



Learning More about Family Friend and Neighbor Care in Forsyth County

Preliminary findings from the Family Friend and Neighbor Care Study
December 6, 2017

A project of the
Kate. B. Reynolds Charitable Trust

Agenda

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topics and
methods**

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**Parent
Respondent
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**What did we
learn from
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**What did we
learn from
care
providers?**

What did the study attempt to do?

Explore patterns in the use of child care that is provided by family members, friends, and neighbors

Also known as:

- FFN care
- Informal child care
- Kith and kin care

What were the study methods?

Parent Survey

Survey development informed by Design Team (Compass, MDC, WFRC, Imprints, Hispanic Action League, Segmented Marketing)

Eligibility criteria:

- Have a child younger than age 6 AND
- Use Family Friend or Neighbor Care exclusively or in combination with licensed and regulated child care (including NCPK or Head Start)

Over 1200 respondents

What were the study methods?

Care Provider Survey

Survey development informed by focus groups

Eligibility criteria:

- Care for a child younger than age 6, who is not their child AND
- Not a licensed/regulated child care provider

Over 400 respondents

Parent Survey Respondent Profile

Gender

90% of respondents were female

Age

41% of respondents were between
20 and 29

46% were between 30 and 39

Race/Ethnicity

47% of respondents reported
themselves as African-American

38% were white (non-Hispanic)

9% were Hispanic/Latino

Parent Survey Respondent Profile

Education

17% reported themselves as high school graduates

29% had “some college”

11% had a two-year degree

38% had a four-year degree or higher

Marital Status

39% of respondents were single

48% were married

Parent Survey Respondent Profile

Income

24% of respondents earned less than \$20k, per year

34% earned \$20k-\$40k

19% earned \$40k-\$60k

23% earned more than \$60k

Employment

80% of respondents reported being employed (primarily, the “first shift”)

Take Away Message #1

We may need to change or enhance our ability to talk about child care arrangements.

Parents may not be thinking about care arrangements the same way academics or individuals from the “child care world” are thinking about them.

Example: When grandparents or friends care for children—do parents consider this “child care?”

Studies suggest we need to think about and conduct this work “holistically.”

Caregiver relationships, roles, and arrangements may be very fluid within families and over time

Take Away Message #2

There are differences in care patterns across families.

Differences may align with:

- Marital status
- Employment and income
- Availability of extended family
- Availability (and affordability) of preferred care arrangement

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Example: Single Parent Care Arrangements

71% reported that they are employed (either part-time or full-time)

5% reported working BOTH part-time and full-time jobs

Of the parents who are single and work full-time:

There is an **average of 2 arrangements** (some respondents reported up to 5 arrangements)

36% of respondents report the child stays home

Grandparents or other relatives frequently look after the child or children (whether at home or in the relative's home)

Example: Married Parent Care Arrangements

67% reported that they are employed

1% reported working BOTH part-time and full-time jobs

Of the parents who are married and work full-time:

There is an **average of 2 child care arrangements** (some respondents reported up to 7 arrangements)

54% keep their child at home

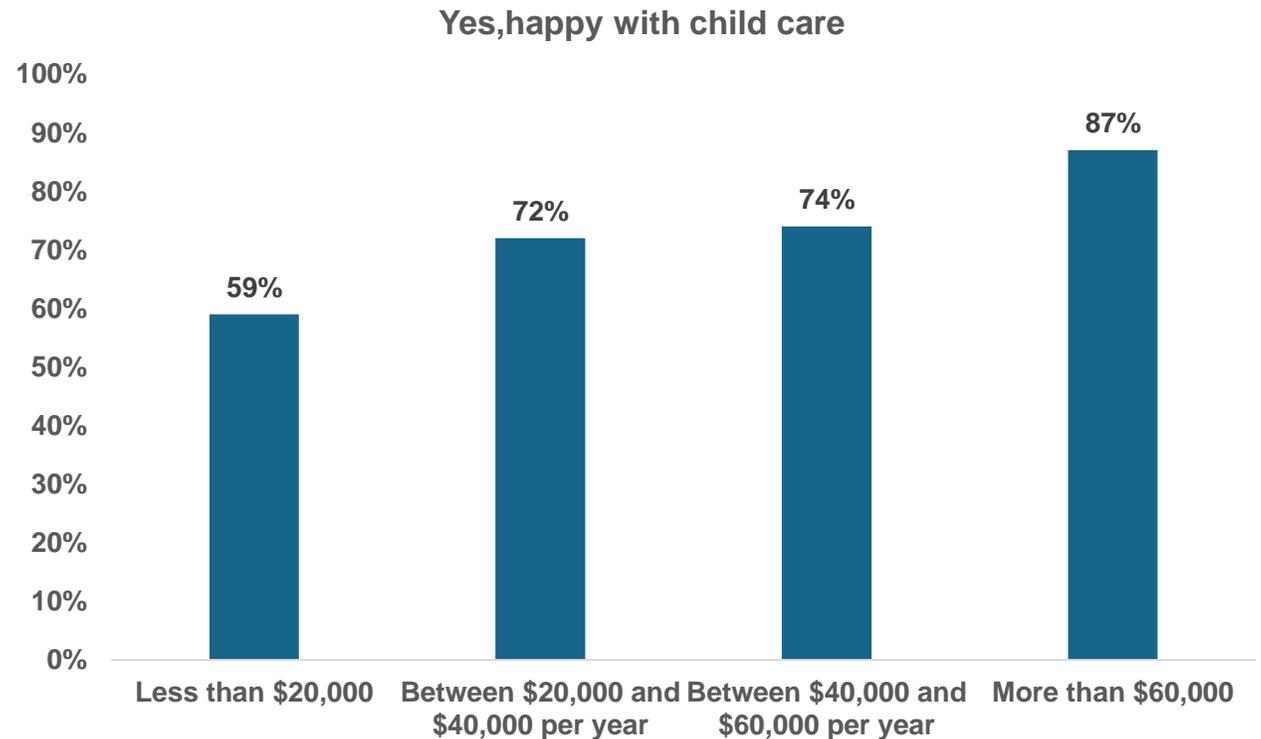
Trading off with partner as well as grandparent, other relative, and babysitters are common forms of child care

46% take their child to the home of **another trusted adult** (such as a grandparent or other relative)

