

# ABSTRACTS OF RESEARCH REPORTS ON INFORMAL CHILD CARE

## TYPE OF INFORMAL CHILD CARE INFORMATION PROVIDED IN EACH RESEARCH REPORT

REPORT TITLE	Overall Usage and Trends in Child Care	Family Characteristics	Parental Preferences and Constraints	Child Care Costs	Provider Characteristics	Quality of Care/Experiences for Children and Parents	Impact of Welfare/Child Care Subsidy Policies
<b>Rural and Urban Families' Use of Child Care.</b> (1994). Alice M. Atkinson.	✓	✓	✓	✓			
<b>Child Day Care and the Employment of AFDC Recipients with Preschool Children.</b> (1993). Gary L. Bowen and Peter A. Neenan	✓	✓	✓			✓	
<b>Caring for Children in Low-Income Families: A Substudy of the National Child Care Survey, 1990.</b> (1993). April A. Brayfield, Sharon Gennis Deich, and Sandra L. Hofferth.	✓	✓	✓		✓		✓
<b>No Place Like Home: A Study of Subsidized In-Home and Relative Child Day Care.</b> (1991). Joyce Butler, Nancy Brigham, and Susan Schultheiss.			✓		✓	✓	✓
<b>Child Care Arrangements for Children Under Five: Variation Across States.</b> (2000). Jeffrey Capizzano, Gina Adams, and Freya Sonenstein.	✓	✓	✓				
<b>Patterns of Maternal Employment and Child Care for a Sample of Two-Year-Olds.</b> (1992). Grace-Ann L. Caruso.	✓	✓				✓	
<b>What Does it Cost to Mind Our Preschoolers?</b> (1995). Lynne M. Casper.				✓	✓		
<b>Who's Minding Our Preschoolers?</b> (1997). Lynne M. Casper.	✓	✓	✓				
<b>From a Parent's Point of View: Measuring the Quality of Child Care.</b> (1999). Arthur C. Emlen, Paul E. Koren, and Kathryn H. Schultze.		✓	✓		✓	✓	✓
<b>Part-Time Work and Child Care Choices for Mothers of Preschool Children.</b> (1993). Karen Fox Folk and Andrea H. Beller.	✓	✓			✓		

**TYPE OF INFORMAL CHILD CARE INFORMATION PROVIDED IN EACH RESEARCH REPORT**

REPORT TITLE	<i>Overall Usage and Trends in Child Care</i>	<i>Family Characteristics</i>	<i>Parental Preferences and Constraints</i>	<i>Child Care Costs</i>	<i>Provider Characteristics</i>	<i>Quality of Care/Experiences for Children and Parents</i>	<i>Impact of Welfare/Child Care Subsidy Policies</i>
<b>For Love of Money: Costs of Child Care by Relatives.</b> (1994). Karen Fox Folk.	✓	✓		✓	✓		
<b>Remember the Children: Mothers Balance Work and Child Care Under Welfare Reform.</b> (2000). Bruce Fuller, Sharon Lynn Kagan, et al.	✓		✓		✓	✓	✓
<b>The Study of Children in Family Child Care and Relative Care: Highlights of Findings.</b> (1994). Ellen Galinsky, Carollee Howes, Susan Kontos, and Marybeth Shinn.		✓	✓	✓	✓	✓	
<b>GAIN Family Life and Child Care Study.</b> (1991). Neil Gilbert, Jill Duerr, and Marcia K. Meyers.	✓	✓	✓			✓	✓
<b>National Child Care Survey, 1990.</b> (1991). Sandra L. Hofferth, April Brayfield, Sharon Deich, and Pamela Holcomb.	✓	✓	✓	✓	✓	✓	
<b>Grandparents who parent their grandchildren: Effects on Lifestyle.</b> (1993). Margaret Platt Jendrek.					✓		
<b>Determinants of Child Care Ideals Among Mothers of Preschool-Aged Children.</b> (1989). Karen Oppenheim Mason and Karen Kuhlthau.	✓	✓	✓				
<b>Child Care in JOBS Employment and Training Programs: What Difference Does Quality Make?</b> (1993). Marcia Meyers.	✓						✓
<b>Characteristics of Infant Child Care: Factors Contributing to Positive Caregiving.</b> (1996). NICHD Early Child Care Research Network.					✓	✓	
<b>Poverty and Patterns of Child Care.</b> (1997). NICHD Early Child Care Research Network.	✓	✓				✓	✓

**TYPE OF INFORMAL CHILD CARE INFORMATION PROVIDED IN EACH RESEARCH REPORT**

REPORT TITLE	<i>Overall Usage and Trends in Child Care</i>	<i>Family Characteristics</i>	<i>Parental Preferences and Constraints</i>	<i>Child Care Costs</i>	<i>Provider Characteristics</i>	<i>Quality of Care/Experiences for Children and Parents</i>	<i>Impact of Welfare/Child Care Subsidy Policies</i>
<b>Patterns and Growth of Child Care Voucher Use by Families Connected to Cash Assistance in Illinois and Maryland: A Report of the NCCP Child Care Research Partnership.</b> (1999). Jessica Brickman Piecyk, Ann Collins, and J. Lee Kreader.	✓	✓			✓		✓
<b>Neighborhood Child Care: Relatives Friends and Neighbors Talk about Caring for Other People’s Children.</b> (1998). Toni Porter.			✓		✓	✓	
<b>Some economic complexities of child care provided by grandparents.</b> (1989). Harriet B. Presser.	✓	✓		✓	✓		
<b>Child Care and AFDC Recipients in Illinois: Patterns, Problems and Needs.</b> (1991). Gary L. Siegel and L. Anthony Loman.	✓	✓	✓	✓	✓	✓	✓
<b>REACH/JOBS Participants “Approved Home” Child Care Survey.</b> (1991). Janet Rosenzweig Smith.		✓	✓		✓	✓	
<b>Statistics in Brief: Child Care and Early Education Program Participation of Infants, Toddlers, and Preschoolers.</b> (1996). Jerry West, Dee Ann Wright, and Elvie Germino Hausken.	✓	✓	✓				
<b>Raised in East Urban: Child Care Changes in a Working Class Community.</b> (1991). Caroline Zinsser.	✓	✓	✓	✓	✓	✓	

**Rural and Urban Families' Use of Child Care. (1994). Alice M. Atkinson.**  
*Family Relations*, 43(1), pp. 16–22.

- Subject categories** Usage and Trends; Family Characteristics; Parental Preferences/Constraints; Child Care Costs
- Purpose of report** This report provides information on rural families' selection and use of child care and compares it with child care use by urban families in the same Midwestern county.
- Study design**
- Data sources:* Telephone interviews of 982 mothers
- Year(s) of data collection:* 1990–1993
- Data collection sites:* 11 rural communities and an urban center in the same Midwestern county
- Sample design:* Randomly selected samples from birth certificates and newspaper announcements in rural and urban communities
- Target group:* Mothers who gave birth in a Midwestern county between May 1984 and April 1990
- Sample size:* 199 rural mothers and 763 urban mothers
- Data collection method:* Telephone interviews
- Definition of child care:* All child care provided to all children in the respondent's household
- Types of child care included in study:* Relative care; in-home care; family child care; center-based care (e.g., child care centers and preschools); and other care arrangements
- Definition of informal child care:* Relative care and in-home care
- Notes/limitations:* Fewer low-income families may have been contacted because they were less likely to have telephones.
- Relevant findings**
- **Rural mothers were significantly more likely than urban mothers to use relative care (45 percent versus 36 percent), especially for children under age two.** Among rural families, relatives provided care outside the child's home for 42 percent of the children under age two, 25 percent of the preschoolers, and 15 percent of the school-age children. For urban families, the percentage of relative care provided outside the child's home was fairly constant across age groups. Urban families were twice as likely as rural families to use in-home sitter child care for children under age two.
  - **Almost two-thirds of both rural and urban families paid for child care, with fewer relatives receiving pay than nonrelatives.** Seventy percent of relatives who provided care in the child's home and 84 percent of relatives providing care outside the child's home did not charge for care.
  - **Both rural and urban mothers identified and selected caregivers from among personal acquaintances or relatives or based on the recommen-**

**dition of a friend or co-worker.** Caregivers who were personally known to the mothers were more often selected by both rural and urban mothers when care was needed for reasons other than employment. Child care was used for employment about half the time by both rural and urban mothers.

**Child Day Care and the Employment of AFDC Recipients with Preschool Children.** (1993). Gary L. Bowen and Peter A. Neenan. *Journal of Family and Economic Issues*, 14(1), pp. 49–68.

**Subject categories** Usage and Trends; Family Characteristics; Quality of Care

**Purpose of report** This article examines the degree to which expanding the supply of publicly subsidized child care in local communities may promote, through employment, independence from welfare and economic self-sufficiency for AFDC recipients with children under age five. It analyzes the job-related attitudes and behaviors of AFDC recipients to determine preferences for and use of child care resources, the extent to which they perceive lack of available child care to be a barrier to employment, and their interest in a special initiative that would find child care for their children and fund some or all of its cost while they pursue full-time work.

**Study design** *Data sources:* AFDC recipients enrolled in a demonstration program designed to expand subsidized child care to parents with children under age five

*Year(s) of data collection:* 1989

*Data collection sites:* Mecklenburg County, North Carolina

*Sample design:* Systematic random sample of AFDC cases meeting the target group criteria selected from the North Carolina Department of Human Resources AFDC master check file

*Target group:* AFDC recipients (not exempt from WIN or CWEP work requirements) with at least one unsubsidized child under age five

*Sample size:* 46 employed and 186 unemployed AFDC recipients

*Data collection method:* Semi-structured telephone interviews with parents

*Definition of child care:* Primary child care arrangements used by youngest child while the respondent works

*Types of child care included in study:* Parental care; sibling care; relative care; care by friends, neighbors, and sitters (i.e., in-home care and unregulated family child care); and organized child care facilities (e.g., child care centers and preschools)

*Definition of informal child care:* Parental and sibling care; relative care; and care by friends, neighbors and sitters

*Notes/limitations:* Working telephone numbers only established for 48 percent of initial sample; interviews administered to 79 percent of these families.

