which were often described as financially unsustainable for employers.

Policy and Funding Changes Are Improving Stability but Remain Incomplete

Recent state-level policy changes including expanded eligibility thresholds, market rate adjustments, and shifts toward prospective payment models were viewed as positive steps toward stabilizing provider revenue. However, stakeholders emphasized that incremental improvements have not resolved core structural issues related to workforce compensation and affordability.

There was broad support for sustained, dedicated funding mechanisms and wage stabilization strategies that do not rely solely on family tuition or short-term grant funding.

Childcare Gaps Disproportionately Affect Families with Nontraditional Schedules and Higher Care Needs

Childcare challenges in Great Falls are most acute for families whose needs fall outside standard weekday, center-based models. Military- and base-affiliated families, particularly National Guard members, face limited on-base capacity, scarce Family Child Care options, and costly weekend care. Families with children requiring high-acuity or trauma-informed care encounter limited placement options due to staffing and training constraints. Families experiencing housing instability face compounded barriers related to documentation, transportation, and schedule unpredictability, often resulting in disrupted care.

Transition and Change Management Has Created Short-Term Friction

Stakeholders generally understood the rationale for Montana's recent childcare contract restructuring but described the transition as disruptive at the local level. Providers and families reported confusion about where to access licensing support, technical assistance, and referrals, particularly during the initial rollout, and regional nonprofits absorbed additional burden re-navigating the system. While coordination has improved over time, the transition added strain to an already capacity-constrained childcare ecosystem.

Assets and Emerging Opportunities

Beyond the immediate challenges facing the childcare system, stakeholders consistently pointed to a set of assets and emerging opportunities that could be leveraged to stabilize and expand childcare supply over time. These ideas range from near-term, incremental improvements to more ambitious concepts that would require coordination, funding, and policy alignment. Together, they signal a growing recognition that childcare is foundational infrastructure for Great Falls' workforce and economic health.

Stakeholders highlighted several strengths within the local and regional childcare ecosystem, including:

- Active early childhood coalitions and cross-sector collaboration
- Growing availability of technical assistance and business support for providers
- Strong coordination among family support, referral, and crisis care services
- Increased employer awareness of childcare as a workforce issue
- Educational institutions re-engaging in early childhood training pathways

There was strong consensus that Great Falls has momentum, local leadership, and institutional capacity to build on these assets if workforce and affordability challenges can be addressed in a coordinated way.

Key assets and near-term opportunities include:

- **Existing but underutilized capacity** within licensed programs, with multiple providers reporting available space that cannot be filled due to staffing constraints.
- **Strong community and institutional anchors**, including large employers, healthcare providers, and public agencies, with growing openness to partnership-based childcare solutions.
- **Established referral and navigation services** that already connect families to care and could play a larger role in managing waitlists and improving system transparency.
- **Interest in strengthening the childcare workforce pipeline**, including recruitment, training, and retention strategies that support providers over the long term.
- **Demand for diverse care settings**, particularly smaller programs and infant-focused care, which align with family preferences but face structural and financial challenges.

Special Population Considerations

Stakeholder engagement highlighted that childcare challenges in Great Falls are experienced most acutely by several populations whose needs are not well served by standard childcare models. While these groups vary in circumstance, they share common barriers related to schedule inflexibility, higher care intensity, instability, and limited availability of specialized services.

Military- and Base-Affiliated Families

Stakeholders consistently noted that military- and base-affiliated families face unique childcare challenges related to nontraditional schedules, work rotations, and geographic separation from family support networks. On-base childcare capacity is limited by staffing availability, resulting in waitlists that can extend for several weeks or months. Family Child Care (FCC) providers—intended to supplement center-based care and support extended or nontraditional hours—are limited in number locally.

National Guard families face additional challenges, particularly during drill weekends and summer months. Weekend childcare is expensive and scarce, and in some cases the cost of care can offset a large portion of drill pay. Eligibility rules further limit options for some Guard members, requiring families to rely on civilian providers that may not offer flexible or affordable care. Transportation barriers and distance between the base and civilian providers were also noted.

Children with Special Needs and High-Acuity Care Needs

Stakeholders emphasized limited availability of childcare for children with disabilities, developmental delays, behavioral needs, or trauma histories. Providers cited staffing ratios, training requirements, and lack of specialized support as barriers to serving these children within typical childcare settings. As a result, families often struggle to find placements, and some children are asked to leave programs that are not equipped to meet their needs.

Several stakeholders described a need for more trauma-informed care and access to early childhood mental health supports, particularly given high levels of family stress, housing instability, and adverse childhood experiences within some populations.

