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IssueBRIEF

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A Closer Look:
Informal Child Care Arrangements and Support in California

The strategy

The David and Lucile Packard Foundation's Children, Families, and Communities (CFC) program strives to ensure that all children have the opportunity to reach their full potential. The goal of CFC's Early Learning Strategy is to make sure infants, toddlers, and preschoolers are on track for success in school and in life by being ready for school by age five, regardless of their family's background. The Early Learning Strategy supports adults who provide nurturing environments where children can enjoy learning, exploring, and making friends, and adults have pride and confidence in the education and care they provide. CFC is focusing part of this 10-year strategy on identifying caregivers who provide informal child care in California, learning about their needs for support, and funding and evaluating promising approaches to enhance the quality of children's experiences in these settings.

This is the second in a series of three issue briefs that presents the findings from the Informal Caregivers Research Project, funded by the David and Lucile Packard Foundation's Children, Families, and Communities (CFC) program and conducted by Mathematica Policy Research. This brief presents our findings on informal caregivers' and parents' networks, focusing on child care arrangements and sources of support and information related to caregiving from a small sample of informal caregivers and parents in California's Bay Area. The first brief in this series provided an overview of informal child care in California. The next brief will discuss the needs expressed by informal caregivers and parents; barriers they face in accessing resources; and recommendations for outreach methods, programs, and policies to address their needs.

> ### A working definition of informal child care
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> This research project defines *informal child care* as care provided on a regular basis to children from birth through age 5 by unlicensed, noncustodial caregivers. Other terms for informal child care are family, friend, and neighbor care; home-based care; kith and kin care; relative care; and license-exempt care.[1]

This brief draws upon in-person interviews with parents and informal caregivers who described their caregiving arrangements and the networks that they used to obtain social support and information about child care. We recruited the parents and caregivers during visits to four* community organizations in Alameda and Santa Clara counties that provide free resources and services for parents, caregivers, and children (Box 1). We conducted the interviews in English or Spanish (as the individual preferred). We used the interview data to create ecomaps, or graphical representations of caregiving arrangements and support networks, our main tool for data analysis.

This brief includes two examples of the ecomaps we developed.

To determine the types of supports that might be most useful to parents and caregivers and, ultimately, most beneficial to children, we sought to learn more about arrangements for informal child care and sources of support related to child care. By looking at key characteristics of these arrangements and the nature of parent and caregiver support networks, we hope to identify opportunities to help parents and caregivers ensure that their children receive warm, supportive, and developmentally enriching care.

Profile of community organizations from which parents and informal caregivers were recruited

Organization	County	Type of organization
Oakland Public Library	Alameda	Library branch providing literacy-based activities and services for children and families in the surrounding community
Lotus Bloom Child & Family Resource Center	Alameda	Family resource center providing services and programs related to community empowerment and early learning via arts enrichment, music, and literacy
Santee Family Resource Center	Santa Clara	Family resource center providing programs and services related to family and child well-being and development
East Valley Family YMCA	Santa Clara	Community organization providing health, cultural, and educational programs and services to enrich community members

ECOMAP SAMPLE CHARACTERISTICS

We interviewed 10 parents and 11 caregivers.[*] We recruited parents who were currently using informal child care and informal caregivers who were currently providing care (or who had done so in the past).[†] Some arrangements were recent (for example, one month), whereas others had been in place for several years (for example, five years).

The parents and caregivers we interviewed were mostly women, except for one male informal caregiver. The informal caregivers' average age was 43; the average age of parents was 33. Most of the parents and caregivers we interviewed were married and most of the informal caregivers also had children of their own. Some of the parents and informal caregivers in our sample lived with an adult other than their spouse.

YOUNG CHILDREN ARE THE MOST COMMON RECIPIENTS OF INFORMAL CHILD CARE; GRANDPARENTS TYPICALLY PROVIDE SUCH CARE

Consistent with the literature, we found that most children receiving care were younger than 5, and the age range was 6 months to 16 years.[‡]

> **66** Children are better off with family.
>
> Informal caregiver caring for her niece's children

Most child care arrangements we observed involved a family member as a caregiver. The most common family member to provide care

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[*] We visited five community organizations for this study, but only four were able to participate in the interviews upon which this brief draws.

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[*] The informal caregiver and parent subgroups in our sample are independent of each other. In other words, the informal caregivers in our sample do not care for the children of the parents in our sample.

[†] One informal caregiver in our sample was not currently providing informal child care but had done so previously.

[‡] The 16-year-old was a boy who received informal child care with his 11-year-old sister when school was closed due to breaks and holidays.