Take Away Message #3

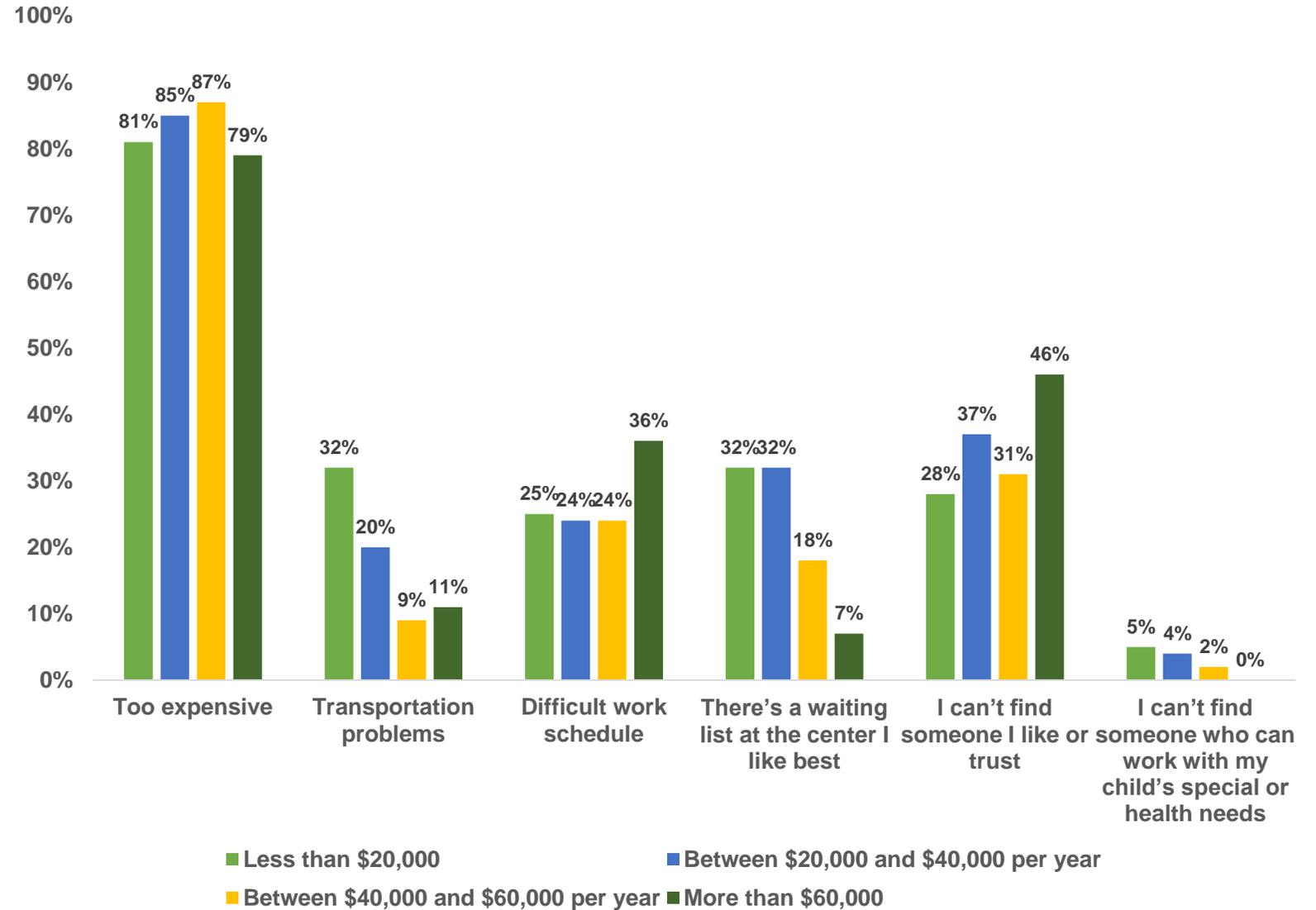
Most parents are happy with their care arrangements.

Overall, 72% of respondents (n=746) reported that they were happy with their current arrangements



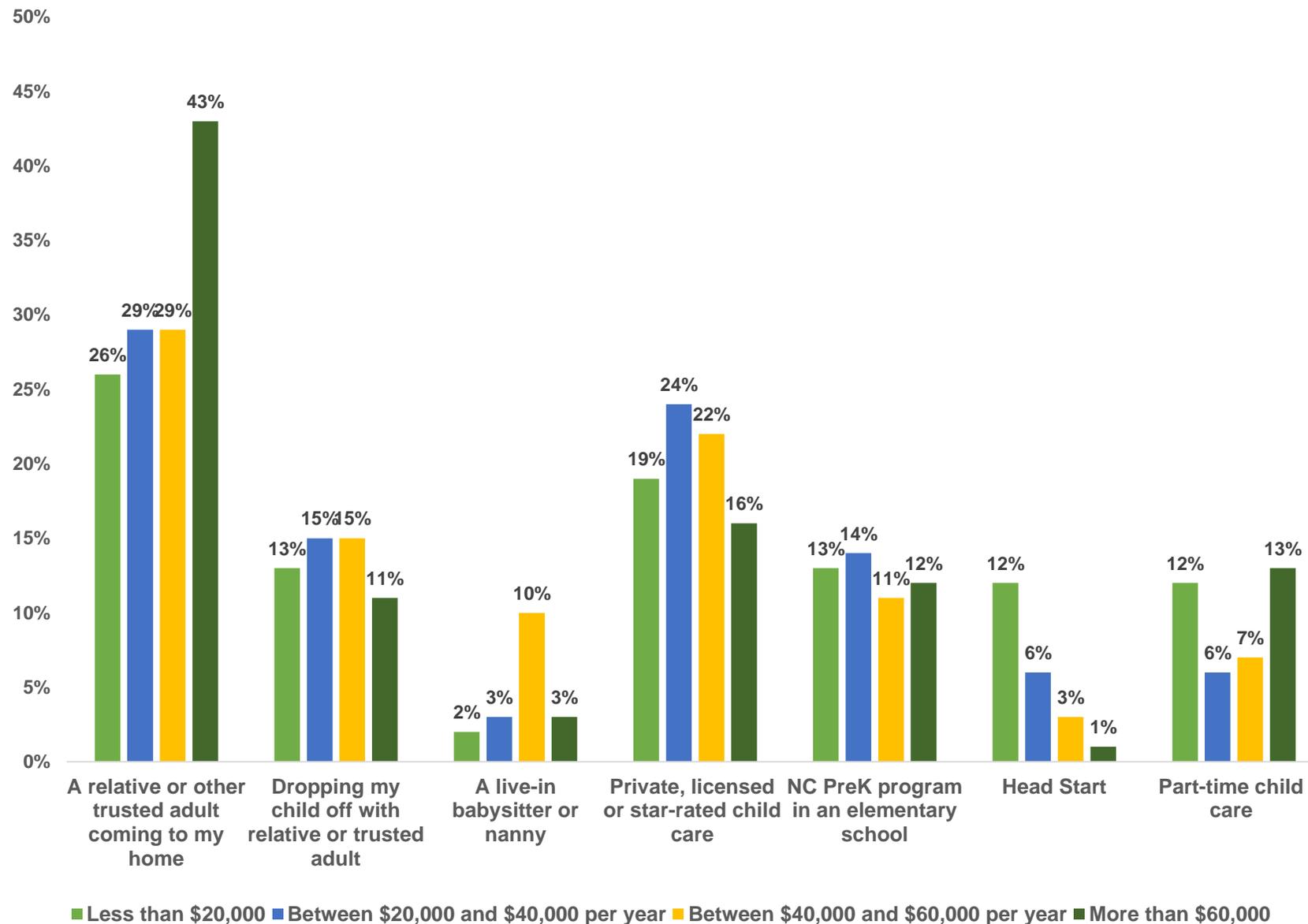
Of the 284 respondents who reported that they weren't happy:

Overall, 82% reported that other arrangements were too expensive



Overall, 31% of respondents prefer a relative or other trusted adult, who comes to the home.

21% prefer private, licensed or star-rated child care.



Take Away Message #4

Parents have difficulty finding child care.

75% of respondents indicated they had experienced challenges in finding child care

Of the parents who reported having 5 year old children, there were challenges reported in **each year**:

31% had challenges finding infant care

33% had challenges finding care for their one-year old

32% had challenges finding care for their two-year old

37% had challenges finding care for their three-year old

37% had challenges finding care for their four-year old

Take Away Message #5

Several factors may affect the decision to use FFN care.

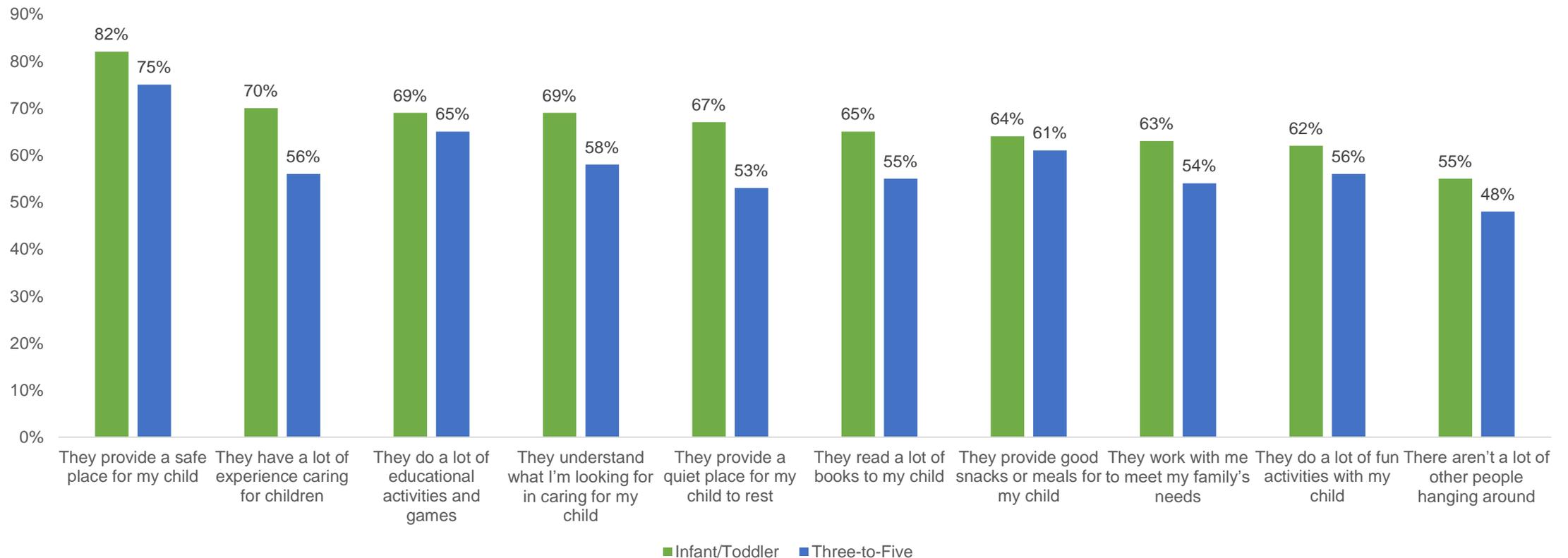
Safety and quality were important to respondents

Other factors include cost, convenience, trust, and dependability

	Average rank (1 is high, 5 is low)
Knowing my child will be safe	1.8
The quality of care my child will get	2.2
How much it costs	3.6
Knowing the providers share my beliefs or values	4.4
The location, and how easy or difficult it is for me to get there	4.5
The setting my child will be in, and whether they'll be in someone's home, in a classroom, or a childcare center	4.6