Crisis, Respite, and Emergency Childcare

Great Falls has a small but critical network of crisis and respite childcare providers that serve families experiencing domestic violence, medical emergencies, housing instability, or sudden loss of childcare. These programs provide short-term, drop-in, and transitional care, often during evenings or weekends.

Stakeholders emphasized that demand for crisis and respite care has increased in recent years, particularly for weekend and evening hours. These providers operate with limited and often unstable funding, rely heavily on grants and donations, and are not structured to absorb long-term or ongoing demand. Despite this, they frequently function as stop-gap solutions due to the lack of available long-term childcare placements.

Homeless and Transitionally Housed Children

Families experiencing homelessness or housing instability face significant barriers to accessing childcare, including documentation requirements, transportation challenges, and instability in schedules and living arrangements. Stakeholders noted that these families often need childcare urgently to secure or maintain employment but are least able to navigate complex systems or waitlists.

Local organizations provide flexibility and grace periods to support these families, but capacity is limited and care often remains temporary. Frequent transitions disrupt continuity of care for children and increase stress for families trying to achieve stability.

Families with Nontraditional Work Schedules

Across sectors such as healthcare, emergency services, manufacturing, and the military, stakeholders highlighted a chronic lack of childcare that aligns with nontraditional work schedules. Evening, overnight, and weekend care options are extremely limited, leading families to rely on informal or piecemeal arrangements that are unstable and difficult to sustain.

This gap disproportionately affects single parents, shift workers, and families with limited support networks, and was frequently cited as a contributor to missed work, reduced hours, and job turnover.

Statewide Childcare Ecosystem and Policy Shifts

Over the last five years, Montana's childcare system has undergone significant change driven by pandemic-era stabilization funding, regulatory adjustments intended to expand supply, and renewed efforts to build a more coordinated early childhood system. These shifts have influenced both licensed childcare providers and families across Montana.

Key System and Policy Shifts (noted by interviewees as impactful):

Federal Funding and One-Time Stabilization

- Montana received more than $100 million in federal **American Rescue Plan Act of 2021** (ARPA) childcare funding (2021-2023), which helped stabilize providers, cover operating losses, and support limited expansion during and after the pandemic. ARPA funds were time limited and helped prevent closures but did not permanently address chronic workforce shortages.
- Montana secured **Preschool Development Grant Birth-to-Five (PDG B-5)** renewal (2023-2025) to conduct a statewide needs assessment, strategic plan, and fiscal analysis focused on long-term system coordination, workforce development, and financing.

Movement toward Long-Term Financing

- In 2025, Montana enacted HB 924, creating a **Montana Early Childhood Account Board** and the **Montana Growth and Opportunity (GO) Trust** signaling a shift toward building more durable, state-level financing and governance structures for early childhood services beyond one-time federal relief.

Regulatory and Licensing Changes Affecting Supply and Operations

- In 2023, Montana enacted changes to child-to-staff ratios and group size requirements for licensed childcare centers, including higher allowable ratios by age and the ability to double ratios during nap periods. These changes were intended to increase flexibility and expand potential slot availability but do not eliminate staffing requirements needed to safely operate at higher ratios. [Amendment to ARM 27.95.623]
- The state also modified rules related to **home-based care registration thresholds** and formally recognized **military-licensed childcare providers**, slightly broadening the range of legally recognized care settings. [2023 Legislative changes]

State Subsidy Policy That Affects Affordability & Access

- Best Beginnings helps low-income Montana families afford childcare through state-administered scholarships with sliding family co-pays.
- In 2023, eligibility expanded (up to 185% of the Federal Poverty Level) and family cost caps dropped to a maximum of 9% of income, increasing the number of children served and strengthening parental choice among provider types.
- Recent legislative sessions included proposals (**HB 456, 2025**) to expand Best Beginnings scholarships to include childcare workers as eligible recipients (in addition to income-qualified families). While not implemented, the bill illustrated growing legislative focus on **childcare workforce retention as a strategy to stabilize capacity**.
- State tax credit package proposal (**SB 321, 2025**) introduce childcare-related tax credits for workers and employers, but did not pass. This proposal reflected continued interest in using the tax code to support affordability and workforce stabilization.
- While these proposals did not ultimately become law, they reflect growing recognition that **workforce recruitment and retention are central to maintaining childcare capacity statewide**.

Quality, Workforce Support, and Governance Changes

- Montana's quality improvement framework (formerly STARS to Quality) is currently in transition and **not accepting new participants**, with a with a projected relaunch of the rebuilt **Quality Recognition System (QRS)** on October 1, 2026.
- During this interim period, some providers have **lost access to coaching, incentives, and quality-linked supports** that previously helped stabilize staffing and operations.