Ecomapping started in the field of social work to identify kinship care, but has broader applications

Originally developed as a way to help social workers understand the needs of families they work with[2], ecomapping involves developing a graphic representation of an individual or family and the web of connections to the other people and institutions that make up their social support system. Researchers have also used ecomapping in the field of health.[3]

We used ecomapping to highlight the structure and complexity of informal child care arrangements. We also sought to understand the existing networks that caregivers and parents use as supports. Ecomapping enables us to graphically represent the child care arrangements and support networks.

was a grandparent. One parent commented that she "feel[s] more comfortable" having family members take care of her children because they are familiar with each other and "it's easier." One grandmother mentioned that she takes care of her grandchildren to give herself "a little bit of a life and not feel lonely" and so that her grandchildren's parents can work. She said she spends so much time with her grandchildren that they sometimes "only go home to sleep."

ARRANGING AND PROVIDING INFORMAL CHILD CARE IS A COMPLEX PROCESS
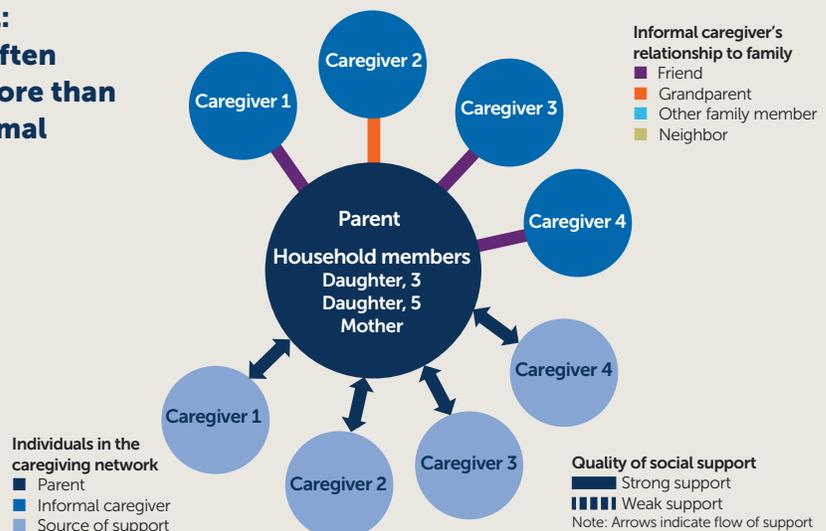
Parents and caregivers have multiple child care arrangements. Parents in our sample often relied on more than one informal caregiver to provide care for their children, and informal caregivers tended to provide care to children from more than one family. On average, each parent and caregiver reported having two informal child care arrangements. Although two parents in our sample each relied on a single informal caregiver, others drew upon a much broader network for child care, with as many as four informal caregivers. For example, in Ecomap 1, we see that a single mother has four caregiving arrangements. She relied on two friends, her mother, and a group of parents from her daughters' preschool (depicted as Caregiver 4) to care for her two children. In Ecomap 2, the informal caregiver provides child care for children of two relatives and one neighbor.

Regularity of child care varies with parents' needs. The regularity of child care varied across families and across informal caregivers providing care for a given family. Some were regular caregivers—that is, those who provide child care for a family on a recurring basis; others pitched in on an as-needed basis (for example, when a parent had a doctor's appointment). Across all 41 caregiving arrangements reported by parents and informal caregivers for which we have information on the regularity of care, many were regular arrangements (24), several were as-needed (14), and a handful were both (3).

Parents use a variety of informal caregivers to meet the demands of their schedules, whether related to work, school, or personal needs (for example, medical appointments). In some ways, having multiple caregivers provides insurance that someone will be available to care for a child when a planned or unplanned need arises. For example, one parent relied on three caregivers to care for her 3-year-old child during the day and her older children after school. The children's grandmother provided care when their mother had to work, and their aunts helped out on an as-needed basis when the grandmother was unavailable, usually once or twice per month. Another parent relied on two informal caregivers for her 17-month-old and 7-year-old. She has two caregivers because one caregiver is unable to give her youngest child the "level of attention she needs," but the children's grandmother could care for both children. With parents relying on multiple caregivers with different schedules and in different locations, it is clear

Ecomap 1: Parents often rely on more than one informal caregiver

Informal caregiver's relationship to family
- Friend
- Grandparent
- Other family member
- Neighbor

Parent
Household members
Daughter, 3
Daughter, 5
Mother

Individuals in the caregiving network
- Parent
- Informal caregiver
- Source of support

Quality of social support
- Strong support
- Weak support

Note: Arrows indicate flow of support

that arranging child care for young children is a complex process whereby parents must coordinate care for their children and be prepared to make contingency plans in the event a caregiver is unavailable.