Take Away Message #6

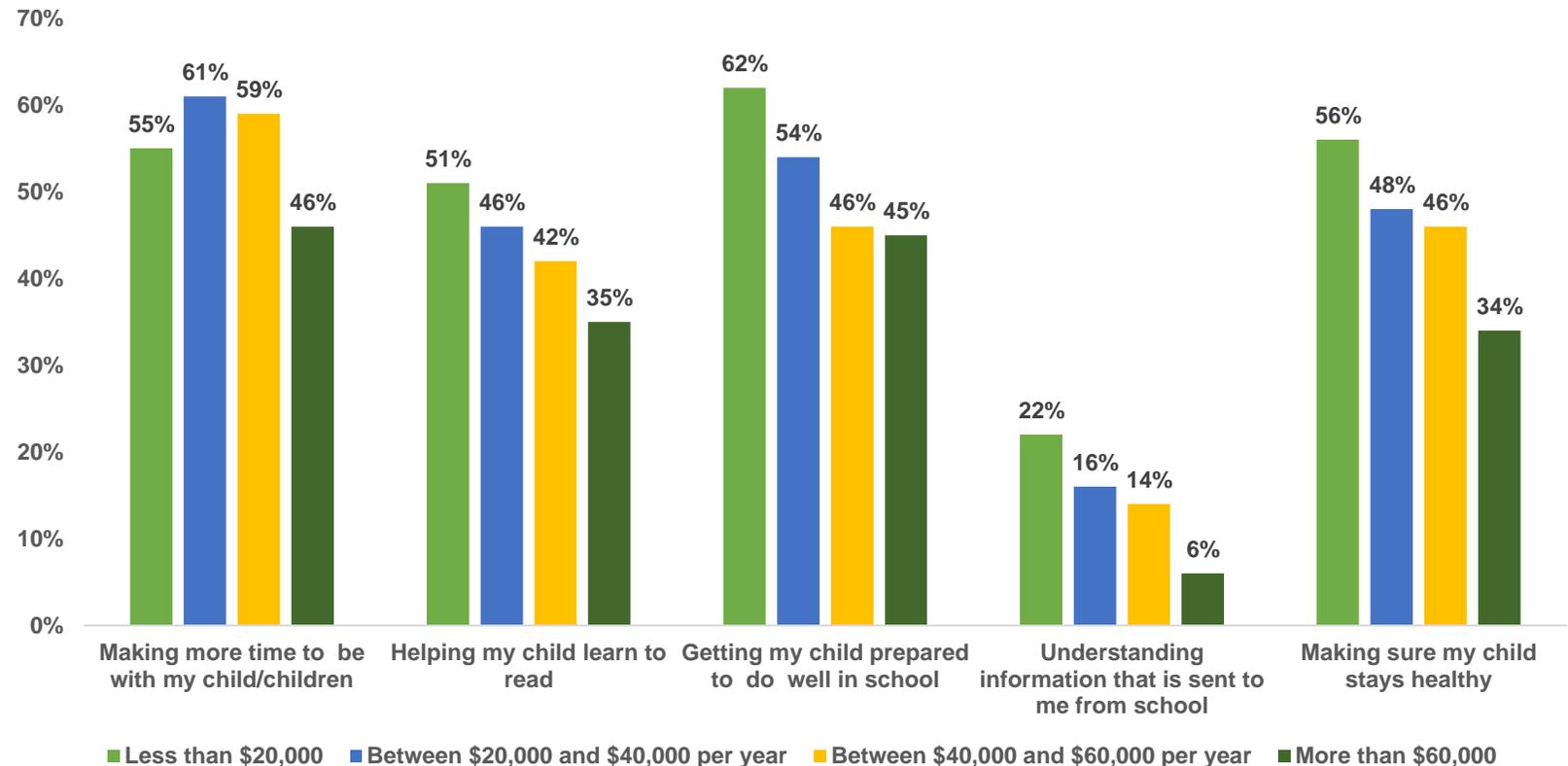
There is a need to decide what we mean by **QUALITY** in FFN care.



Take Away Message #7

Parents need support—on a range of issues.

Overall, 49% of respondents wish for more time to be with their child or children, while 46% wish for support in getting their child prepared to do well in school



FFN Literature Review

What types of supports are available for FFN care providers?

What does the NC legal and regulatory context mean for our work to support FFN care providers?

What are the common themes from emerging best practice in the field of FFN care support?

How do other communities approach FFN care?

Types of FFN Care Supports

These supports build caregiver capacity, improve quality of care, and cultivate opportunities for formal inclusion in the childcare system.

- **Distribution of materials and equipment**
- **Play and Learns**
- **Training programs**
- **Home visiting with caregivers**
- **Building social and peer learning networks**
- **Leadership and advocacy**
- **Connecting caregivers to formal early childhood system**

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Common Themes in Best Practice

FFN supports should:

- **Take a holistic approach by considering this work to be at the intersection of family support, child care, and education, particularly given the fluidity of the roles of FFN caregivers in families' lives.**
- **Be culturally aware and adaptive, especially regarding language and FFN as a culturally-informed choice for families. Families may choose FFN care as an avenue to instill cultural values, or to ensure that the care received is in keeping with their values.**

Common Themes in Best Practice

FFN supports should:

- **Use an assets and strengths-based perspective in working with FFN caregivers, a population often misconceived as providing unsafe and inferior care that is only utilized when center-based care is unavailable.**
- **Seek to understand how FFN caregivers identify themselves and their role; culture, relationship with parent, compensation, education, professional interests, legal and regulatory landscapes, and individual circumstance all play a role.**

Common Themes in Best Practice

FFN supports should:

- **Consider the role of community-based organizations as intermediaries/partners by leveraging their relationships and resources and enhancing their capacity to target services to FFN caregivers in their community.**
- **Use a relationship-centric approach by developing individual relationships with FFN caregivers or leveraging the relationships of existing community leaders and informal networks. Where infrastructure is thin, cultivate leaders and develop informal relationship networks.**

Common Themes in Best Practice

FFN supports should:

- **Adopt creative outreach strategies to reach FFN caregivers, as many are not connected to formal child care systems and legal/regulatory landscapes can make caregiver identification difficult.**
- **Utilize home-based, neighborhood-based, and/or community-based methods of service delivery, as FFN caregivers are more likely to engage with trusted individuals or local groups than with formal institutions.**

Example of Strong FFN Support:

PASO (Providers Advancing School Outcomes)

Colorado Statewide Parent Coalition

- **Goal:** To promote school readiness for Latino children in order to prevent the achievement gap between Latino and non-Latino children entering kindergarten.
- **Primary support:** 12-month, 120 hour intensive professional development program for Latino FFN caregivers in a group setting
- **Secondary/additional supports:** Peer networking, home visiting, opportunities for national, non-governmental credentialing, distribution of materials

Care Provider Survey Respondent Profile

Gender

78% of respondents were female

Age

32% of respondents were between
20 and 29

35% were between 30 and 39

Race/Ethnicity

38% of respondents were African-
American

36% were white (non-Hispanic)

16% were Hispanic/Latino

Care Provider Survey Respondent Profile

Education

28% of respondents had high school diploma

24% had “some college”