State Contracting Restructuring & Provider Support Services

- Historically, Montana contracted with multiple *regional nonprofit Child Care Resource & Referral (CCR&R)* organizations and *Child Care Connections* that provided both provider-focused services and family-focused services under a unified approach.
- In 2024, the state **split those services into separate contracts.** This shift consolidated provider-focused services into a single statewide contractor rather than a network of regional nonprofits.
- The *childcare provider technical assistance and quality support contract* was awarded to **Shine Early Learning**, a national organization based in New York.
    - Shine Early Learning has launched **SPARK Learning Lab Montana** to serve as the statewide hub for provider technical support, licensing help, and professional resources. Services include licensing assistance, background check support through fingerprinting logistics, coaching, business supports, and quality system navigation.
- The *family-centric services,* including administering Best Beginning scholarships, supporting families navigating childcare subsidies, eligibility processing, and family-oriented casework, was awarded initially to Child Care Connections (later withdrew due to not being able to sustain operations without provider-services funding). The contract was awarded to three of Montana's six existing childcare resource and referral nonprofits, including Family Connections in Great Falls and Child Care Resources in Missoula.
    - **Impact:** Only two nonprofits will ultimately deliver services statewide since Child Care Connections withdrew. Caseloads for remaining nonprofits will increase dramatically, requiring major hiring and operational expansion.
- A third contract was established for services aimed at assisting childcare providers in building their skills as business owners and was awarded to Montana nonprofit, Zero to Five.
- Most interviewees understood why the state separated the provider-facing and family-facing services and centralized provider technical assistance. However, the speed and scale of the transition created real disruption, particularly at the local level.
- Several stakeholders described the change as something that "blew up" the CCR&R ecosystem, especially for organizations that previously delivered integrated services under one roof.
- Multiple CCR&R leaders and early childhood educators noted that when provider services were removed from regional nonprofits, **there was a lag before SPARK Montana was fully operational**. During that window, providers experienced:
    - Confusion about where to go for licensing help and compliance questions
    - Delays in technical assistance
    - A sense that "no one was there" to support providers at moments of stress or transition
    - Initial mistrust and concern about losing long-standing personal relationships built through local CCR&Rs
- Stakeholders consistently noted that **SPARK Montana's decision to hire locally and conduct a statewide listening tour helped rebuild trust.**
- Stakeholders **criticism was not about the quality or intent** of SPARK's services. Instead, the dominant theme was **change management**. Providers did not always know which organization handled which function and Family Connections and other CCR&Rs reported spending significant time re-explaining the system to providers and families.

Dare to Dream: Big Ideas by Stakeholders

The following concepts emerged through interviews and ecosystem review as longer-term or aspirational opportunities. These ideas are not formal recommendations, but reflect areas where stakeholders see **potential for innovation or coordinated investment**.

- **Shared staffing or substitute pools** that allow providers to cover vacancies, reduce classroom closures, and operate closer to licensed capacity.
- **Employer-supported childcare partnerships**, such as reserved slots, pooled employer contributions, or shared service agreements with local providers.
- **Childcare workforce pathway and apprenticeship models** that connect high school, postsecondary training, and on-the-job learning to licensed employment.
- **Expanded support for home-based and small-scale care**, particularly for infant care, through start-up assistance, mentoring, and licensing support.
- **Dedicated infant care hubs or shared-service models** that acknowledge higher staffing ratios and operational costs.
- **Activation of underutilized public or nonprofit space** for childcare use where zoning, licensing, and facility conditions allow.
- **More coordinated system-level planning**, including improved waitlist visibility, shared data, and alignment between workforce, economic development, and early childhood systems.

Cross-Cutting Insights

While many interviews focused on immediate capacity and staffing challenges, several cross-cutting insights emerged that shape how childcare challenges are experienced across families, providers, and employers in Great Falls.

One consistent theme was the gap between licensed capacity and functional capacity. Stakeholders repeatedly noted that waitlists often reflect staffing constraints and parental preferences rather than a true absence of physical space. In practice, this means that system capacity is fluid and can change quickly as staff are hired or lost, making it difficult for families and employers to plan with confidence.

Stakeholders also emphasized the outsized role of parental choice in shaping demand, particularly for infant care and smaller settings. Families frequently prioritize program size, familiarity, and perceived quality over availability, resulting in concentrated demand for a limited number of providers while larger programs operate below capacity. This dynamic complicates efforts to interpret waitlist data and underscores the need for better family navigation and communication about available options.

