

Issue BRIEF

Nazihah Siddiqui, Cleo Jacobs Johnson, Patrick Balke, Jaime Thomas, Mynti Hossain, Amaka Osuoha

The research questions

1. What are the primary reasons that parents choose informal child care?
2. Are informal child care providers interested in promoting their own economic advancement through providing care to young children, and how might they do so?
3. How do bartering and other nonmonetary exchanges support informal child care?
4. What types of quality do children experience in informal child care settings?
5. What types of support do parents and informal child care providers get, want, and need?

Characteristics of Informal Child Care Arrangements and Social Support in Detroit

Since 1930, the W.K. Kellogg Foundation (WKKF) has strived to support children's development by reducing vulnerability caused by economic and social inequity. In November 2016, in partnership with the Kresge Foundation, WKKF launched the year-long initiative *Hope Starts Here: Detroit's Early Childhood Partnership* to develop a strategic plan to ensure that all children in Detroit have access to high quality early childhood experiences. Through community engagement, stakeholder collaboration, and research, WKKF is learning about existing caregiving and support networks in Detroit and trying to find ways to enhance them. WKKF asked Mathematica Policy Research to carry out the Informal Child Care in Detroit (ICCD) research project. Mathematica conducted the research from June 2016 to December 2017.

What is informal child care?

For the ICCD project, we defined informal child care as provided by someone other than a child's parent or guardian outside a licensed child care center or family child care home. The caregiver may be a family member, a friend, or a neighbor; the care may be regular or occasional; and it may take place in the home of the caregiver or the child. Other terms for informal child care are family, friend, and neighbor, relative, or kith-and-kin care; and unlicensed, unlisted, or license-exempt care.

This brief, the second in a series of three, 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 sample of informal caregivers and parents in Detroit and Wayne County, Michigan. The first brief in this series highlighted the importance of informal child care in Detroit and Wayne County, and described parent and caregiver experiences with informal care. The third brief will discuss barriers that informal caregivers face in providing high quality care, their needs for support, and recommendations for promising approaches to meet their needs.

Study activities



1. **Twelve interviews with key informants** who were staff at nonprofit organizations, consulting and research organizations, and a state government agency in Detroit, Wayne County, or Michigan. The purpose of the interviews was to learn about existing informal child care programs and networks. WKKF recommended some key informants; others were identified via contacts with stakeholders who were working with organizations that provide family and children's programming and services. We recruited key informants by email and phone, and conducted interviews with them from November 2016 to March 2017.



2. **Eighteen site visits** to nonprofit and other organizations and public libraries in Wayne County. During these visits, the research team conducted interviews with 95 parents and informal caregivers to learn about their experiences using and providing informal care, and drew 51 ecomaps (graphic representations of social systems and supports). The study targeted adult parents and caregivers who use or provide informal child care on a regular or occasional basis for young children, with a focus on those living or providing or receiving child care in Detroit. We invited parents and caregivers to participate in the study individually or in group settings. We conducted interviews with them from January to April 2017.

To determine the types of supports that might be the most useful to parents and caregivers—and, ultimately, the most beneficial to children—we sought to learn more about informal child care arrangements and sources of support through in-person ecomap interviews with parents and caregivers at seven community organizations in Detroit and Wayne County.¹

By looking at characteristics of these caregiving arrangements and the nature of parent and caregiver support networks, we hope to identify opportunities to help parents and caregivers ensure that children receive warm, supportive, and developmentally enriching care. In this brief we present the characteristics of our ecomap sample and discuss the relationships between children and caregivers. We also report on the regularity of child care and the complexities involved in arranging care. Next, we examine the number and frequency of caregiving arrangements, sources of support related to child care, and parents' perceptions of child care quality. Finally, we outline considerations for informal child care outreach and interventions. Two of the ecomaps we developed are presented in this brief.

ECOMAP SAMPLE CHARACTERISTICS

We recruited parents who were using informal child care and informal caregivers who were

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,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 these child care arrangements and support networks.

providing child care at the time of interview. To be eligible for our study, parents and caregivers had to be at least 18 years of age and have at least one informal child care arrangement for at least one child younger than 7 years of age. We interviewed 24 parents and 27 caregivers who fit these criteria.⁴

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¹ We visited 12 community organizations for this study, but conducted ecomap interviews only at 7.

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 We interviewed 28 caregivers but excluded one from analyses because she reported providing care for 30 families, and we were unable to collect sufficient information on each of those caregiving arrangements.