- Relevant findings**
- **A majority of the employed AFDC mothers relied on an informal provider to care for their youngest child while they worked.** Among the 89 percent who relied on nonparental/sibling care, 68 percent used a relative (46 percent), sitter (12 percent), or friend or neighbor (10 percent) for their youngest child's primary child care arrangement. Thirty-two percent of these mothers primarily relied on formal care arrangements, such as care within regulated family child care homes, centers, and preschools.
  - **When unemployed AFDC mothers were asked who would likely care for their youngest child if they were to work, only 36 percent said they would rely primarily on organized child care facilities.** Thirty-nine percent reported they would turn to one of the child's grandparents (22 percent), other relatives (11 percent), a friend/neighbor (4 percent), or sitter (2 percent). Another 1 percent said they would have the child's other parent provide care while they worked, and 24 percent said they would not have any child care provider help them.
  - **Among employed AFDC mothers, mothers who worked evening and night shifts were significantly more likely than mothers who worked day-shifts to rely on an informal child care arrangement for their youngest child.** While 59 percent of day-shift workers relied on an informal arrangement (including parental and sibling care), 94 percent of evening and night-shift workers used this type of care.
  - **Employed AFDC mothers who used informal care arrangements (including parental and sibling care) did not significantly differ from employed AFDC mothers who used organized facilities on several key demographic characteristics.** Data suggested that they did not statistically differ in their education level, whether they worked full-time or part-time, the days of the week that they usually worked, or the number of months they had been employed. There were also no significant differences in the age of their youngest child.
  - **Employed AFDC mothers relying on formal providers were more likely to be satisfied with their child care arrangements than employed AFDC mothers using informal arrangements (including parental and sibling care).** Analysis by the type of main provider showed that a higher proportion of respondents using organized facilities preferred their present arrangement (91 percent) than those using informal sources of care (52 percent).

**Caring for Children in Low-Income Families: A Substudy of the National Child Care Survey, 1990.** (1993). April A. Brayfield, Sharon Gennis Deich, and Sandra L. Hofferth. Urban Institute Press, 2100 M Street, NW, Washington, DC 20037. (877) 847-7377 (120 pp.; \$24.50 + \$3 p/h).

- Subject categories** Usage and Trends; Family Characteristics; Parental Preferences/Constraints; Provider Characteristics; Impact of Subsidy Policies
- Purpose of report** This report examines the child care arrangements of low-income children under age 13. Three fundamental issues are investigated: (1) types of child care arrangements used by low-income families, (2) the amount low-income families spend on child care, and (3) the child care preferences of low-income parents.
- Study design**
- Data sources:* Sub-sample of the National Child Care Survey (NCCS) and its low-income supplement
- Year(s) of data collection:* 1990
- Data collection sites:* NCCS: 100 counties/county groups in the U.S. with a high proportion of children under five years of age. Low-income supplement: telephone prefix areas within these counties that had a median household income below \$15,000
- Sample design:* Random-digit-dial sample of households within the data collection sites
- Target group:* NCCS households with one or more children under age 13 and an annual income below \$15,000
- Sample size:* 973 low-income households with 1,751 children under age 13
- Definition of child care:* Primary child care arrangement used by all children under age 13. These arrangements are not limited to those made while the mother works. They include all regularly scheduled arrangements mothers make when they are not available and/or in order to provide an enriching experience for their child(ren).
- Types of child care included in study:* Parental care; relative care; in-home care; family child care; center-based care; and other types of child care arrangements (e.g., lessons, sports, clubs, and self-care)
- Definition of informal child care:* Care by relatives and in-home care providers
- Data collection method:* Computer-assisted telephone interviews conducted with parents
- Relevant findings**
- **Among low-income children using nonparental child care, almost half (46 percent) relied on an informal provider for their main child care arrangement.** Trends in informal child care usage did not vary significantly by age of child, although slightly more school-age children relied on in-home care providers. Forty-two percent of the children under age five and 38 percent of the school-age children were cared for by a relative, and 4 and 8 percent, respectively, of these children were cared for by an in-home care provider.

- **Most relative care was provided by grandparents, especially when this care was being provided for younger children.** For those children under age five cared for primarily by a relative, 76 percent had a grandparent as their primary child care provider. Grandparents provided care for 55 percent of the school-age children who used relative care as their primary child care arrangement.
- **Among low-income children using nonparental child care, school-age children in single-parent households were more likely to use informal providers as their primary source of child care than school-age children in dual-parent households.** Forty-two percent of the school-age children living in single-parent households used relative care, while only 37 percent of the school-age children in dual-parent households used this type of care. There were no significant differences in the use of informal child care by children under age five living in single versus dual-parent households.
- **Among low-income children using nonparental child care, maternal employment status and participation in education and training programs were highly correlated with whether families used informal care for their primary form of child care assistance.** These trends varied with the child's age. For children under age five, informal child care options were used by 55 percent of children of unemployed mothers not attending education or training programs, 40 percent of the children of employed mothers, and 36 percent of the children of unemployed mothers attending education or training programs. For the school-age children, informal child care options were used by 36 percent of children of unemployed mothers and 54 percent of children of employed mothers.
- **Among low-income children using nonparental child care, children of mothers working full-time were more likely to use relative care than those of mothers working part-time.** These trends were similar for children under age five and school-age children, although school-age children of employed mothers were more likely to use relative care in general. For the children under age five, 41 percent with full-time working mothers used relative care, compared with 34 percent with part-time working mothers. For school-age children, 49 percent with full-time working mothers used relative care, compared with 44 percent with part-time working mothers.
- **Among low-income children using nonparental child care, families receiving direct financial assistance for their youngest child were much less likely than those not receiving such assistance to use relative care (21 percent versus 67 percent), and much more likely to use center care (72 percent versus 16 percent).** Similarly, families using center care as the main arrangement for their youngest child were much more likely to report receiving financial assistance (43 percent) than those relying on family day care homes (6 percent) or relatives (5 percent).
- **Among low-income families using nonparental care for a child under age five, parents were most highly satisfied with the youngest child's main arrangement if a relative cared for their child (81 percent were**

“highly satisfied”). Parents of children under age five were least satisfied with center care, although they were still quite satisfied in general (60 percent were “highly satisfied”).

- **At the same time, low-income families relying on relatives as the main child care provider for their infant to four-year-old child were the most likely to want to change arrangements (36 percent), while low-income families relying on center care were the least likely to want a change (19 percent).** Furthermore, the majority of parents who wanted to change child care arrangements (68 percent) preferred center-based programs. Quality, not cost, was the reason cited most often by parents who preferred an alternative arrangement.

**No Place Like Home: A Study of Subsidized In-Home and Relative Child Day Care.** (1991). Joyce Butler, Nancy Brigham, and Susan Schultheiss. Rosenblum and Associates. Distributed by the Rhode Island Department of Human Services, Louis Pasteur Building #57, 600 New London Avenue, Cranston, RI 02920. (401) 462-3415/ Fax (401) 462-6878. (76 pp. + appendices; Free).

**Subject categories** Parental Preferences/Constraints; Provider Characteristics; Quality of Care; Impact of Subsidy Policies

**Purpose of report** This report documents the results of a 1991 study undertaken by the Rhode Island Department of Human Resources’ (DHR) Office of Child Care to learn more about the characteristics of the in-home and relative child care providers from whom they purchased care. This study examines the experiences and level of quality within these child care settings, the types of support and training needed by these providers, and parental preferences and satisfaction. It also describes the system of care that exists in Rhode Island, explores the system of in-home and relative care in the other states, and examines the impact of federal policy on the system.

**Study design** *Data sources:* Child care providers enrolled in Rhode Island’s in-home and relative care subsidy system  
*Year(s) of data collection:* 1991  
*Data collection sites:* Rhode Island  
*Sample design:* Nonprobability sample of providers subsidized for providing child care in both August and September 1991. This represents an oversampling of low-income children and an undersampling of AFDC recipients in the system. Parent sample generated from the sample interviewed providers.  
*Target group:* Providers enrolled in Rhode Island’s in-home and relative care subsidy system and parents of children cared for by these providers  
*Sample size:* 50 providers (38 relative and 12 in-home providers) and 26 parents

**Data collection method:** Telephone interviews with parents and on-site observations and semi-structured in-person interviews with providers

**Definition of child care:** Insufficient information

**Types of child care included in study:** Relative and in-home care

**Definition of informal child care:** Relative and in-home care

**Notes/limitations:** Although considered informal, all providers in this sample had to go through Rhode Island's approval process to receive child care subsidies. Also, when observing provider homes, interviewers could not observe the entire house or even the complete contents of any one room.

#### Relevant findings

- **A majority of the providers interviewed had not taken any college or post-secondary education courses, and a significant proportion did not have a high school diploma.** Overall, 41 percent of the providers had not completed high school, 44 percent were high school graduates or had earned a GED, and 15 percent had some college or post-secondary education. About one-quarter of the providers reported some special training in child care or parenting. However, specific instances of training tended to be ancillary, such as Cardiopulmonary Resuscitation training (CPR), or conducted during a single day, such as a workshop given at a local department store.
- **The average age of the providers was 48 years with a considerable difference between relatives and in-home providers.** The average age for relatives was 54 years, while in-home providers averaged 36 years. Most of the relative providers were grandparents of the children for whom they cared.
- **More than one-third of the providers cared for children before 7 a.m. or after 6 p.m.** The maximum number of subsidized children in the care of any one provider was four, and the average was two.
- **Almost all of the providers learned about the in-home and relative care subsidy program from the mother of the child(ren) for whom they were caring.** Overall, providers were very positive about the subsidy program and about their dealings with the Rhode Island DHR. Most providers said that they were likely to continue to provide child care for the subsidized children after the availability of DHR funding ended. A majority (84 percent) said that, although they could manage if they were not reimbursed for child care, there might be some trade-offs involved. For example, they might have to cut down on food or find an additional source of income like caring for another child.
- **Virtually all the child care settings were clean and tidy, and nearly 60 percent of the homes were free of safety hazards such as open electrical outlets, peeling paint, or open windows.** Overall, observers found 48 instances of safety problems that affected a total of 21 homes.
- **Although almost all of the in-home and relative providers had toys in their homes, about 75 percent were noneducational.** All but a few homes had a television set and, in some homes, it appeared that the TV was always on, whether or not anyone was watching it. Books were observed in less than half of the homes visited.