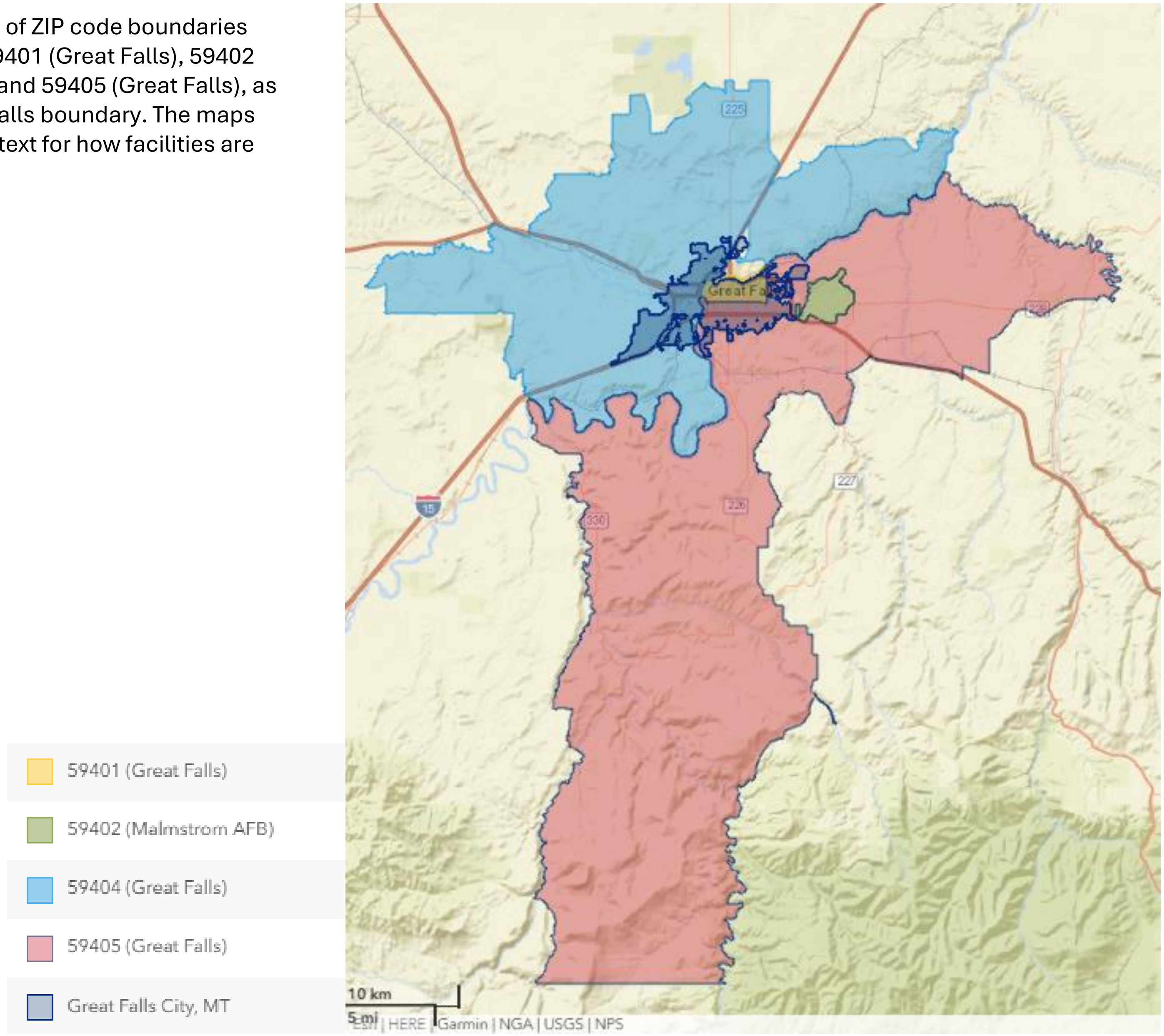
Another recurring insight was that childcare disruptions ripple quickly into the workforce, even when care technically exists. Interviewees described situations where families temporarily rely on informal care, staggered schedules, or short-term arrangements that technically "solve" childcare needs but reduce productivity, increase absenteeism, or limit employees' ability to accept certain shifts or roles. These impacts are often invisible to traditional metrics but are highly consequential for employers.