Study sample characteristics

146
parents and informal caregivers participated in the study

40
was the average age

Over **90%** were female

About **50%** were African American

20% had less than a high school education

29% had a high school diploma or GED

26% attended some college

16% had at least a college degree

Profiles of sites visited

Organization

Type of organization

Advantage Living Center NW

Skilled nursing and rehabilitation center providing services to seniors in surrounding communities

Arab Community Center for Economic and Social Services (ACCESS)

Community nonprofit providing social, economic, health, and educational assistance to the Arab immigrant population

Chadsey Condon Community Organization

Community organization providing services and other supports to children and families in the Chadsey Condon neighborhood

Development Centers

Nonprofit organization providing behavioral health and prevention programs, housing placement, and employment training services to Detroit residents

Family Alliance for Change

Family resource center providing support, training, resources, and education for parents of children with special needs in Wayne County

Hanley International Academy

Charter school dedicated to providing a safe learning environment that promotes the academic, physical, social, and emotional development of its diverse learning community

Matrix Center

Nonprofit organization offering youth, families, adults, and seniors an array of supportive services and referrals through programming and collaboration with partners

Public library branches (Campbell, Chandler Park, Garden City, and Redford)

Public library branches providing literacy-based programs and services for children and families in the surrounding communities

Starfish Family Services

Nonprofit organization serving vulnerable children and families in metropolitan Detroit, with a focus on providing resources, services, and other supports for early childhood development

Thrive by Five

Collaborative partnership between four Detroit social service agencies that provides Head Start services for children ages birth to five

Note: We visited some sites more than once to interview different groups of parents and informal caregivers. Great Start Collaborative of Wayne County, a community organization that provides a coordinated system of services and resources to families, arranged the site visits conducted at Development Centers, Family Alliance for Change, Hanley International Academy, and Matrix Center. Congress of Communities, a community organization that assists in developing natural leaders in the neighborhoods it serves and advocates for change in the areas of education and public safety, arranged the site visit conducted at Thrive by Five.

Some arrangements were recent—one month, for example—whereas other arrangements had been in place for several years. Children in informal care in our sample ranged from 4 months to 14 years of age, with a median age of 4 years.

All except one of the parents and one of the caregivers we interviewed were female. The average age of informal caregivers was 46; the parents' average age was 33. About half of the parents and caregivers we interviewed were married, and most of the informal caregivers also had children of their own.

MOST CHILD CARE ARRANGEMENTS INVOLVED A FAMILY MEMBER AS A CAREGIVER, USUALLY A GRANDPARENT

In our study, most informal child care providers were family members, and the most common family member to provide informal care was a grandparent. Seventy of 90 caregiving arrangements involved a family member, and 29 of those 70 arrangements involved a grandparent. Parents and caregivers alike frequently cited the

importance of trust when choosing a caregiver; for many study participants, family members proved to be the most trustworthy caregivers.⁵

FOR PARENTS, ARRANGING INFORMAL CHILD CARE FREQUENTLY INVOLVED MULTIPLE CAREGIVERS

Parents in our sample often relied on more than one informal caregiver to provide care. On average, parents in our sample reported having two informal child care arrangements. For example, one single mother reported using four caregivers to care for her son—her mother, her father, her aunt, and a neighbor. This parent most frequently relied on her mother to care for her son when she was working; she used her other caregivers more sparingly. In contrast, informal caregivers tended to provide care to children from one family. For example, one caregiver reported caring for three of her grandchildren, who also lived in her home. She provided care while her daughter was at work, three or four days a week, eight hours a day.