16% had a two-year degree

29% had a four-year degree or higher

Marital Status

37% of respondents were single

45% were married

Care Provider Survey Respondent Profile

Income

22% of respondents earned less than \$20k, per year

47% earned \$20k to \$40k

25% earned \$40k to \$60k

6% earned more than \$60k

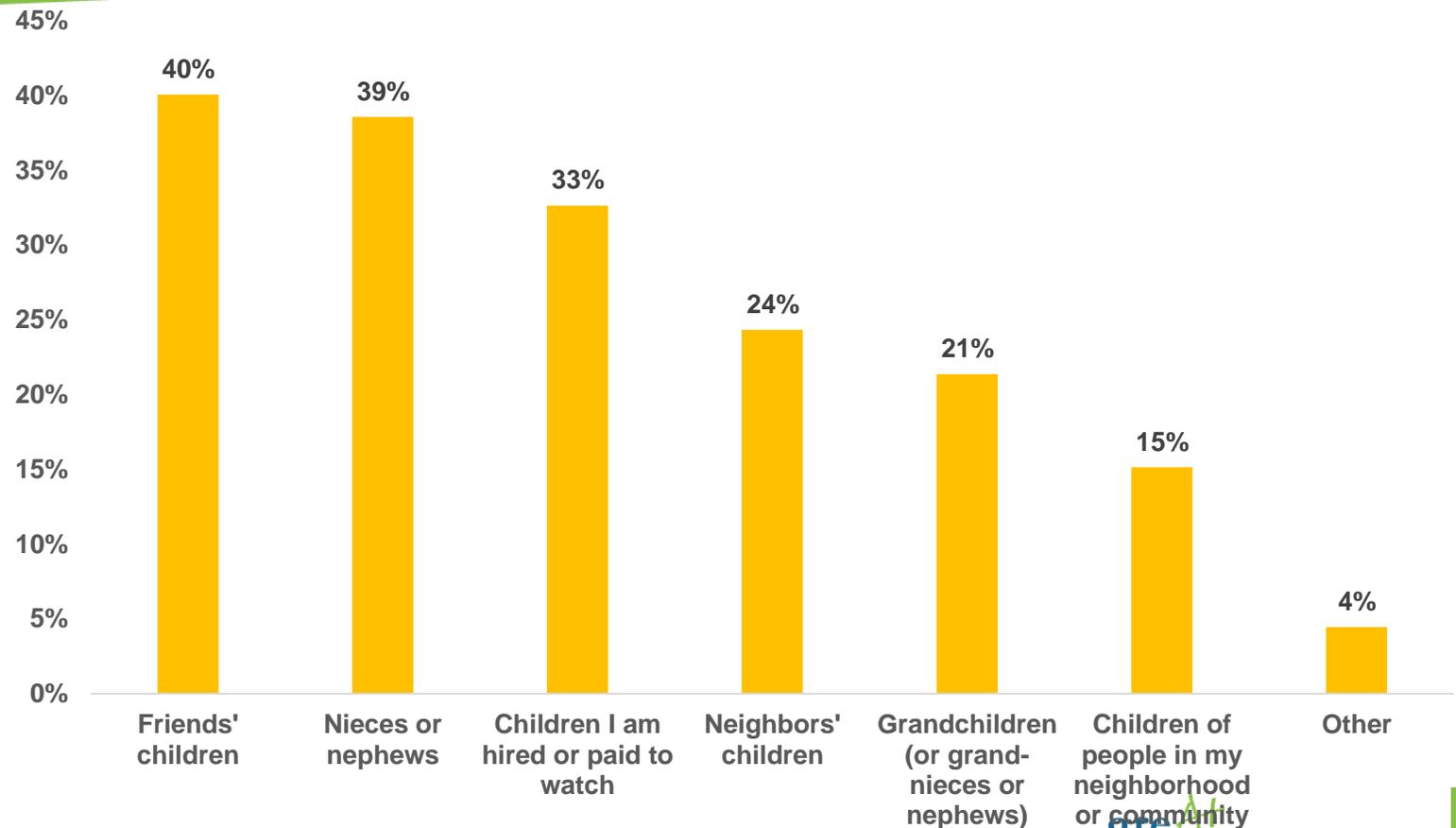
Employment

64% of respondents were employed full- or part-time

Take Away Message #8

FFN care providers may not identify themselves as “formal” care providers.

40% of respondents (n=337) reported providing care for friends' children, followed by 39% who reported providing care for nieces or nephews

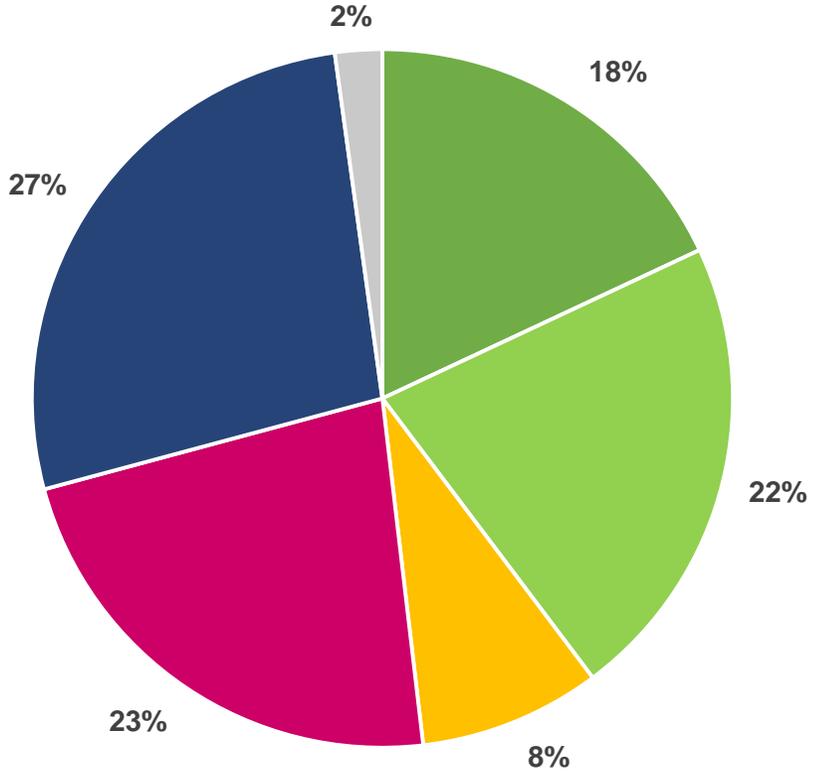


27% of respondents reported that they were asked by family members

23% reported that they were asked by friends or neighbors

22% reported it was a way to earn money

How did you come to be a care provider for these children?