- **Almost three-quarters of the providers reported that other adults (who may not have been submitted to a criminal records check) were likely to be present when the provider was caring for children.** In most of these cases, these other adults assisted with child care responsibilities with the likelihood being much greater among relatives (76 percent) than among in-home providers (24 percent).
- **Less than half of the providers said they had considered becoming a licensed family child care provider.** Urban providers were more interested than rural and suburban providers in changing their regulation status.
- Most of the in-home and relative providers said that child care training services would not be helpful to them, although 87 percent expressed interest in get-togethers or support groups to learn more about child care. Urban providers (92 percent) were more likely than rural/suburban providers (70 percent) to say they would be able to attend such sessions. A majority of parents thought it would be helpful for DHR to offer child care training for providers in the areas of discipline and child rearing (63 percent), and in health and nutrition (31 percent).
- **Most of the parents reported that in-home or relative care was the type of child care they preferred for their child.** Eighty-five percent of the parents did not consider another type of child care in making their decision to use in-home or relative care. Almost all of the parents had heard about the in-home and relative care subsidy option from their welfare office or welfare-to-work program. For 65 percent of the parents, this was the only type of subsidized care that was described to them. However, 70 percent said that helpful information was not withheld from them when they made their child care decision.

**Child Care Arrangements for Children Under Five: Variation Across States.** (2000). Jeffrey Capizzano, Gina Adams, and Freya Sonenstein. *The New Federalism: National Survey of America's Families, Series B, No. B-7.* The Urban Institute, 2100 M Street, NW, Washington, DC 20037. Report can be downloaded from the Urban Institute's Web site <<http://www.urban.org>> click on "Assessing the New Federalism").

<b>Subject categories</b>	Usage and Trends; Family Characteristics; Parental Preferences/Constraints
<b>Purpose of report</b>	This report provides information on the primary child care arrangements used by children under age five with employed mothers nationally and across a number of states. The impact of child age and family income on child care choices is also examined.
<b>Study design</b>	<i>Data sources:</i> National Survey of America's Families (NSAF) <i>Year(s) of data collection:</i> 1997

**Data collection sites:** National sample of U.S. households and individual samples of households in 12 states

**Sample design:** Random sample of U.S. households.

**Data collection method:** Parent interviews

**Target group:** Employed mothers with children under age five

**Sample size:** Over 44,000 households

**Definition of child care:** Primary child care arrangement used by one (randomly selected) child while the mother works

**Types of child care included in study:** Parental care; relative care; in-home care; family child care; and center-based child care

**Definition of informal child care:** Relative care and in-home care

**Notes/limitations:** Questions about parental care were not included in the survey, and parental care was assumed if no child care arrangement was reported. Parental care could be provided by another parent or by the working parent while working either at home or away from home. In California 34 percent of employed mothers reported using the “parental care” category of care.

#### Relevant findings

- **Over one-third of all children using nonparental care arrangements primarily relied on a relative (30 percent) or in-home care provider for their primary care arrangement each week.** Another 21 percent primarily relied on either regulated or nonregulated family child care, and 42 percent relied on center-based arrangements, including child care centers, Head Start programs, preschool, prekindergarten classes, and before/after-school programs.
- **National estimates of child care masked sizable state variation in the use of specific primary child care arrangements.** For example, among families using nonparental care, the percentage of young children in relative care ranged from 18 percent in Minnesota to 39 percent in California. In-home care usage ranged from 2 percent in Mississippi to 16 percent in New York. States also differed from each other in the distribution of children across all arrangements. This diversity was found even among states that were similar on one dimension of child care.
- **Nationally, infants and toddlers were more likely to be with relatives, while three- and four-year-olds were more often found in center-based arrangements.** Among infants and toddlers using nonparental care, 37 percent were in relative care, while smaller proportions were found in center-based care (30 percent), family child care (23 percent), and in-home care (10 percent). Over half (55 percent) of all preschoolers relied on center-based care, while only 21 percent used relative care as their primary child care arrangement. The three- and four-year-olds were also less likely than infants and toddlers to use family child care (17 percent) and in-home care (7 percent).
- **With regard to child age, national patterns generally held true across the individual states.** In every state, infants and toddlers were more likely than preschoolers to use relative care, while preschoolers were more likely to use center-based care. The proportion of children in each primary care

arrangement, however, varied widely from state to state for both age groups and, in Minnesota and Florida, infants and toddlers were more likely to use center-based care than care by relatives or any other single arrangement. Also, differences in usage of family child care and in-home care were not significant in some states, and, in Michigan, preschoolers were more likely than infants and toddlers to use in-home care.

- **Nationally, children from lower-income families were more likely to be in relative care arrangements, while children from higher-income families were more likely to be in center-based arrangements.** Among children using nonparental child care, 39 percent of those from families earning 200 percent of the federal poverty level or less were using relative care, compared with 25 percent of families earning above 200 percent of the federal poverty level. In-home care usage was low for all income groups, although usage increased as family income increased.
- **With regard to income, national patterns generally held true across the individual states.** However, there was great variety in the primary child care arrangements used by both low-income and higher-income children across the states. Also, contrary to national trends, more children from lower-income families in Massachusetts were in center-based care than children from higher-income families, who were more likely to use relative care.

**Patterns of Maternal Employment and Child Care for a Sample of Two-Year-Olds. (1992). Grace-Ann L. Caruso. *Journal of Family Issues*, 13(3), pp. 297–311.**

**Subject category** Usage and Trends; Family Characteristics; Quality of Care

**Purpose of report** This article demonstrates the need to treat child care and maternal employment as distinct variables, regardless of their apparent strong correlation. It suggests that, although projections of child care demand usually cite statistics on the number of mothers in the workforce, evidence indicates that a significant percentage of employed mothers rely on parental care.

**Study design** *Data sources:* Sample screener data from a large study of parent-caregiver relationships and toddler behavior  
*Year(s) of data collection:* 1989  
*Data collection sites:* 4 medium-sized communities in Connecticut: Meriden, Middletown, Norwich, and Willimantic  
*Sample design:* Random selection of 3,300 families who announced the birth of a child in their local newspaper from January through July 1987  
*Data collection method:* Semi-structured telephone interviews designed to identify families with two-year-old children who use some form of nonparental care  
*Target group:* Families with a two-year-old child  
*Sample size:* 464 families

**Definition of child care:** Primary child care arrangement used by respondent's two-year-old child

**Types of child care included in study:** Parental care; relative care; care by friends, neighbors and sitters (i.e., in-home care and unregulated family child care); family child care; and center-based care

**Definition of informal child care:** Relative care and care by friends, neighbors and sitters

**Notes/limitations:** The population from which the sample was drawn may not be representative of families of toddlers nationwide. Caution should be used in generalizing findings to other populations since variations found in the present sample are not consistent with national statistics on the extent of maternal employment and type of care used.

- Relevant findings**
- **Over two-thirds of families, including those where all parents residing in the household were employed and those with mothers who were not employed, used parental care as the primary care arrangement for their two-year-old.** Among parents who relied on nonparental care, 44 percent relied on informal arrangements, including relative care (28 percent) or care by a friend, neighbor, or sitter (16 percent). The remainder relied on formal arrangements such as a family child care home (40 percent) or child care center (16 percent).
  - **Employed mothers were more likely than nonemployed mothers to rely on nonparental child care arrangements, but half of them still used parental care as the primary child care arrangement for their two-year-old.** Among families with employed mothers who used nonparental care arrangements, 41 percent relied on informal care, either relative care (35 percent) or care by a friend, neighbor, or sitter (6 percent). The rest relied on a family child care home (43 percent) or child care center (16 percent).
  - **Increased hours of maternal employment were associated with increased use of formal child care resources.** The average number of hours of employment for mothers of toddlers in formal care settings (32.6 hours) was greater than the average number of hours of employment for mothers of toddlers in informal care settings (27.5 hours), and the average number of hours of employment for mothers with toddlers in informal care was greater than the average number of hours of employment for mothers of toddlers in parental care (21.7 hours).
  - **Informal care arrangements were the most commonly used form of supplemental (secondary) child care for toddlers.** Although a majority (76 percent) of the parents reported that they did not use supplemental care arrangements for their toddlers, 10 percent reported that they had relatives care for their toddlers to supplement their primary child care arrangement, and 7 percent have friends or neighbors provide this service. Formal child care resources, such as family child care homes or child care centers, were rarely reported as sources of supplemental care.

**What Does it Cost to Mind Our Preschoolers? (1995).** Lynne M. Casper. *Current Population Reports, Household Economic Studies, P70-52*. U.S. Department of Commerce, Washington, DC. Report and tables can be downloaded from the Census Bureau's Web site <<http://www.census.gov/population/www/socdemo/childcare.html>>.