From the caregiver's perspective, providing informal child care can be similarly complex. Many caregivers offer flexibility to families by providing child care for multiple friends or family members with different needs and schedules. Some of this care occurs on a regularly scheduled basis (such as when parents work); in other cases, it occurs irregularly (so parents can take care of their personal needs). For example, one caregiver provided care for her friend's children from four different families; she provides regularly scheduled care for children in two of the families and as-needed care for the children in the other two families.

REMUNERATION FOR INFORMAL CARE VARIES GREATLY, AND MOST INFORMAL CAREGIVERS ARE UNAWARE OF CHILD CARE SUBSIDIES

About half of informal child care arrangements involve remuneration. We categorized remuneration as financial or exchange of services (for example, reciprocal child care). We did not observe consistent patterns between remuneration and relationship to informal caregiver (for example, family member compared to friend) as remuneration varied within and across individual ecomaps. About half of the informal caregiving arrangements we learned about did not involve any type of remuneration. One parent explained that she does not pay her family members to take care of her children simply because "we are family." Similarly, in some cases, nonfamily members did not receive any remuneration. In these cases, informal caregivers provided child care because they enjoy spending time with children or want to "give mom a break." One informal caregiver provided care without remuneration to help a family with a sick 3-year-old.

On the other hand, some caregivers were remunerated for providing informal child care. For example, a few grandparents reported receiving payment for providing care to their grandchildren. Some grandparents received payment regularly, whereas others received payment when their children were able to pay them. Another caregiver reported exchanging

child care with her friend and being paid weekly to care for her niece and nephew.

The range of payment for informal child care varies. Among informal caregivers who received remuneration, money was the most common form of payment, followed by exchange of child care. The range of payment varied greatly in our sample. One informal caregiver reported receiving $5 per day. In contrast, another informal caregiver and one parent each reported payment of $800 per month for child care. As a comparison, a representative from a child care resource and referral agency (R&R) in Alameda County estimated that a license-exempt provider participating in California's child care subsidy system would be reimbursed about $482 per month to provide care for a 2- to 5-year-old five days per week for 10 hours per day.

Informal caregivers are not aware of child care subsidies for informal child care. We asked parents and caregivers about their awareness and use of child care subsidies. We found that only one informal caregiver was aware of the voucher-based child care subsidy system in California. In contrast, 6 of 10 parents were familiar with subsidies. One mother had heard of it through prior participation in a government program and a few had heard about it through their employers. None of the parents or caregivers in our sample provided or received payment in the form of a child care subsidy. (This might be due to lack of awareness or lack of eligibility—we did not collect information on the eligibility status of families using informal care in our sample.)

FRIENDS AND FAMILY ARE THE MOST COMMON SOURCES OF SUPPORT RELATED TO CHILD CARE FOR PARENTS AND INFORMAL CAREGIVERS

Parents and informal caregivers rely mainly on personal rather than institutional support. We characterized sources of support as either personal (such as friends or family members) or institutional (such as a social service or community agency). The majority of parents (6 of 10) and informal caregivers (8 of 11) reported only personal sources of support. However, the remaining parents and informal

caregivers reported at least one institutional source of support. For example, one informal caregiver reported receiving information from her local Women, Infants & Children Supplemental Nutrition Program office and First 5 program. Two informal caregivers and one parent cited BANANAS, an R&R in Alameda County, as another form of support from which they received professional development or information related to child care and development. Several parents mentioned reliance on online parenting resources, such as Berkeley Parents Network and Facebook parenting groups, as well.

Ecomap 2 depicts an informal caregiver's network and, like Ecomap 1, shows that the individual relied on a combination of friends and family members for support. In describing their sources of support, neither the parent from Ecomap 1 nor the caregiver from Ecomap 2 reported an institutional source of support. Many parents and caregivers suggested their personal supports provided emotional support and advice related to children and child care; people providing personal support tended to have children of their own or other experience caring for children. For example, one parent mentioned that her mother would remind her to be patient with her children when she became stressed. Another caregiver explained that his wife taught him how to care for his grandchildren.

Personal supports are strong. During the interviews, most parents and caregivers characterized their sources of personal support as strong rather than weak. We defined strong support as support that is reliable and consistent. These sources of support were also mainly two-way (mutual or bidirectional), meaning that parents and caregivers not only received support but also provided it. All of the personal supports in Ecomaps 1 and 2 were mutual. In contrast, and as expected, parents or caregivers who reported institutional supports were more likely to be the recipients of information and thus have a one-way relationship with the institution.