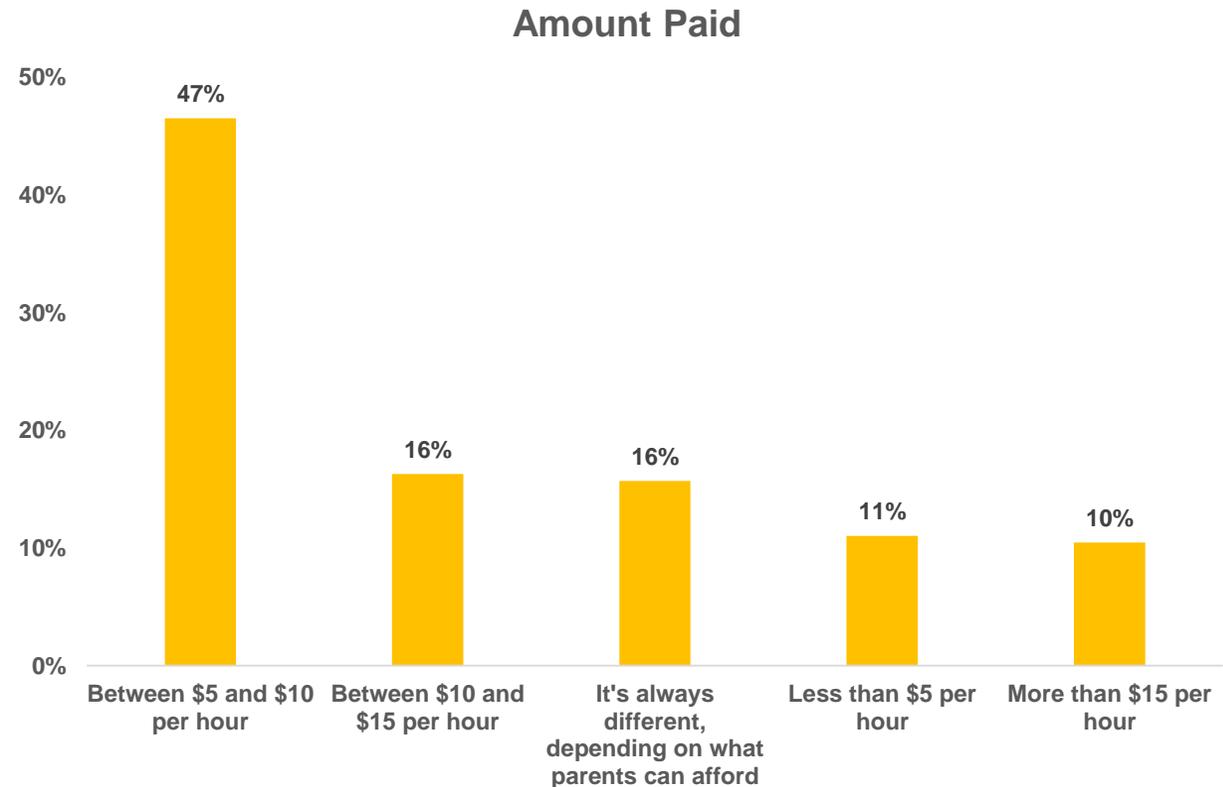


- I volunteered so that I could help out
- I wanted to take care of children
- I was asked by my family
- I wanted to earn money taking care of children
- I was asked by friends or neighbors
- Other

Take Away Message #9

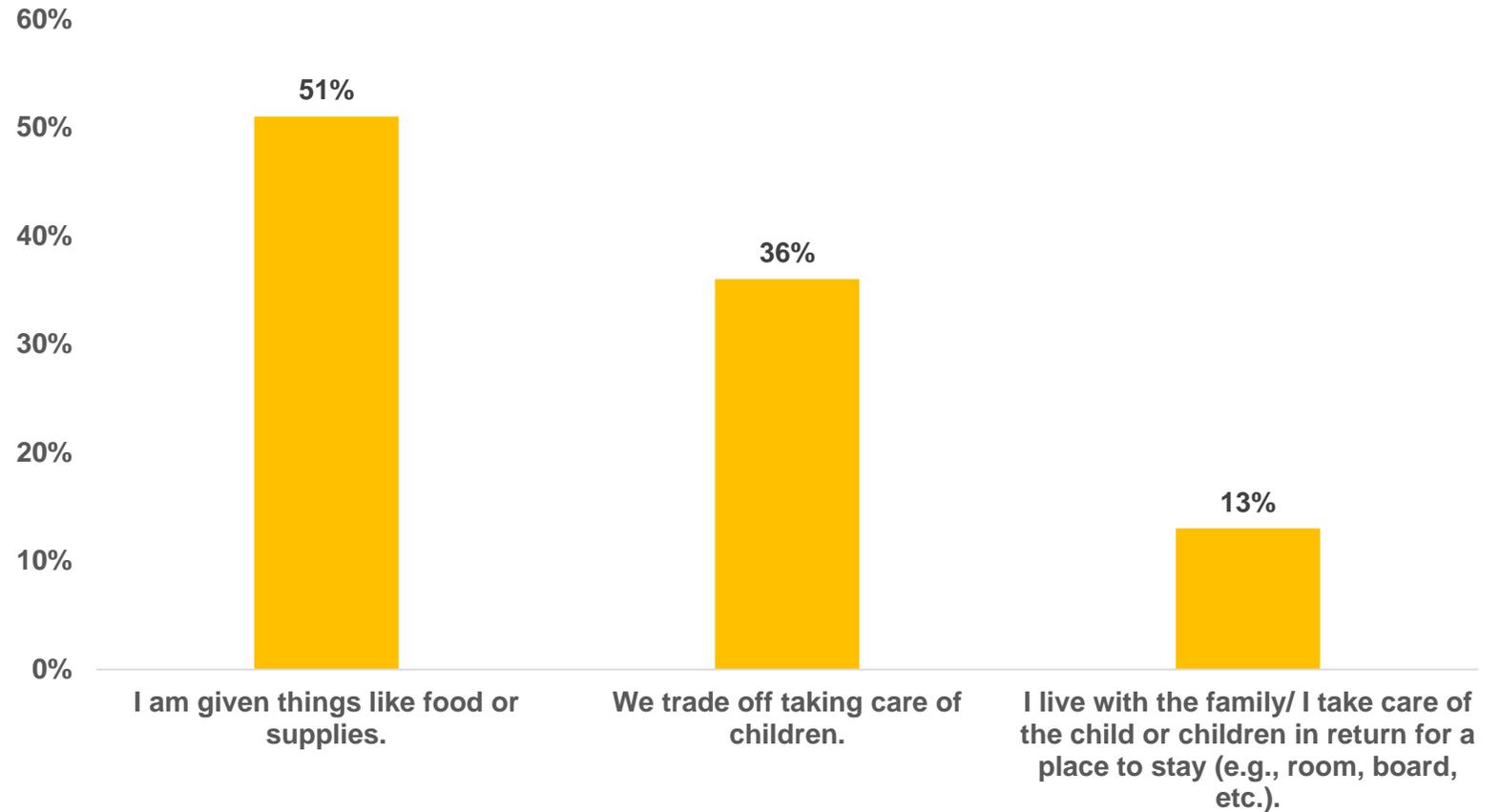
Care providers tend to receive compensation (monetary or trade) for the care they provide—compensation tends to be relatively small.