<b>Subject category</b>	Child Care Costs; Provider Characteristics
<b>Purpose of report</b>	This report examines the characteristics of families with employed mothers who pay for child care for their children under five years of age. It includes tables on the average costs of child care for preschoolers by type of care used, as well as by various demographic factors.
<b>Study design</b>	<p><i>Data sources:</i> Sub-sample of the U.S. Census Bureau's 1993 Survey of Income and Program Participation (SIPP)</p> <p><i>Year(s) of data collection:</i> 1993</p> <p><i>Data collection sites:</i> National sample of U.S. households</p> <p><i>Sample design:</i> Random sample of U.S. households</p> <p><i>Data collection method:</i> In-person interviews with parents</p> <p><i>Target group:</i> Employed mothers who pay for nonparental care for at least one child under age five</p> <p><i>Sample size:</i> 9,937 children</p> <p><i>Definition of child care:</i> Primary child care arrangement used by the youngest child while the respondent works</p> <p><i>Types of child care included in study:</i> Relative care; in-home care; family child care; and organized child care facilities (e.g., child care centers and preschools)</p> <p><i>Definition of informal child care:</i> Relative care and in-home care</p>
<b>Relevant findings</b>	<ul style="list-style-type: none"><li>• <b>Mothers were least likely to pay for child care when care was provided by a relative.</b> Cash payments were made for only 17 percent of relative care arrangements compared with 90 percent of care by nonrelatives, including in-home care providers (84 percent), family child care homes (92 percent), and organized child care facilities (89 percent).</li><li>• <b>In-home care providers and organized child care facilities were the most expensive forms of care.</b> Among mothers who paid for child care for their infant to five-year-old child, the average weekly child care payment was \$57. Mothers using in-home care providers spent an average of \$68 per week, and mothers using organized child care facilities spent an average of \$64. At the same time, the average weekly cost was \$57 for families that used child care homes and \$42 for relative care.</li><li>• <b>Mothers were most likely to place their child in the care of an older sibling's provider if an in-home provider was used.</b> Fifty-three percent of the children who used in-home care were in a shared arrangement, resulting in average weekly savings of \$27 per arrangement. By comparison, 37 percent of preschoolers who were in relative care, 31 percent who were</li></ul>

in family child care homes, and 19 percent who were in organized child care facilities shared their paid child care arrangements with siblings. Even for children who shared paid arrangements, in-home care equaled care in an organized child care facility, as the most expensive form of care.

- **On average, children cared for by a paid in-home provider spent fewer hours per week in their primary child care arrangement.** Children using in-home care spent an average of 24 hours per week in this arrangement compared to an average of 28-29 hours in relative care, family child care, or organized child care.

**Who's Minding Our Preschoolers? Fall 1994 Update. (1997).** Lynne M. Casper. *Current Population Reports, Household Economic Studies, P70-62.* U.S. Department of Commerce, Washington, DC. Report and tables can be downloaded from the U.S. Census Bureau's site <<http://www.census.gov/population/www/socdemo/childcare.html>>.

<b>Subject category</b>	Usage and Trends; Family Characteristics; Parental Preferences/Constraints
<b>Purpose of report</b>	This report describes the types of child care arrangements used by employed mothers of preschool children. It includes tables on the demographic characteristics of families who rely on relative and in-home child care arrangements, and compares these figures to those of families who use more formal child care options.
<b>Study design</b>	<p><b>Data sources:</b> Sub-sample of the U.S. Census Bureau's Survey of Income and Program Participation (SIPP)</p> <p><b>Year(s) of data collection:</b> 1994</p> <p><b>Data collection sites:</b> National sample of U.S. households</p> <p><b>Sample design:</b> Random sample of U.S. households</p> <p><b>Data collection method:</b> In-person interviews with parents</p> <p><b>Target group:</b> Employed mothers with at least one child under age five</p> <p><b>Sample size:</b> 10,288 children</p> <p><b>Definition of child care:</b> Primary child care arrangement used by the youngest child while the mother works</p> <p><b>Types of child care included in study:</b> Parental care; relative care; in-home care; family child care; organized child care facilities (e.g., centers, nursery schools and preschools) and other types of arrangements (e.g., school-based activities)</p> <p><b>Definition of informal child care:</b> Relative care and in-home care</p> <p><b>Notes/limitations:</b> Data for children primarily using parental or kindergarten care were excluded from the analysis for the development of this description.</p>

- Relevant findings**
- **Of mothers using nonparental child care for their birth to 4 year old child, 40 percent relied on an informal provider as their primary child care arrangement.** Thirty-three percent primarily relied on relative care and 7 percent primarily used an in-home care provider. Most relative care was provided by grandparents.
  - **Younger preschool-age children were more likely than older children to be cared for by an informal provider while their mother worked.** Forty-nine percent of children under age one in nonparental care were cared for by a relative (39 percent) or in-home provider (10 percent), compared with 29 percent of the four-year-old children (24 percent and 5 percent respectively).
  - **Younger mothers were more likely than older mothers to rely on a relative to provide care.** In families with mothers aged 15 to 24, half of the children were cared for by a relative while their mother worked, while only 28 percent of children of mothers over age 34 relied on this type of care. Similarly, unmarried working mothers were more likely than those who were married to rely on a relative for care. While 46 percent of the children of unmarried mothers used relative care, this type of care was used by only 28 percent of the children of married mothers.
  - **Mothers who worked evening or night shifts were more likely than those who worked day shifts to rely on a relative to care for their child.** Forty-two percent of the children of non-day-shift working mothers were cared for by a relative, while only 29 percent of the children of day-shift workers relied on relative care.
  - **Mothers employed part-time were more likely than those employed full-time to rely on a relative to care for their child.** Forty percent of the children of mothers employed part-time, compared with 31 percent of the children of mothers employed full-time, used relative care as their primary child care arrangement.
  - **Poor families were more likely than nonpoor families to rely on a relative to care for their child while the mother worked.** Almost half of the children in poor families were cared for by a relative, while only 32 percent of the children in nonpoor families were in relative care.
  - **Mothers receiving welfare benefits were more likely than those not receiving benefits to use relative care for their child, but less likely to use in-home care.** Almost half of young children in families receiving either General Assistance, AFDC, Food Stamps, or WIC benefits were cared for by extended family members, while only 31 percent of the children in families that did not receive these benefits used this type of care.
  - **More educated mothers were less likely to place their children in the care of a relative while they worked, but more likely to rely on an in-home care provider.** Twenty-five percent of the children of mothers who had attended at least some college were in relative care compared with 42 percent of the children of mothers who had not gone to school beyond high school and almost half of mothers who had not earned a high school diploma.

- **Black and Hispanic mothers relied more heavily on relatives to provide child care than did white mothers.** Forty-six percent of the care received by Black and Hispanic children was provided by a grandparent or other relative compared with only 29 percent of the care received by white children.
- **There were small regional differences in the use of informal care providers, but there were no significant differences in the use of informal care in metropolitan and nonmetropolitan areas.** Children in nonmetropolitan areas were just as likely as the children in metropolitan areas to use relative care (35 percent and 33 percent), but slightly less likely to use an in-home care provider (4 percent versus 8 percent).

**From a Parent's Point of View: Measuring the Quality of Child Care. (1999).** Arthur C. Emlen, Paul E. Koren, and Kathryn H. Schultze. Final Report. Regional Research Institute for Human Services, Portland State University, P.O. Box 751, Mail Code RRI, Portland, OR 97207. (503) 725-4066/Fax (503) 725-4080. (89 pp.; \$20; Scales, 56 pp.; \$10 payable to PSU).

<b>Subject categories</b>	Family Characteristics; Parental Preferences/Constraints; Provider Characteristics; Quality of Care; Impact of Subsidy Policies
<b>Purpose of report</b>	This report examines the child care decisions of families using higher- versus lower-quality care and how socioeconomic, market, and family factors impact these decisions. Specifically, it focuses on the characteristics of families using different forms of care and the characteristics of child care providers.
<b>Study design</b>	<p><b>Data sources:</b> Quality-of-Care study; Kansas City Replication Study; and Oregon Child Care Provider Survey</p> <p><b>Year(s) of data collection:</b> <i>Quality-of-Care Study:</i> 1996. <i>Replication Study:</i> 1997. <i>Provider Survey:</i> 1998</p> <p><b>Data collection sites:</b> <i>Quality-of-Care Study:</i> Oregon, Washington, California, and eight other states. <i>Replication Study:</i> Kansas City, Missouri. <i>Provider Survey:</i> Oregon</p> <p><b>Sample design:</b> <i>Quality-of-Care Study:</i> Composite sample of parent questionnaires from more than a dozen sources including companies, child care assistance programs, child care resource and referral (CCR&amp;R) agencies and programs serving children with disabilities. <i>Replication Study:</i> Sample of parents who had contacted a CCR&amp;R agency in one of 78 zip code areas within Kansas city. <i>Provider Survey:</i> Sample of providers used by parents receiving child care assistance</p> <p><b>Target group:</b> <i>Quality-of-Care Study:</i> Families with at least one child under age 12. <i>Replication Study:</i> Families who contacted a CCR&amp;R agency. <i>Provider Survey:</i> Providers caring for subsidized children</p> <p><b>Sample size:</b> <i>Quality-of-Care Study:</i> 862 families. <i>Replication Study:</i> 240 families. <i>Provider Survey:</i> 2,438 providers</p>

**Data collection method:** Mail surveys to parents and providers

**Definition of child care:** *Quality-of-Care Study:* Primary child care arrangement for youngest child. *Replication Study:* Primary child care arrangement for youngest child for whom referral assistance was requested. *Provider Survey:* Child care arrangement used by any subsidized child in the respondent's household

**Types of child care included in study:** *Quality-of-Care Study:* Nuclear family care; relative care; in-home care; family child care; center-based care, e.g. child care centers and preschools; and other child care arrangements. *Replication Study:* Family child care; center care; and other child care arrangements. *Provider Survey:* Relative care, in-home care; family child care; and center-based care

**Definition of informal child care:** *Quality-of-Care Study:* Relative care and in-home care. *Replication Study:* Other child care (types of care not indicated). *Provider Survey:* Relative care and in-home care

**Notes/limitations:** Researchers used mean substitutions for the 6 percent missing data in answers to the scale items on the *Quality-of-Care Study*. By sampling current as opposed to terminated arrangements, the sample was less likely to include care of lower quality. Since the findings are correlational from a single snapshot in time, they need confirmation from longitudinal studies with further corroboration of parent perceptions. For the *provider surveys*, this sample was designed to be representative of the entire population of providers serving families receiving child care assistance in Oregon, but there may have been some unknown difference in nonresponse rates by different types of providers.