Parents and caregivers rely on each other for support. Parents reported supportive relationships with their informal caregivers and informal caregivers reported supportive relationships with the parents of the children for whom they provided care. More specifically, parents and caregivers communicated about how the children were doing and exchanged information and advice related to child development and care. Seven of 11 informal caregivers included the parent or parents of one of the children for whom they provided care in their support systems. Similarly, 6 of 10 parents included at least one informal caregiver of their children in their networks. In Ecomap 1, we see that the parent included all of her informal caregivers in her support network. Similarly, in Ecomap 2, we see that the informal caregiver included all of the parents of the children for whom she provided care in her support network.

Ecomap 2: Friends and family are the most common source of support related to childcare
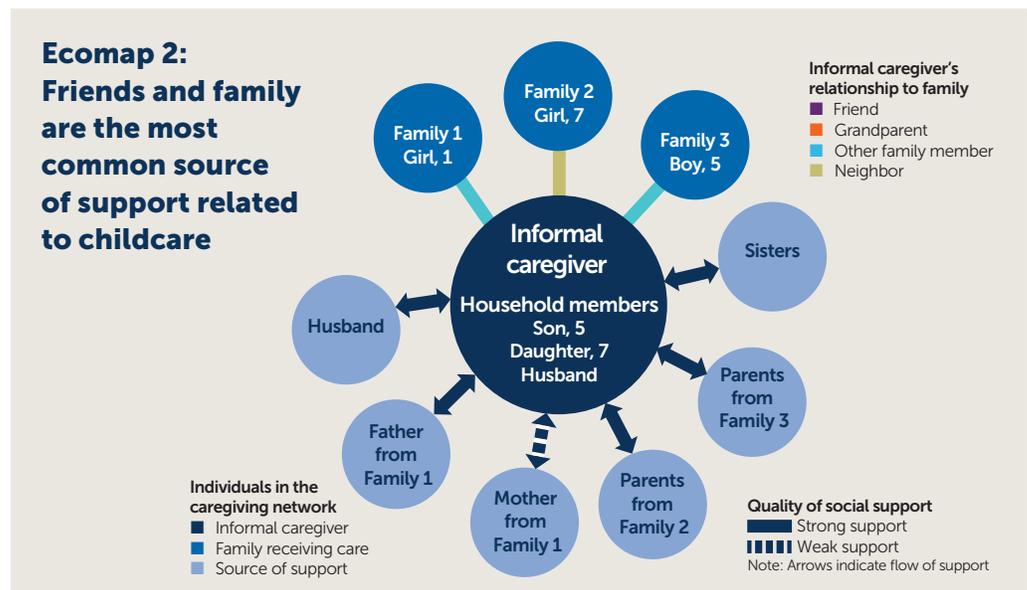
CONSIDERATIONS FOR INFORMAL CHILD CARE OUTREACH EFFORTS AND INTERVENTIONS

The findings presented in this brief highlight the characteristics of informal child care arrangements and support systems related to child care from the perspectives of parents and caregivers. Our findings are consistent with those presented in the literature and the first brief in our series.[6] Outreach efforts and interventions targeted to support parents and caregivers in informal child care arrangements might consider the following points from our findings:

- Although a wide age range of children received informal child care, most were infants and toddlers. Programs should keep this age range in mind when providing resources and materials.

- Parents and caregivers' caregiving arrangements included family and friends, suggesting that relatives and nonrelatives alike are invested in helping care for young children. Outreach and interventions should target the range of caregivers providing child care.

- Parents and caregivers relied on each other for support and information. Interventions and programs should consider targeting both groups and encouraging regular communication between them.

- Most caregivers were unaware of child care subsidies. Efforts to increase awareness could increase participation and provide caregivers with financial support they might greatly need.

- Parents and caregivers rarely cited institutions as sources of support for child care, highlighting opportunities for institutions to improve outreach and engagement.

ENDNOTES

[1] Susman-Stillman, A., and P. Banghart. "Quality in Family, Friend, and Neighbor Child Care Settings." Child Care & Early Education Research Connections, National Center for Children in Poverty, 2011.

[2] Hartman, A. "Diagrammatic Assessment of Family Relationships." *Social Casework*, vol. 59, 1978, pp. 465–476.

[3] Rempel, G.R., A. Neufeld, and K.E. Kushner. "Interactive Use of Genograms and Ecomaps in Family Caregiving Research." *Journal of Family Nursing*, vol. 13, 2007, pp. 403–419.

[4] Public Policy Institute of California. "How Do Subsidies Affect California's Child Care Market?" Research brief (Issue 79). San Francisco: Public Policy Institute of California, 2003.

[5] California Child Care Resource & Referral Network. "State Subsidized Child Care Payment Rates." California Child Care Resource & Referral Network, 2013.

[6] Thomas, J., K. Boller, C. Jacobs Johnson, M. Young, and M. Hu. "Setting the Stage: The Importance of Informal Child Care in California." Issue brief. Princeton, NJ: Mathematica Policy Research, 2015.

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