64% of respondents reported they received payment



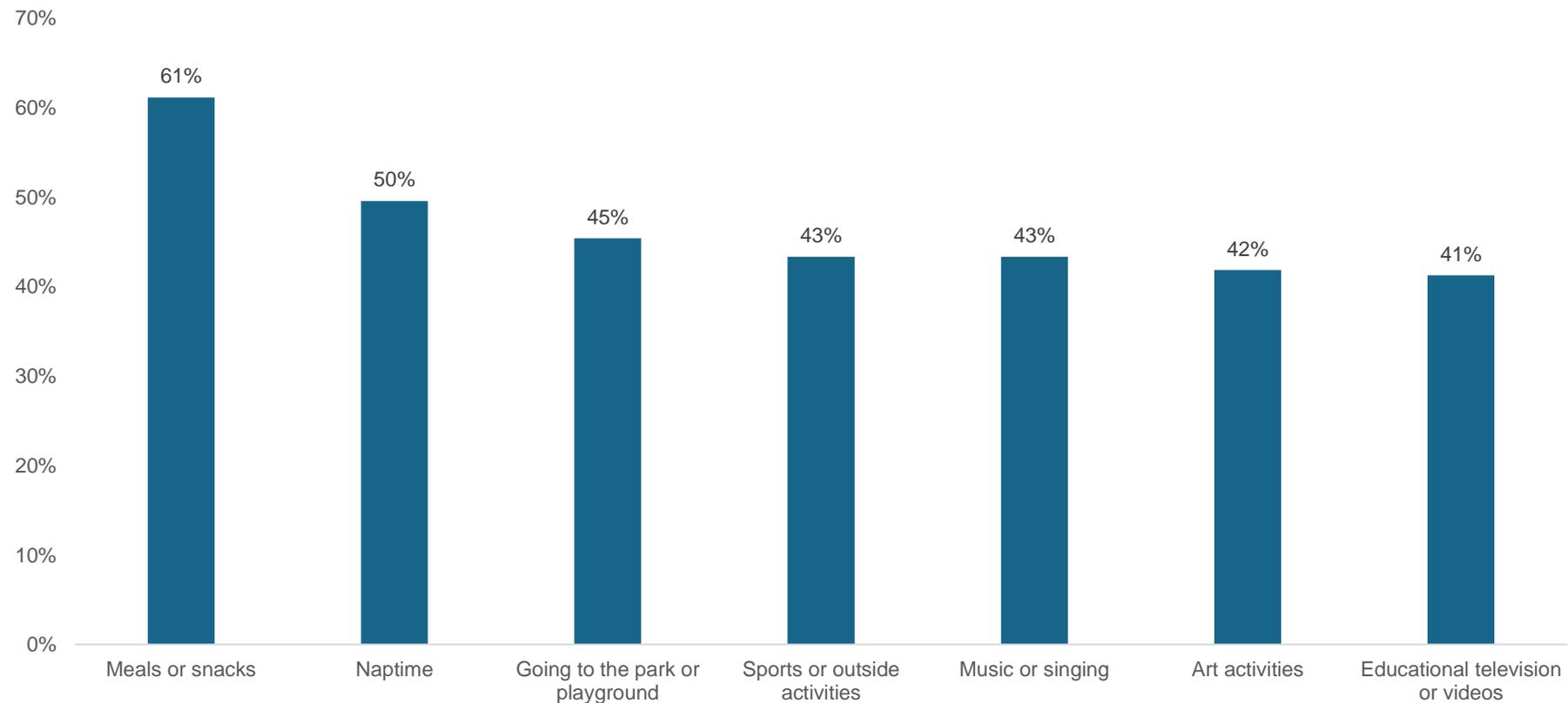
33% of respondents reported they received something in trade

Resources or Items Traded



Take Away Message #10

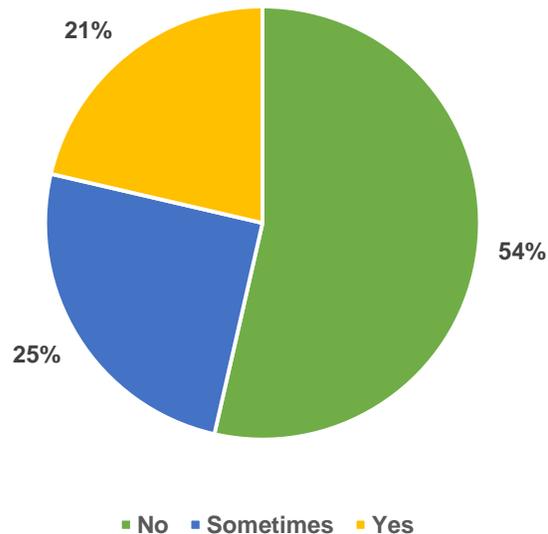
Care providers report a variety of activities for children, provided on a “regular basis.”