#### Relevant findings

- **Use of paid relative care was inversely related to household income.** According to the main quality-of-care study, 18 percent of Oregon children living in households earning under \$20,000 used paid relative care, compared with only 4 percent of families making \$65,000 or more. The relationship between household income and use of paid family child care was curvilinear, with 48 percent of families earning between \$20,000 and \$64,999 using paid family child care compared with only 35 percent of families earning under \$20,000 and 25 percent of families earning \$65,000 or more. Paid center care usage was most common among the highest income families.
- **Each choice of child care was associated with a unique pattern of flexibility.** It was theorized that a certain degree of flexibility is necessary in order to balance the competing demands of daily life and, for working parents, this flexibility must come from their workplace, their home life, or their child care arrangements; working parents with less control over their work schedules require more flexibility from their family and child care providers. Supporting this theory, the main quality-of-care survey found that child care centers offered the lowest level of caregiver flexibility, and were predominantly used by families who had a fair amount of flexibility at work and in their family situation. Families with the lowest level of flexibility at work or in their homes were most likely to use care by relatives or in-home

care providers. Relatives offered the highest level of caregiver flexibility, followed by in-home care providers and family child care homes.

- **Among providers caring for subsidized children, informal providers were more likely than formal providers to offer care during evenings, overnight, and during the weekend.** According to the provider survey, 78 percent of in-home care providers and 69 percent of relative care providers offered care during the evenings, compared with 53 percent of family child care homes and only 10 percent of centers. Sixty-seven percent of in-home care providers and 66 percent of relative care providers offered care during the weekends, compared with 46 percent of family child care homes and only 6 percent of centers. Forty-one percent of relatives and 40 percent of in-home care providers allowed children to stay overnight, compared with 35 percent of family child care homes and only 3 percent of child care centers.
- **Among providers caring for subsidized children, informal providers were just as likely as child care centers to offer drop-in care, although they were less likely than family child care homes to offer this service.** Drop-in care services were offered by 36 percent of relatives completing the providers survey; these services were also offered by 36 percent of the in-home care providers, 35 percent of the child care centers, and 56 percent of the family child care homes.
- **Among providers caring for subsidized children, informal providers were more likely than formal providers to offer care for sick children.** According to the provider survey, 63 percent of relative care providers and 62 percent of in-home care providers offered care during the evenings, compared with 40 percent of family child care homes and only 3 percent of centers.
- **Quality of care had no relationship to the type of child care used by the respondent's youngest child.** According to the main quality-of-care study, Oregon area parents relying on care by centers, family child care, paid relative care, and in-home care providers all reported similar variation in quality. Similar findings were also found by the Kansas City replication study of parents who had used a CCR&R agency.

**Part-Time Work and Child Care Choices for Mothers of Preschool Children.** (1993). Karen Fox Folk and Andrea H. Beller. *Journal of Marriage and the Family*, 55(1), pp. 146–157.

**Subject categories** Usage and Trends; Family Characteristics; Provider Characteristics

**Purpose of report** This article examines the interlocking nature of employment and child care decisions by mothers of children under age five. Countering the popular belief that child care choices always precede employment decisions, it tests a hypothesis that decisions about labor force participation and hours of work are jointly determined with available child care arrangements.

## Study design

**Data sources:** Sub-sample of the National Survey of Families and Households (NSFH)

**Year(s) of data collection:** 1987–1988

**Data collection sites:** National sample of U.S. households

**Sample design:** Random cross-section of all households plus an oversampling of African-Americans, Puerto Ricans, Mexican-Americans, single-parent families, families with step-children, cohabiting couples, and recently married persons

**Data collection method:** For the NSFH, an interview-administered and self-administered survey was completed by one parent in each household, and a self-administered survey was completed by this person's spouse or cohabiting partner

**Targeted group:** Women with at least one child under age five

Sample size: 976 mothers

**Definition of child care:** Primary child care arrangement used by all children under age five in the respondent's household (combined)

**Types of child care included in study:** Nonmarket Care (care by a parent, older sibling, or other relative) and Market care (care provided by a babysitter, family child care home, nursery school, or day care center)\*

**Definition of informal child care:** Nonmarket Care

## Relevant findings

- **Children of employed mothers were more likely to use market care than nonmarket care.** Over half of the mothers (53 percent) in the sample chose not to work rather than combining child care with employment. Among children with employed mothers, more than half relied on market care.
- **Mothers employed full-time were more likely to use market care than mothers employed part-time (61 percent vs. 40 percent).**
- **Employment/care decisions were not significantly affected by the number of children under age 12 in the respondent's household.** Having a larger family did not significantly increase or decrease the odds of choosing any of the employment/care combinations over nonemployment, nor did it significantly affect the odds of choosing part-time work/market care or full-time work/nonmarket care over full-time work/market care. However, working part-time and relying on nonmarket care was not a popular option for mothers with infants.
- **Mother's age did not play a significant role in full-time working mothers' decisions to use market versus nonmarket care.** However, older mothers were more likely to choose nonemployment over all other employment/care combinations except part-time/nonmarket care.
- **The availability of a grandmother affected the choice of child care for employed mothers, but had no significant positive effects on labor**

---

\* Child care types were analyzed as part of a particular combination of employment and child care options. These combinations included: part-time/nonmarket care, part-time/market care, full-time/nonmarket care, and full-time/market care.

**force participation.** Having a mother living within 15 miles of the respondent's home increased the odds of choosing either part-time or full-time work/nonmarket care over full-time work/market care. However, it did not have a significant impact on the mothers' choice of working and using nonmarket care over nonemployment.

- **Occupation was not significantly correlated with full-time working mothers' decisions to use market care versus nonmarket care.** However, working in either the sales or service occupations did increase the likelihood of working part-time and using nonmarket care rather than full-time work/market care. Almost 50 percent of those in sales and 30 percent of those in service occupations were expected to work part-time and use nonmarket care compared with only 10 percent of those in other occupations.
- **Having a variable schedule did not significantly impact decisions to use market versus nonmarket care.** However, having a variable schedule did increase the odds of choosing part-time employment and using either types of child care over choosing full-time work/market care.
- **For mothers working full time, higher wages significantly increased the likelihood that mothers would choose market care over nonmarket care.** However, it did not have the same affect on part-time working mothers' child care decisions.
- **Having a higher household income did not significantly increase the odds of choosing market care over nonmarket care.** It did, however, significantly increase the odds of choosing not to work over working full-time and using either type of child care. Education was not significantly correlated with decisions to use market care versus nonmarket care. Higher educational attainment, however, significantly decreased the likelihood of mothers choosing any of the employment/care choices over not working.
- **Identifying as African-American significantly increased the odds of using nonmarket care over market care.** It also increased the odds of choosing nonemployment over working part-time and using either child care option. However, it did not have a significant impact on decisions to work full-time versus staying out of the workforce.
- **Identifying as Hispanic did not significantly impact decisions to use market versus nonmarket child care.** Hispanic mothers had the highest predicted probabilities of nonemployment whether or not they were married.
- **Living in the South significantly increased the likelihood of using market care over nonmarket care.** This also increased the likelihood of choosing full-time market care over working part-time and using either market or nonmarket care. Southerners were more likely to choose full-time employment over nonemployment, but were not significantly more likely to choose part-time employment over nonemployment.
- **Among working mothers with children under age five, the estimated cost of child care did not significantly impact decisions to use market versus nonmarket care.** Estimated cost of care was only significant for

choosing full-time/market care over nonemployment, a finding which was likely related to the construction of the variable as predicted average expenditure for all types of care.

- **Among mothers with children under age five, those using nonmarket child care paid less for child care than those using market care.** Eighty-two percent of mothers using nonmarket care did not pay for these services. Moreover, the 18 percent of nonmarket care users who did pay for this care paid on average about half the amount paid by users of market child care (\$30 per week versus \$55 per week).

**For Love or Money: Costs of Child Care by Relatives. (1994). Karen Fox Folk. *Journal of Family and Economic Issues*, 15(3), pp. 243–260.**

<b>Subject category</b>	Usage and Trends; Family Characteristics; Child Care Costs; Provider Characteristics
<b>Purpose of report</b>	This report explores the nonmonetary and monetary patterns of exchanges for child care by relatives. The researcher examines two specific questions: (1) whether the role of nonmonetary or monetary exchanges affects the motives (altruistic or not) or payment (paid or unpaid) in child care by relatives and (2) the implications of the pattern of exchange for child care policy.
<b>Study design</b>	<p><b>Data sources:</b> Sub-sample of National Survey of Families and Households (NSFH)</p> <p><b>Year(s) of data collection:</b> 1987–1988</p> <p><b>Data collection sites:</b> National sample of U.S. households</p> <p><b>Sample design:</b> Random cross-section of all households plus an oversampling of African-Americans, Puerto Ricans, Mexican-Americans, single-parent families, families with step-children, cohabiting couples, and recently married persons</p> <p><b>Target group:</b> Women with at least one child under age five</p> <p><b>Sample size:</b> 878 mothers</p> <p><b>Data collection method:</b> For the NSFH, an interview-administered and self-administered survey was completed by one parent in each household, and a self-administered survey was completed by this person's spouse or cohabiting partner</p> <p><b>Definition of child care:</b> Primary child care arrangement used by all children under age five in the respondent's household (combined)</p> <p><b>Types of child care included in study:</b> Parental care; sibling care; relative care; and market-purchased care (e.g., babysitter, family child care home, nursery school, or day care center)</p> <p><b>Definition of informal child care:</b> Relative care</p>

**Notes/limitations:** NSFH data do not explain whether services are given to the relative providing the child care or to another relative not providing the child care. Also, the data on services given represent services given within the month prior to the interview, whereas the gifts and loans made represent gifts and loans made any time within the previous five years.