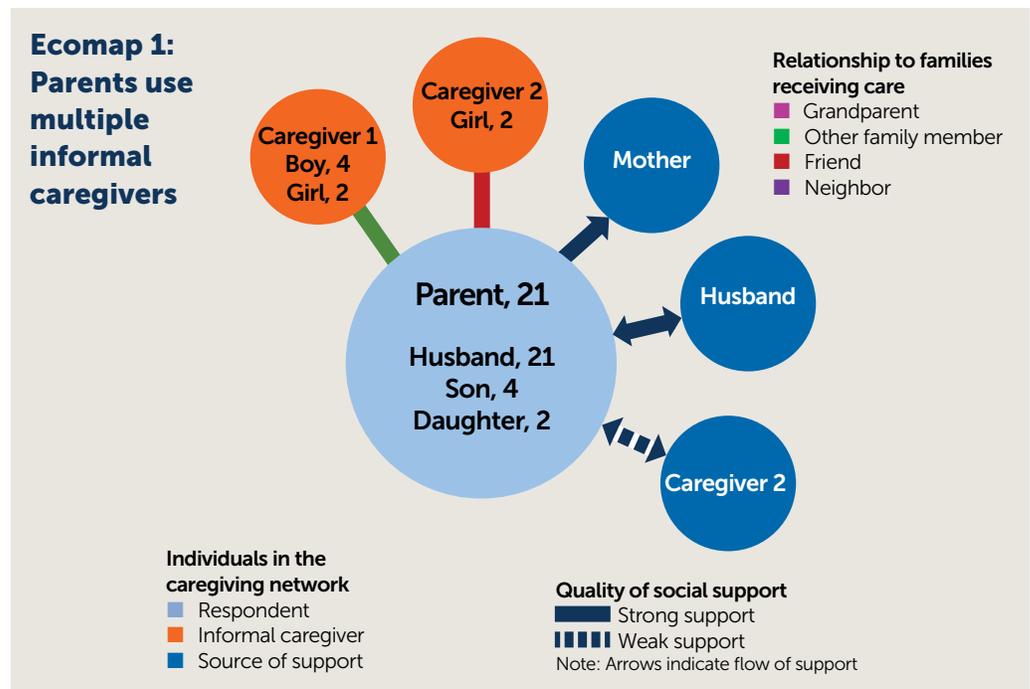
The regularity of child care varies with parents' needs—arranging care can be a complex process

The regularity of child care varied across parents and informal caregivers. Some caregivers provided

child care for a given family regularly, whereas others did so on an as-needed basis (for example, when a parent had appointments). Across all 87 caregiving arrangements for which we have information on the regularity of care, 41 were regular arrangements, 38 were as needed, and 8 were both.

Parents used a variety of informal caregivers to meet scheduling demands related to work, school, or personal needs. For example, in Ecomap 1 this parent relies on two caregivers to care for her 2-year-old and her 4-year-old when the older child's school is closed. Her friend provides care for her 2-year-old four days a week when the parent has school or does volunteer work. At the time of the interview, this caregiving arrangement had been in place for two months. The parent's cousin helps out with the children as needed, and has done so for the past two years. With parents relying on multiple caregivers with different schedules and in different locations, it is evident that arranging child care for young children can be a complex process. Parents must coordinate care and be prepared to make alternate plans should a caregiver be unavailable.

Providing informal child care can be similarly complex from the caregiver's perspective. Some caregivers gave care on a regular schedule (for example, to accommodate parents' work schedules); in other cases, care was given when parents needed to take care of personal or other business. For example, one caregiver provided care for children from three



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⁵ Thomas, J., M. Hossain, C. Jacobs Johnson, N. Siddiqui, A. Osuoha, P. Balke. "Informal Child Care in Detroit." Princeton, NJ: Mathematica Policy Research, 2017.

different families, providing regularly scheduled care for the child in one of the families, and as-needed care for children in the other two families.

OVER HALF OF CHILD CARE ARRANGEMENTS INVOLVED PAYMENT OR IN-KIND EXCHANGES

We asked parents and caregivers whether and how caregivers are compensated for providing child care. We defined compensation as financial (monetary payments) or in kind (for example, reciprocating child care or providing transportation, groceries, or meals). Over half of the child care arrangements involved compensation for caregivers. Among informal caregivers who were compensated, in-kind assistance was the more common form of payment. One caregiver reported that she exchanged child care with her friends and received money to care for her nephew.

Among child care arrangements involving financial payment, the range and frequency of payment varied

In our sample, 21 of 90 caregiving arrangements involved financial payment, with great variation in the amount of payment. One informal caregiver took care of children from five families. One of the five families participated in Michigan's child care subsidy program, and the caregiver received \$131 biweekly in subsidy payments. The remaining four families paid her between \$100 and \$250 per week. Another informal caregiver reported receiving \$40 a week to care for her 1-year-old niece three or five days a week, depending on the parents' work schedules.

The frequency of financial payment also varied. Some caregiving arrangements featured regularly scheduled payments, whereas in other cases parents paid caregivers when they could afford to pay. Several informal caregivers provided care without pay for family members and noted that they "did not feel it would be appropriate" to receive payment. One parent noted that her mother (the child's grandmother) is "paid in hugs and kisses" for providing child care.

Parents and informal caregivers were 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, of the 41 individuals (21 caregivers and 20 parents) for whom we have information about awareness and use of child care subsidies, only 3 informal caregivers and 2 parents were aware of the subsidies. The parent featured in Ecomap 1 applied for the subsidy but decided not to pursue it further because she found the process "confusing." She shared that she applied for the subsidy online and was notified that her application was complete, but later received an email stating that her application was incomplete. One caregiver felt discouraged about participating in the subsidy program because payments are made to parents instead of caregivers, which could result in caregivers not receiving payment if parents decide not to turn over the money to caregivers. Another caregiver remarked that the amount of the subsidy payment—\$131 biweekly for 10.5 hours of care each day for a 3-year-old—was "too low."