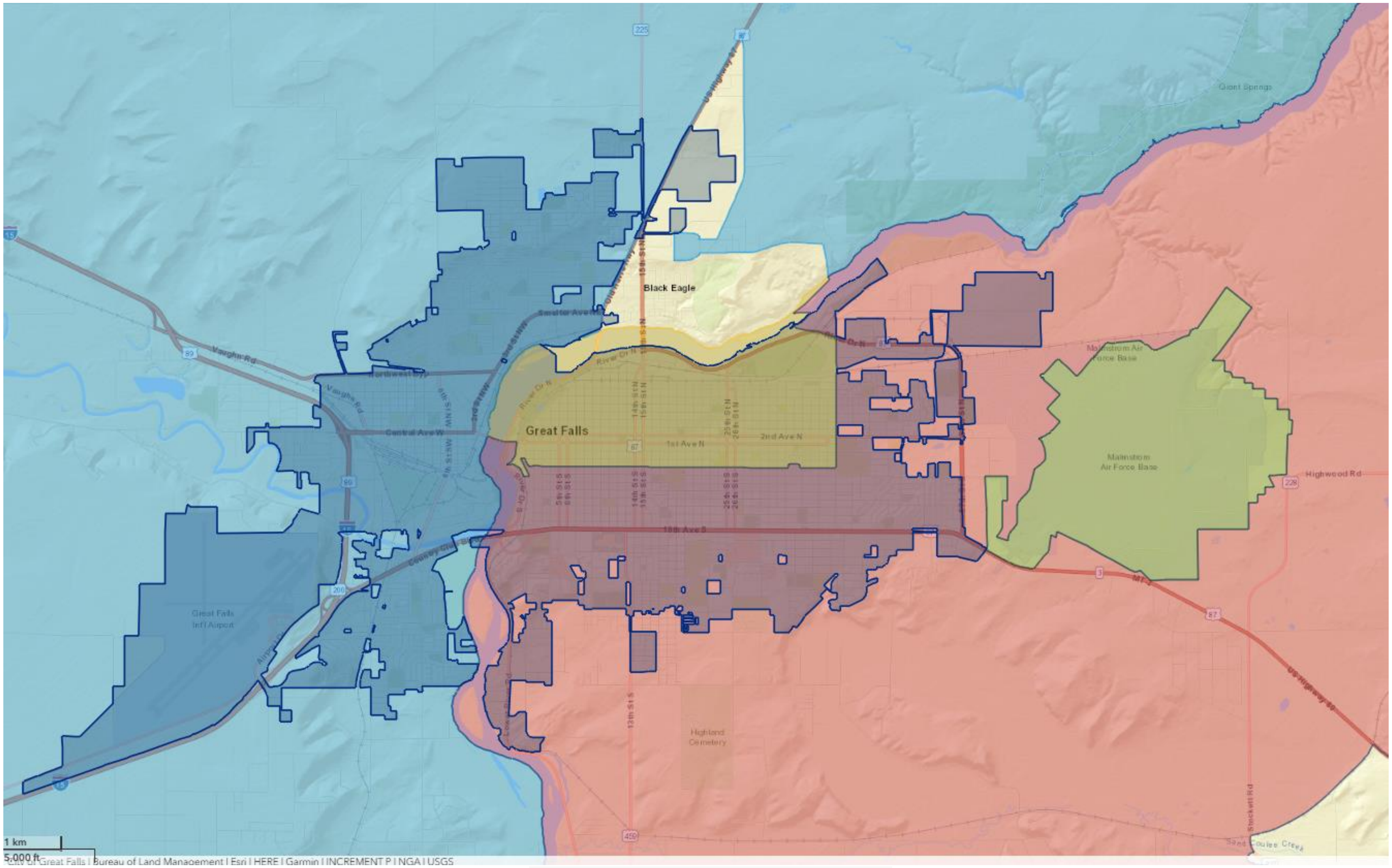
Stakeholders also highlighted fragility within the childcare workforce itself, noting that programs can lose or gain capacity based on the departure or arrival of just one or two qualified staff. This sensitivity makes providers vulnerable to shocks such as illness, burnout, or competing job opportunities, and reinforces the idea that staffing, not facilities, is the system's binding constraint.

Finally, interviews revealed a strong interest in coordination over expansion. Many stakeholders expressed skepticism that simply adding new facilities would resolve current challenges without parallel investments in workforce support, operational stability, and system-level coordination. Instead, there was notable alignment around solutions that improve resilience within the existing system, even if they do not immediately increase headline capacity numbers.

APPENDIX C: ZIP CODE REFERENCE MAPS

This appendix includes reference maps of ZIP code boundaries within the Great Falls area, including 59401 (Great Falls), 59402 (Malmstrom AFB), 59404 (Great Falls), and 59405 (Great Falls), as well as the incorporated City of Great Falls boundary. The maps are included to provide geographic context for how facilities are distributed across the Great Falls area.





- 59401 (Great Falls)
- 59402 (Malmstrom AFB)
- 59404 (Great Falls)
- 59405 (Great Falls)
- Great Falls City, MT

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