- Relevant findings**
- **Among employed mothers who primarily relied on nonparental/nonsibling care arrangements, only 27 percent used relative care for their child.** The remaining 73 percent relied on market-purchased care as the primary source of child care while they worked.
  - **Among employed mothers with children under age five, those using relative care were less likely to be married than those using parental, sibling or market-purchased child care.** Sixty-one percent of employed mothers using relative care were married, whereas 89 percent of employed mothers using parental or sibling care and 70 percent of employed mothers using market-purchased care were married.
  - **Mothers using relative care were more likely to be African-American or Hispanic than those using parental, sibling, or market-purchased care.** Forty-six percent of employed mothers using relative care were African-American or Hispanic, compared with 15 percent using parental or sibling care and 20 percent using market-purchased care.
  - **Mothers using relative care averaged fewer years of education than those using market-purchased care.** While employed mothers using relative care averaged 12.5 years of education, employed mothers using market-purchased care averaged 13.7 years.
  - **Mothers using relative care had a lower average family income than those using parental, sibling, or market-purchased care.** Employed mothers using relative care had an average family income of \$29,120 per year. In comparison, employed mothers using parental or sibling child care had an average family income of \$34,510, and employed mothers using market-purchased child care had an average family income of \$44,910.
  - **Mothers using relative care were more likely to have given in-kind services to a relative in the prior month than those using other forms of care.** Eighty-one percent of employed mothers using relative care had given a relative in-kind services such as babysitting or child care services (51 percent), transportation services (45 percent), repairs to home or car (23 percent), and other kinds of services around the house (47 percent). In contrast, in-kind services were only given by 57 percent of employed mothers using market-purchased care and 70 percent of employed mothers using parental or sibling care.
  - **Mothers using relative care were more likely than those using other forms of care to have given gifts or loans worth more than \$200 to a relative within the previous five years.** Twenty-six percent of the employed mothers using relative care had given gifts or loans, while gifts or loans were only given by 15 percent of employed mothers using market-

purchased care and 17 percent of employed mothers using parental or sibling care.

- **Mothers using relative care were significantly more likely than other mothers in the sample to have received in-kind services from relatives within the previous month.** Mothers using relative care received babysitting or child care services (81 percent), transportation services (33 percent), repairs to home or car (28 percent), and other kinds of services around the house (35 percent). They were more likely to have received loans worth more than \$200 from relatives within the previous five years, but less likely to have received gifts worth more than \$200. This inter-household exchange did not appear to substitute for monetary payments for child care. Sixty-five percent of these mothers paid for child care services, and those who made monetary payments for care were just as likely to have given services, gifts, or loans as those who did not make monetary payments.
- **Mothers were less likely to give monetary payments to grandparents for child care services than to other relatives.** Fifty-three percent of mothers using a grandparent for care made monetary payments, while 92 percent of mothers using a relative other than a grandparent paid for care. Those working full-time were more likely to have made monetary payments for relative care than those working part-time.

**Remember the Children: Mothers Balance Work and Child Care Under Welfare Reform. Growing Up in Poverty Project: Wave 1 Findings. (2000).** Bruce Fuller, Sharon Lynn Kagan, et al. University of California, Berkeley and Yale University, New Haven, Connecticut. Graduate School of Education, University of California, Berkeley, CA 94720. (510) 642-7223/Fax (510) 642-9148. (116 pp.; \$25).

<b>Subject categories</b>	Usage and Trends; Parental Preferences/Constraints; Provider Characteristics; Quality of Care; Impact of Subsidy Policies
<b>Purpose of report</b>	This study examines the types and quality of child care women are using as they move from welfare to work.
<b>Study design</b>	<p><i>Data sources:</i> Results from the Growing Up in Poverty Project</p> <p><i>Year(s) of data collection:</i> 1998–1999</p> <p><i>Data collection sites:</i> San Francisco and San Jose, California; Manchester and New Haven, Connecticut; and Tampa, Florida</p> <p><i>Sample design:</i> Random sample of single mothers with young children in California and Florida who were recruited from welfare office orientation sessions. Also, Connecticut mothers who had been randomly assigned to the state’s new welfare program 18 months prior to the study, and a control group of mothers continuing to live under the previous AFDC welfare rules.</p>

**Target group:** Low-income, unmarried TANF mothers with young children (at least one age 12–24 months at baseline)

**Sample size:** 948 mothers

**Data collection method:** Detailed in-person or telephone structured interviews with the mothers; observations of 352 child care settings; and assessments of children’s early language and social development

**Definition of child care:** Primary child care arrangement used by the oldest child between 12-24 months of age when mother was first interviewed

**Types of child care included in study:** Unregulated kith and kin care (i.e., nonparental care by relatives, friends, and babysitters); family child care (usually licensed); and center-based care

**Definition of informal child care:** Unregulated kith and kin care

**Notes/limitations:** (1) Connecticut sample could have been exposed to the new program for a period up to one year longer than the families in California and Florida. (2) Percent of mothers using some form of nonparental care may have been underestimated as researchers lost contact with 17 percent of women between initial and follow-up interviews. (3) Many women had already secured a child care provider prior to enrolling in new state welfare programs.

**Relevant findings**

- **Use of different types of child care varied widely across the three states.** Overall 62 percent of mothers in new welfare programs used some form of nonparental child care for at least 10 hours per week. The proportion of mothers with children in nonparental care who used informal kith and kin care ranged from 25 percent in Florida to 54 percent in California and 77 percent in Connecticut. Family child care usage ranged from 5 percent in Florida to 10 percent in Connecticut and 17 percent in California. Usage of center-based programs ranged from just 13 percent in Connecticut to 29 percent in California and 70 percent in California.
- **Only a fraction of eligible mothers used child care subsidies, ranging from only 13 percent in the Connecticut sample to 48 percent in California and 50 percent in Florida.** Many mothers did not seem to be aware that subsidies may be used for informal child care, and many welfare mothers paid for child care, especially informal child care, out of their own pockets.
- **The child care used by welfare mothers was generally of low quality, providing little educational stimulation for their children.** The home-based programs selected by many mothers tended to be of poorer quality than center-based child care. Seventy-one percent of the family child care homes and kith and kin child care arrangements were rated as poor on a global measure of quality. Fewer educational materials were observed in home-based programs, there was a much greater use of television and videos, and overall the facilities were less clean. However, many child care centers were also found to be of low quality; overall just 21 percent were assessed as providing good or excellent care and early education. As with other aspects of child care, this varied across states. In the Florida centers, 58 percent were rated as poor, while only 9 percent were assessed as poor in

California. Caregivers in center-based child care were generally better educated than those in informal child care arrangements. Caregiver sensitivity to children did not vary across informal and center-based care arrangements, although center-based caregivers were more likely to provide explanations for children. Also, caregivers in all types of care read to children very infrequently.

- **Mothers who used noncenter-based care reported having more flexible caregivers.** Centers were the least likely to care for children early or late, while kith and kin caregivers were the most flexible in this regard. In California, 64 percent of the centers offered extended hours compared with 86 percent of the family child care homes and 95 percent of the kith and kin caregivers. In Connecticut, extended hours were offered by 73 percent of the centers, 80 percent of the kith and kin caregivers, and 100 percent of the family child care homes. In Florida, 68 percent of the centers offered extended hours compared with 78 percent of the family child care homes and 92 percent of the kith and kin caregivers.

**The Study of Children in Family Child Care and Relative Care: Highlights of Findings.** (1994). Ellen Galinsky, Carollee Howes, Susan Kontos, and Marybeth Shinn. Families and Work Institute, 330 Seventh Avenue, 14th Floor, New York, NY 10001. (212) 465-2044/Fax (212) 465-8637. (133 pp.; \$18 + \$5.50 p/h).

**Subject categories** Family Characteristics; Parental Preferences/Constraints; Child Care Costs; Provider Characteristics; Quality of Care

**Purpose of report** This report presents information on similarities and differences among regulated and nonregulated family child care homes and care by relatives outside of the child's home. It addresses several questions including how quality child care is defined, whether quality indicators are present within family child care and relative care settings, and how these factors affect children's development. It also provides information on the characteristics of families who use different type of care, their child care preferences, satisfaction level, and demographic data on the providers being used.

**Study design** *Data sources:* Study of Children in Family Child Care and Relative Care

*Year(s) of data collection:* 1991–1992

*Data collection sites:* San Fernando Valley, California; Dallas-Fort Worth, Texas; and Charlotte, North Carolina

*Sample design:* Random-digit dial sample of families in three communities; areas with high concentrations of low-income and minority families were oversampled. Sub-sample of these families used to generate the children's sample. Provider sample combined a sub-sample of providers used by mothers in the family sample and providers identified through licensing lists and advertisements.

**Data collection method:** Telephone parent interviews, in-person provider interviews, and observations of children in their provider's home

**Target group:** Employed mothers who use family child care or out-of-home relative care as the primary source of care for a child under age six.

**Sample size:** 820 mothers, 225 children, and 226 providers

**Definition of child care:** Primary child care arrangement for one child under age six while the mother works

**Types of child care included in study:** Regulated family child care; nonregulated family child care; and nonregulated relative care (not provided within the child's home)

**Definition of informal child care:** Nonregulated family child care and relative care

**Notes/limitations:** Debate has surrounded the use of the Family Day Care Rating Scale (FDCRS) in assessing the quality of informal settings.