Michigan's child care subsidy

Michigan's Child Development and Care program offers child care subsidies to eligible families—primarily low-income working families—to help parents pay for the cost of informal or formal child care.⁶ Eligibility for the program depends on family size and monthly income. Payments are made biweekly and based on the hours of care provided, up to 90 hours every two weeks. Reimbursement varies by the type of care selected and its quality rating, as determined by the state's Great Start to Quality rating system. Payments range from \$1.35 per hour for a level-1 unlicensed provider to \$4.75 per hour for a 5-star rated child care center for children from birth to 2 1/2 years old. The subsidy is then reduced by a flat-rate deduction, which varies depending on monthly income and family size. Payments are made directly to formal caregivers. For informal caregivers, payments are made directly to the parent, who then reimburses the caregiver.⁷

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⁶ Sorenson, P., "Failure to Invest in High-Quality Child Care Hurts Children and State's Economy." Michigan League for Public Policy, 2014. Available at <http://www.mlpp.org/wp-content/uploads/2014/09/Failure-to-Invest-High-Quality-Child-Care.pdf>. Accessed August 20, 2017.

⁷ Michigan Department of Education, "State of Michigan Child Development and Care (CDC) Handbook." Available at http://www.michigan.gov/documents/mde/CDC_Handbook_7-2013_428_7.pdf. Accessed August 20, 2017.

PERSONAL SUPPORT FROM FRIENDS AND FAMILY WAS THE MOST COMMON SOURCE OF SUPPORT RELATED TO CHILD CARE

We characterized sources of support as either personal (from friends or family members) or institutional (from a social service or community agency). Over half of parents and informal caregivers reported only personal sources of support. The remaining parents and caregivers reported personal sources of support and at least one institutional source of support. For example, two informal caregivers cited the organization Grandparents Raising Grandchildren as a source of support that offered information related to child care and development. Two parents and one informal caregiver cited ACCESS (Arab Community Center for Economic and Social Services) as an institutional source of support. Some parents also mentioned using online parenting resources, such as parenting blogs and Facebook parenting groups.

Ecomap 2, which depicts an informal caregiver’s network, shows that the caregiver relies solely on “very strong” personal sources of support. Many parents and caregivers reported that their personal network offered emotional support and advice related to child care; those who provided personal

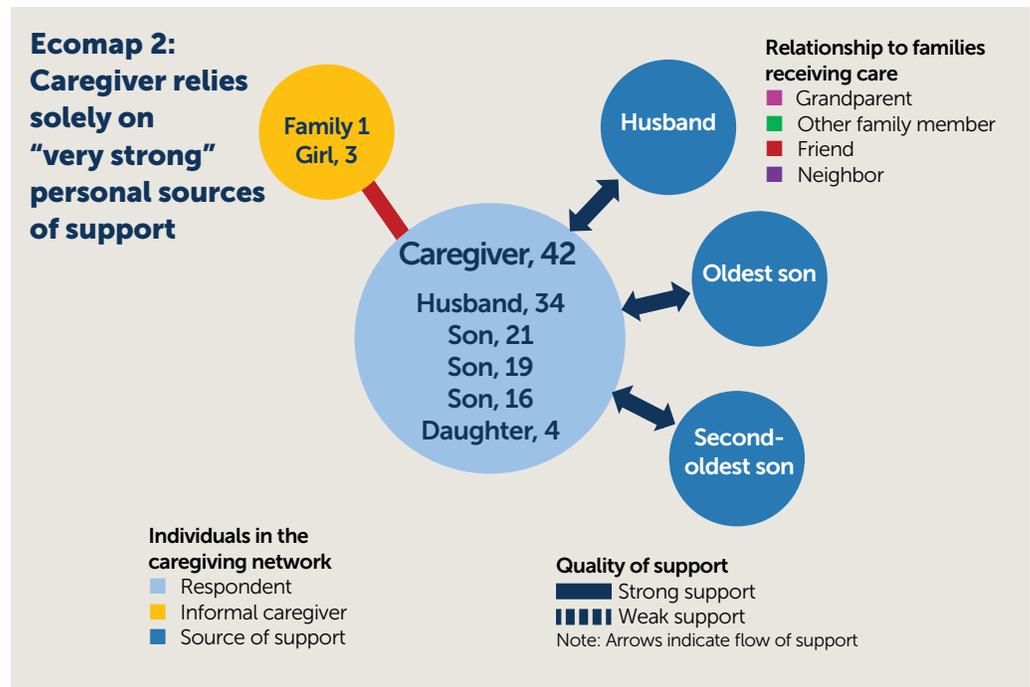
support tended to have children of their own or other experience caring for children. For example, one parent mentioned that her grandmother would tell her what to do when her children talked back or acted out. Another caregiver noted that her husband offered advice about what to do with one of the children she cared for who had developmental delays.