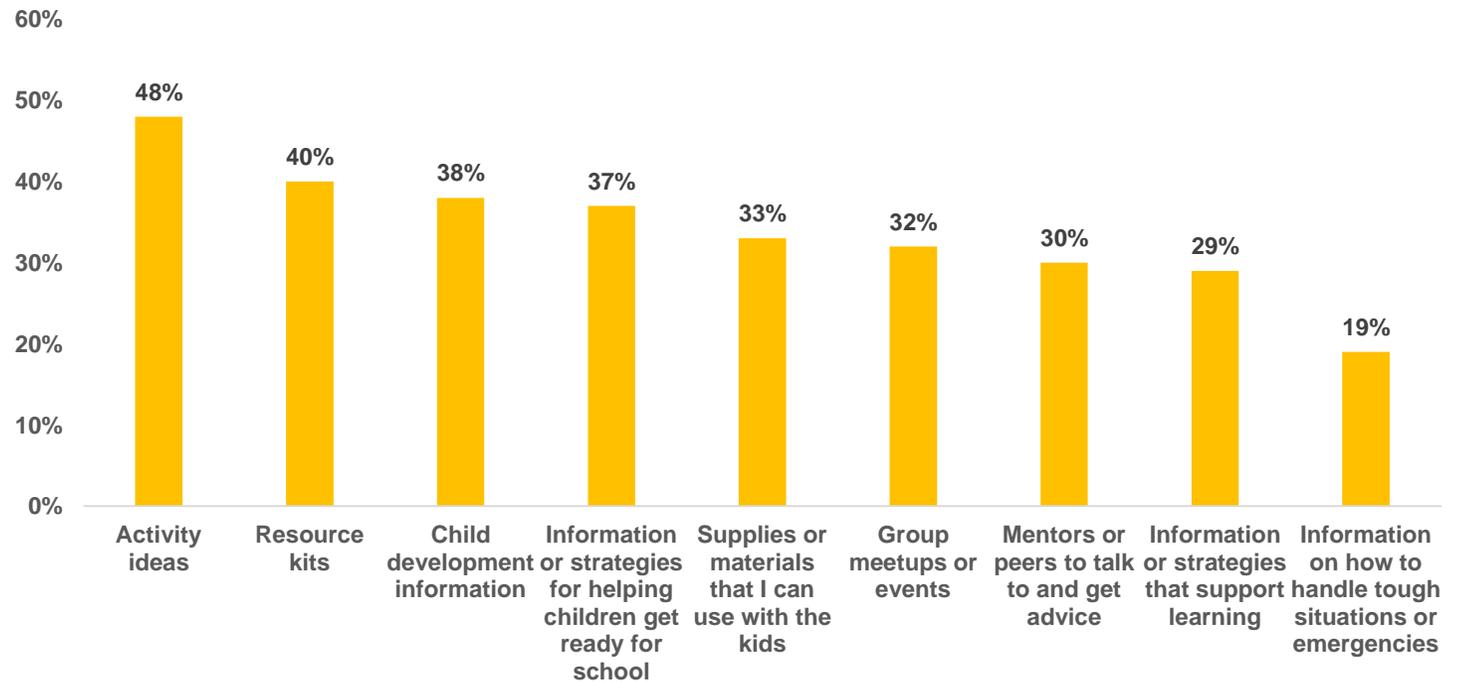
Take Away Message #11

The majority of care providers do not report wanting or needing help to care for other parents' children.

Do you ever find yourself wanting or needing help when you care for or watch other parent's children?

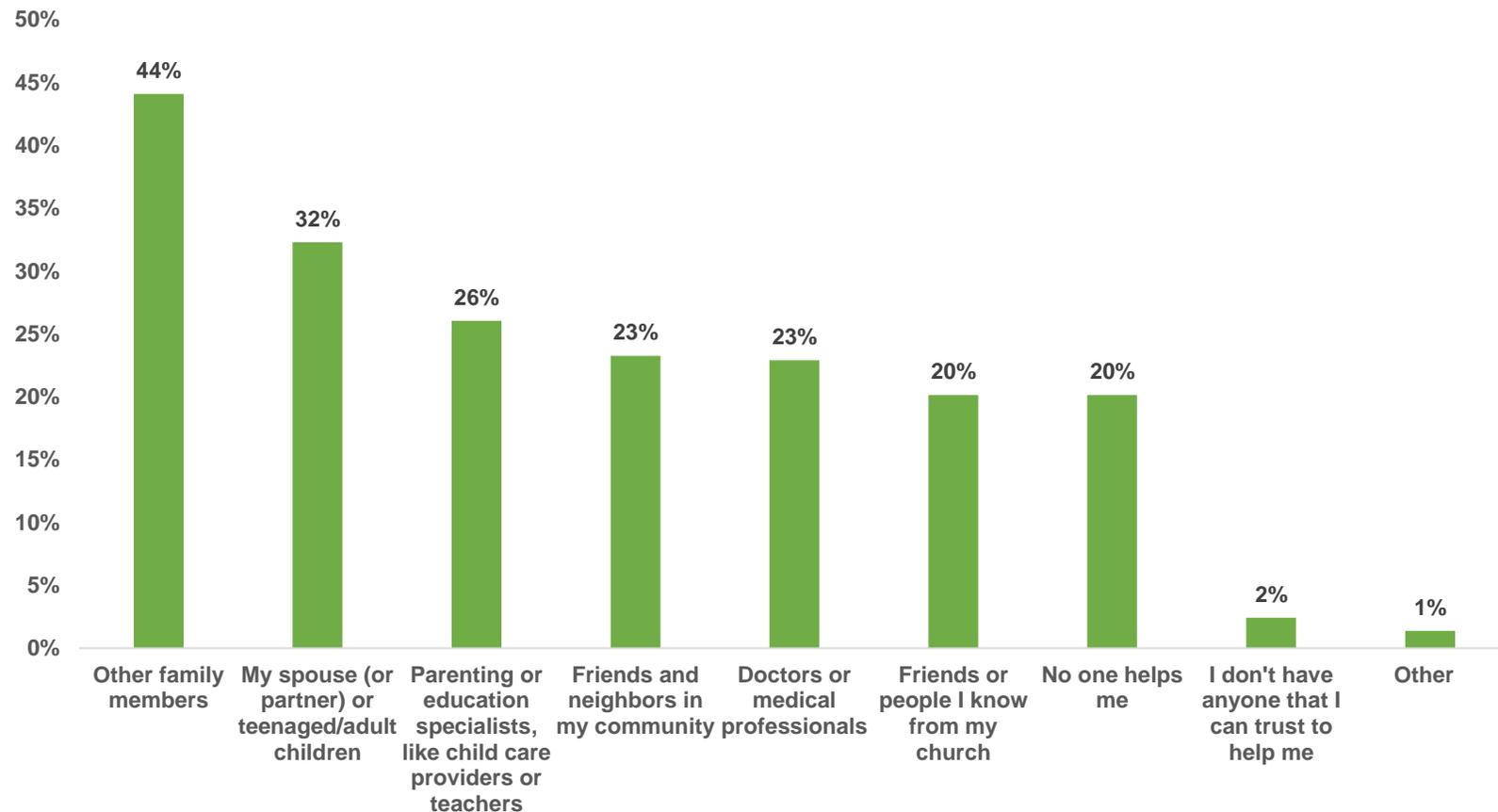


What type or types of help do you want or need?



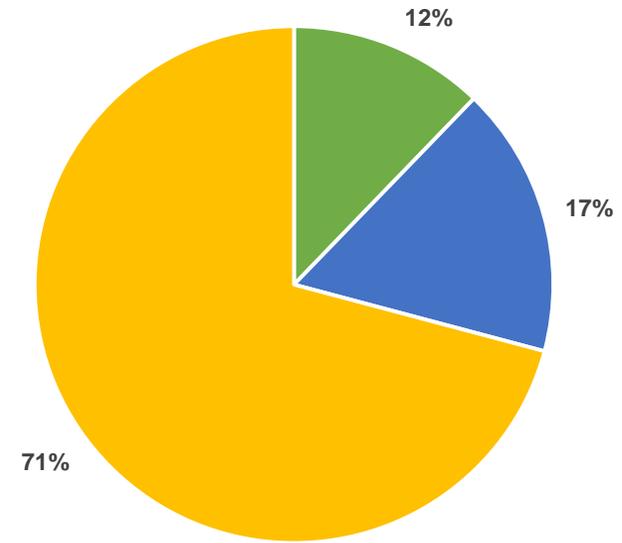
When care providers do need help, they tend to turn to other family members

Who do you trust to give you help with the children you care for, if or when you need it?



Caregivers tend to find providing care rewarding.

Is caregiving rewarding?



- No, not really
- Sometimes, it depends on the day and the child or children I am caring for
- Yes, all or most of the time

**Your questions and
feedback**

**What ideas or questions
did this information
generate?**

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