#### Relevant findings

- **Higher-income families were more than twice as likely to be using regulated care as those with a lower income (65 percent versus 26 percent), and were infrequent users of relative care.** Middle-income families used the three types of care in roughly equal proportions, although a slightly higher percentage used regulated family child care (39 percent) than nonregulated family child care and relative care (31 percent each). Low-income families were the group most likely to use relative care (44 percent), while 29 percent were in nonregulated family child care, and 26 percent were in regulated family child care.
- **Mothers with children in regulated family child care were generally more highly educated than those who relied on nonregulated care.** Almost half of the mothers using regulated family child care had earned a Bachelor's degree or higher compared with 26 percent of the mothers using nonregulated family child care and 9 percent of the mothers using relative care.
- **Two-thirds of the parents who used relative care said they chose this type of care because they preferred to rely on family members.** Regardless of type of care used, both mothers and the providers saw a warm, caring, responsive relationship between the child and the provider, a safe environment, and good communication between the provider and parent as the crux of quality. When asked to rate the factors most essential to quality child care, these factors were rated the highest while regulatory status was often ranked near the bottom of the list.
- **Families using relative care were less likely than those using family child care to prefer a different child care arrangement.** While 20 percent of mothers using relative care said they preferred some other arrangement, 29 percent of mothers using regulated family child care and 34 percent of mothers using nonregulated family child care preferred a different arrangement.

- **Regulated providers charged more than nonregulated providers who, in turn, charged more than relative providers.** On average, regulated family child care providers charged between \$42.97 per week (for school-age children) and \$80.42 per week (for infants). Nonregulated family child care providers charged between \$27.89 and \$54.03 per week, and relative providers charged between \$15.71 and \$23.21 per week. Relative providers were the least likely to charge money for caring for children. Regulated family child care providers had higher incomes than either nonregulated family child care providers or relatives. At the time of the study, only a small percentage of family child care and relative providers received child care subsidies from their respective states.
- **Most of the nonregulated providers in this sample (81 percent) were illegally nonregulated because they had more than the number of children allowed in exempt homes.** The states in this study, however, had stringent thresholds for regulation and required providers who cared for more than one to three unrelated children (depending on the state) to be regulated. Moreover, 17 percent of regulated child care providers were out of conformance with state laws that regulate ratios, group size, and the age mix of the children.
- **Regulated family child care homes generally cared for more children and had higher child-staff ratios than both nonregulated family child care homes and relative care arrangements.** For each adult provider in the child care setting, there were an average of 1.63 children in relative care, 2.94 children in nonregulated family child care homes, and 4.29 children in regulated family child care homes.
- **Regulated providers were more likely to follow safety practices, such as keeping the phone number of the child’s doctor, having an emergency authorization form, and keeping immunization records.** In addition, regulated providers were more likely to have liability insurance than nonregulated providers and relative providers. None of the states in the sample required liability insurance. Regulated providers were more likely to report child care income for tax purposes than nonregulated providers and relatives.
- **Overall, significant proportions of unregulated family child care and relative care providers did not have a high school degree.** Forty-six percent of relatives and 33 percent of other nonregulated providers had not graduated from high school compared with only 6 percent of the regulated providers. Regulated providers were more likely to have participated in family child care training than were nonregulated and relative providers. Providers with more family child care training were rated as more sensitive and less detached.
- **Relative providers were most likely to be ethnic minorities, while regulated providers were most likely to be White.** A majority (72 percent) of the relative care providers identified themselves as either African-American, Latino or members of another non-White group. Fifty-nine percent of

the nonregulated family child care providers and 71 percent of the regulated family child care providers identified themselves as white.

- **Informal child care, by both relatives and nonrelatives was much more likely to be rated as inadequate.** Thirteen percent of the regulated family child care providers, 50 percent of the nonregulated family child care providers, and 69 percent of the relative providers offered care that was rated as inadequate. Regulated providers were rated as more sensitive and observed to be offering more responsive care than nonregulated and relative caregivers. The authors identified a group of home-based caregivers (relatives and nonrelatives) who had a quality they identified as “intentionality,” which led to higher-quality, warmer, and more attentive care. Regulated providers had more involvement with other family child care providers than nonregulated providers who, in turn, had more involvement than relatives. Overall, providers who were more involved with other providers were less likely to be rated as offering inadequate care and were more likely to be rated as sensitive and responsive.
- **Relatives were the least likely to see being a child care provider as their chosen profession and were more likely to have become providers for adult-focused reasons rather than child-centered ones.** In addition, relative providers were less likely to be committed to their role as child care providers than family child care providers.

**GAIN Family Life and Child Care Study: Final Report. (1991).** Neil Gilbert, Jill Duerr, and Marcia K. Meyers. Family Welfare Research Group, School of Social Welfare, University of California at Berkeley, 1950 Addison Street, Suite 104, Berkeley, CA 94704.

**Subject categories** Usage and Trends; Family Characteristics; Parental Preferences/Constraints; Quality of Care; Impact of Subsidy Policies

**Purpose of report** This report addresses the noneconomic impacts of the 1988 Family Support Act by examining the experiences of single-parent AFDC recipients who enrolled in California’s GAIN program, a welfare-to-work program that provides child care subsidies and other services to help meet mandated work requirements. It explores how AFDC recipients fared as they entered GAIN, began the transition to school and work, and arranged child care during and after program participation.

**Study design** *Data sources:* The GAIN Family Life and Child Care Study  
*Year(s) of data collection:* 1990–1991  
*Data collection sites:* 3 counties in California  
*Sample design:* Nonprobability sample of single AFDC mothers recruited for the study as they enrolled in the GAIN program between January and September 1990

**Target group:** Female single-parent AFDC recipients enrolled in California's GAIN program who had one or more children under age 13 who were eligible for GAIN child care subsidies

**Sample size:** 436 parents

**Data collection method:** Telephone interviews with parents before participating in GAIN and then at 3 months and 12 months after starting a GAIN activity

**Definition of child care:** Primary child care arrangement for the youngest child in the respondent's household

**Types of child care included in study:** Care by relatives or friends who only care for children from one family; licensed family child care and center-based care (e.g., child care centers, preschools, and after-school programs)

**Definition of informal child care:** Care by relatives or friends

**Notes/limitations:** Interviews were only conducted in English. Also, the young average age of the children in this sample may have biased findings on child care usage.

#### Relevant findings

- **As they entered training and job readiness activities in the GAIN program, the mothers in this study made a significant shift toward use of organized care.** When they started the program, 78 percent were relying on family and friends for child care. During their first three months in GAIN, the proportion using family or friends for child care dropped to 40 percent. However, one year after enrolling in GAIN, the use of organized child care declined among those who had arranged child care on their own after exiting the program.
- **The mode of child care used varied significantly depending on the children's ages and women's schedules and activities.** Use of family child care homes was greatest among mothers of infants and toddlers (birth to two years); center-based programs were used most often by parents for their preschool-aged children (ages three to four years); and informal care by family and friends was most common for school-aged children over age five. GAIN participants who were in job search or remedial or basic education activities were more likely than women in other GAIN tracks to use informal arrangements with friends and relatives. The longer women were active in job preparation or school programs, the more they relied on some type of organized care rather than informal care by relatives and friends. GAIN participants in vocational training activities were less likely than women in other GAIN tracks to use informal arrangements with friends and relatives.
- **Before starting the GAIN program, although only 16 percent of the mothers used either family child care homes or centers, just over half reported a preference for one of these arrangements.** Only 48 percent of the women said they hoped to have family or friends provide child care for their youngest child after they enrolled in GAIN. After they started the program, their actual arrangements closely approximated their expectations.

- **Parents using informal care were the most satisfied with their current child care provider.** Seventy-one percent of parents using informal care, compared to 63 percent of parents using either a family child care home or center, said they would select the same care again if cost and availability were not an issue. Then the features of program quality and convenience were compared for those using informal care by family and friends and those using organized care in family child care homes and centers; no one form of child care emerged as ideal. Each type of care optimized some aspects of adequacy while compromising others.
- **Mothers using an informal care arrangement were the least likely to say that their provider offered the best possible environment for learning and social opportunities and the most likely to trust their provider and to believe their child care setting was safe.** On a combined measure of trust and safety, women using informal care were significantly more positive in their assessment than those using organized care in centers or family child care homes.
- **Mothers using informal care spent the least amount of time traveling to their child care provider, but the most time traveling from this location to their GAIN activity.** On average, mothers using center or family child care traveled more than twice as far from home as those using informal arrangements, but their travel time to their GAIN activity was shorter.
- **Stability of care arrangements was a substantial problem for many women, because of breakdowns in care and changes in schedules, but this was not significantly related to the type of child care arrangement used.** Mothers using informal care by friends and family were just as likely as mothers using family child care homes and centers to have switched primary child care arrangements at least once since starting their GAIN activities. Single mothers who relied on informal care by friends and family missed fewer days of GAIN as a proportion of their active weeks in the program than those using center-based programs.

**National Child Care Survey, 1990.** (1991). Sandra L. Hofferth, April Brayfield, Sharon Deich, and Pamela Holcomb. Urban Institute Press, 2100 M Street, NW, Washington, DC 20037. (877) 847-7377 (450 pp.; \$32.50 + \$3 p/h, *Currently out of stock*).

**Subject categories** Usage and Trends; Family Characteristics; Parental Preferences/Constraints; Child Care Costs; Provider Characteristics; Quality of Care

**Purpose of report** This report presents findings from the 1990 National Child Care Survey that was intended to help state and federal agencies gain a greater understanding of child care trends and practices. The study was designed to characterize the child care market by providing a nationally representative picture of: (1) who cares for children, (2) how much parents spend on child care, (3) how parents

select their child care arrangements, (4) parents' perceptions about their child care options, (5) previous use of child care arrangements, (6) how families balance their work and family responsibilities, and (7) parents' views on public- and private-sector child care policies.

## Study design

**Data sources:** National Child Care Survey (NCCS)

**Year(s) of data collection:** 1989–1990

**Data collection sites:** 100 counties and county groups in the U.S. with a high proportion of children under five years of age

**Sample design:** Random-digit-dial sample of households within the data collection sites

**Target group:** Households with one or more children under age 13

**Sample size:** 4,392 households with 7,575 children under age 13

**Data collection method:** Computer-assisted telephone interviews conducted with parents

**Definition of child care:** Unless specified, findings in this abstract refer to the primary child care arrangement used by the youngest child in each household. These are regularly scheduled arrangements mothers make for their children when they are not available and/or in order to provide an enriching experience for the child. They are not limited to arrangements made while the mother works.