Personal supports were strong

Most parents and caregivers characterized their sources of personal support as strong. We defined strong support as support that is reliable and consistent. These sources of support were also primarily two-way, with parents and caregivers not only receiving support but providing it. Most of the personal supports in Ecomaps 1 and 2 were bidirectional. In contrast, parents or caregivers who reported institutional sources of support were more likely to have a one-way relationship as recipients of information from the institution.

Parents and caregivers relied on each other for support

Parents and caregivers had supportive relationships with each other. Specifically, parents and caregivers communicated about how the children were doing and exchanged information



Study limitations

Findings from this research project have several limitations. The generalizability of the findings is limited because the project included a small convenience sample of parents and caregivers who either lived or worked in Wayne County. In addition, the distribution of languages in the sample is not random, as interviewer ability and availability to conduct interviews in languages other than English was a factor in determining the individuals we interviewed. For these reasons, findings from the research project are not representative of the city of Detroit, Wayne County, or the state of Michigan. Moreover, individuals who chose to participate in the project may be different—they may, for example, hold more positive views on informal caregiving—than individuals who declined to participate or were not asked to do so.

and advice related to child development and care. However, parents were more likely to cite informal caregivers as sources of support than caregivers were to cite parents. Nearly 80 percent of parents included at least one informal caregiver of their children in their networks, whereas 59 percent of informal caregivers included parents of the children for whom they provided care in their support systems. Ecomap 1 shows that the parent included one of her informal caregivers, her friend, in her support network; the parent described that relationship as providing weak, mutual, social support. On the other hand, in Ecomap 2, we see that the informal caregiver did not include the parent of the child for whom she provided care in her support network.

ALTHOUGH PARENTS WERE SATISFIED WITH THE QUALITY OF THEIR CHILDREN'S CARE, FEW THOUGHT THEIR CAREGIVERS OFFERED THEIR CHILDREN LEARNING OPPORTUNITIES

Parents expressed overall satisfaction with the quality of care their children received from their informal caregivers. Specifically, all parents from whom we have information on the caregiving environment thought their informal caregivers provided a safe, healthy environment for their children. Similarly, all parents from whom we have information on the nature of the caregiving relationship noted that their children and caregivers had a good relationship. Parents also noted, however, that the quality of learning varied with informal caregivers. In about 25 percent of caregiving relationships, parents reported that their informal caregivers did not provide learning opportunities for their children. One parent noted that she prefers to teach her children herself, and another said that her children watch television and play outside with their caregiver, neither of which the parent considered to be learning opportunities.

PARENT AND INFORMAL CAREGIVER NETWORKS CAN BE IMPROVED

Our findings about the characteristics of informal child care arrangements are consistent with those presented in the literature, including the first brief in our series and our previous work on informal child care in California.⁸ We identified several ways to enhance outreach efforts and interventions to support parents and caregivers in informal child care arrangements:

- Caregiving arrangements included family and friends, suggesting that relatives and nonrelatives alike are invested in helping care for young children. Therefore, outreach and interventions should target the range of informal caregivers.
- Most parents and caregivers were unaware of child care subsidies. Efforts to build awareness could increase participation, thus providing parents and caregivers with financial support they may greatly need. But payments need to be worth the hassle of completing paperwork and overcoming barriers to eligibility.
- Parents and caregivers consider each other to be sources of support and information. Interventions and programs should consider targeting both groups and encouraging regular communication between them.
- Fewer than half of parents and caregivers cited institutions as sources of support for child care, highlighting opportunities for institutions to improve outreach and engagement.
- Although parents would like their children to have opportunities for learning, some did not believe that their informal caregivers provided them. Programs can help caregivers meet parents' expectations by providing caregivers with educational resources and materials.

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⁸ Jacobs Johnson, C., K. Boller, M. Young, J. Thomas, and D. Gonzalez. A Closer Look: Informal Child Care Arrangements and Support in California." Princeton, NJ: Mathematica Policy Research, 2015.

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