**Types of child care included in study:** Parental care; relative care; in-home care; family child care (primarily unregulated); center-based care (e.g., child care centers, preschools and before/after school programs); and alternative child care arrangements (e.g., lessons, sports, clubs, and self-care)

**Definition of informal child care:** Care by relatives and in-home care providers

**Notes/limitations:** The number of low-income children living below the poverty line appear to be underestimated in this survey. These children are more likely to be in informal child care settings. This report may slightly overestimate the proportion of formal child care arrangements for low-income children.

## Relevant findings

- **Over one-third of families using nonparental care used an informal provider as the primary care arrangement for their child.** Most of this care was given by a relative, and most relative caregivers were grandparents.
- **Informal providers were more commonly used for secondary arrangements than primary ones.** While 37 percent of the families used an informal provider for their child's primary child care arrangement, 44 percent relied on a relative or in-home care provider for their secondary arrangement.
- **Families with infants and toddlers were the most likely to use informal care; school-age children were more likely to be in informal care than preschoolers, who were most likely to use child care centers.** Forty-seven percent of the infants used either relative (39 percent) or in-home care (9 percent), and another 27 percent used family child care homes; only 17 per-

cent of infants were enrolled in centers. As they became toddlers, use of informal care decreased to 40 percent and center care usage began to increase. Over half (55 percent) of all preschoolers used center care, with a resultant decrease in relative care (20 percent), in-home care (3 percent), and family child care (16 percent). As children reached school-age, however, informal care usage began to increase in popularity again, as did self-care and alternative arrangements such as lessons, sports, clubs, and self-care. Forty percent of school-age children with regular nonparental child care arrangements during the summer used relative care for at least part of the week, and 15 percent relied on a neighbor for care.

- **Families with three or more children were more likely than those with only one or two children to use informal child care arrangements.** Forty-two percent of families with three or more children used either relative or in-home care compared with 34 percent of families with one or two children.
- **As level of maternal education increased, the proportion of families using relative care decreased while the proportion using in-home care increased.** Among families using nonparental child care, over half (53 percent) of mothers who had not graduated high school used relative care; this percentage progressively dropped to the point at which only 15 percent of mothers with graduate degrees relied on a relative for child care.
- **As level of household income increased, the proportion of families using relative care decreased.** Among families using nonparental child care, 43 percent of families with incomes below the poverty line used relative care; this percentage progressively dropped to the point at which only 19 percent of families earning \$50,000 or more relied on a relative for child care.
- **White families were less likely to use relative care than either black and Hispanic families.** While 28 percent of white children used relative care, 39 percent of both black and Hispanic children relied on this type of care. In-home care was very rarely used by black children (1 percent), while a similar proportion of white and Hispanic children used an in-home care provider (6 and 5 percent).
- **Families living in the Northeast were the most likely to use an informal child care arrangement.** Forty-five percent of families in the Northeast used either relative or in-home care, while 33 percent of families in other regions of the country used one of these informal arrangements.
- **Children in informal care arrangements spent fewer hours in care than those using either family child care or center care.** Among children with employed mothers, the average number of hours spent in their primary child care arrangement each week was 19 hours for in-home care, 21 hours for relative care, 31 hours for family child care, and 31 hours for center care.
- **Only 22 percent of all families using relative care paid for these services.** Families were less likely to pay for relative care for school-age children than for children under age five and were less likely to pay for relative care if the mother was not employed outside the house.

- **In-home care providers were the most expensive, while relative care providers were the least expensive.** Employed mothers whose youngest child was under age five paid an average of \$2.30 per hour for in-home care, \$1.67 for center care, \$1.35 for family child care, and \$1.11 for relative care. Employed mothers whose youngest child was between ages 5-12 paid an average of \$3.49 per hour for in-home care, \$2.52 for center care, \$2.32 for family child care, and \$2.31 for relative care.
- **Employed mothers were least likely to say that they had seriously considered using a different type of child care if they were using relative care.** Over half of employed mothers using an in-home care provider (52 percent), family child care home (52 percent), or child care center (54 percent) said they had seriously considered using a different type of provider, while only 30 percent of those using relative care said they had considered alternative child care types. Parents who had seriously considered using a different type of child care provider were most likely to have considered using center care. Almost one-third of families using an informal care arrangement said that, if they could have any type of arrangement, they would prefer to use a different type of care. For those desiring a change, the mode of care most likely to be preferred was center care.
- **Informal providers were seen as the least available.** Only 22 percent of families who were not using in-home care and 31 percent of families not using relative care knew of one of these types of providers who was available to provide care for their child. In contrast, 44 percent of families not using family child care and 59 percent of families not using center care said these types of care were available to them. There were clear differences in perceived availability of relative and center care by income level. Regardless of income, relatives and in-home care providers were the least likely to be perceived as available by nonusers. However, families with annual incomes above \$50,000 were much less likely to report a relative available for care than families with incomes below this figure.
- **Child/staff ratios were lowest for children in the care of a relative or in-home care provider.** Parents using relative care reported an average child/staff ratio of 1.37, while in-home care users reported an averaged of 1.5 children per provider; neither type of provider was reported to have cared for more than two children on a regular basis. Parents using family child care homes reported an average staff ratio of 3.11, while centers had an average of 6.55 children per staff member.
- **Center care staff were more likely than both in-home care providers and family child care staff to be seen as having relevant education or training.** Eighty-seven percent of families using a child care center reported that staff in that facility had special education or training related to early childhood education or child psychology. By contrast, only 33 percent of in-home care users and 40 percent of family child care home users said these providers had at least some education or training in child development.

- **Informal care arrangements were more stable.** At the time of the interview, the median length of time children were in relative care was 15 months, while the median for in-home care arrangements was 11 months. By comparison, the median length for family child care and center care arrangements was 10 and 8 months, respectively.
- **Mothers with children in an out-of-home care arrangement had fewer incidents of lost time from work because of a breakdown in the arrangement. Lower incidences of lost time from work was generally associated with placing a child in an arrangement physically outside the child's home rather than within it.** The highest proportion of women who experienced child care failures had a relative or nonrelative care for the child in the child's home. A similarly high proportion of women experienced a breakdown in the arrangement when they depended on the child to care for him/herself (20 percent), while a much lower proportion experienced care-related work disruptions if their children were cared for in a center (13 percent) or family child care home (11 percent), or by a relative in another home (9 percent).
- **Families using informal child care arrangements were least likely to stay home from work to care for a sick child.** Among women reporting that one of their children was sick during the previous month, work was missed by 61 percent of those using family child care and 55 percent of those using center care. By comparison, 46 percent of those using relatives in another home and 34 percent of those using relatives in the child's home stayed home from work when their child was sick.

**Grandparents Who Parent Their Grandchildren: Effects on Lifestyle. (1993).**  
Margaret Platt Jendrek. *Journal of Marriage and the Family*, 55(8), pp. 609–621.

<b>Subject categories</b>	Provider Characteristics
<b>Purpose of report</b>	This report investigates the extent to which caring for grandchildren is disruptive in the lives of grandparents who provide daily care to their grandchildren. Specifically, it examines changes in lifestyle, relationships with friends and family, and changes in relationships with spouses.
<b>Study design</b>	<p><b>Data sources:</b> Interviews with grandparents who provide daily care to a grandchild</p> <p><b>Year(s) of data collection:</b> 1992</p> <p><b>Data collection sites:</b> In and near Butler County, Ohio</p> <p><b>Sample design:</b> Nonprobability sample of grandparents who responded to advertisements appearing in the media, schools, medical practices, and courts</p> <p><b>Target group:</b> Grandparents who provide daily care to a grandchild</p> <p><b>Sample size:</b> 114 grandparent caregivers</p>

**Data collection method:** Telephone-administered screening interviews and in-depth provider interviews either conducted by telephone or in-person

**Definition of child care:** Child care provided to one of the respondent's grandchildren. If the respondent provides care to more than one grandchild, questions are asked about the child that requires the most care.

**Types of child care included in study:** 36 "custodial" grandparents (who live with a grandchild with whom they have a legal relationship through adoption, full custody, temporary custody, or guardianship); 26 "living-with" grandparents (who live with a grandchild with whom they do not have a legal relationship); and 52 "day care" grandparents (who provide regular child care to a grandchild with whom they do not reside)

**Definition of informal child care:** Child care provided by grandparents

Notes/limitations: Nonprobability sample of volunteers that is not representative of all grandparents providing care. Questions concerning the impact of providing care on lifestyle were retrospective.

#### Relevant findings

- **Most (71 percent) of the day care grandparents were not paid for providing child care to their grandchild, and their most commonly cited reasons for providing care were oriented toward helping the grandchild's parent(s) or fulfilling their own nonmaterial needs.** The five leading reasons given by these grandparents for providing care were: (1) the grandchild's mother was working full-time (71 percent); (2) not wanting the grandchild in day care or at a babysitter's house (69 percent); (3) wanting to help the grandchild's parent(s) financially (67 percent); (4) the grandchild's father was working full-time (51 percent); and (5) providing care to the grandchild gave the grandparent something to do (35 percent).
- **A majority of grandparents in this sample reported changes in their lifestyle after they began caring for their grandchild on a regular basis.** Changes included having an increased need to alter routines and plans (80 percent), having less privacy (59 percent), having less time for oneself (58 percent), feeling more physically tired (55 percent), and having less time to get everything done (54 percent). However, over half of the respondents (55 percent) also reported having more of a purpose for living. Of the three types of grandparent providers, the lifestyles of custodial grandparents were the most affected by their responsibilities in providing care to their grandchild. Although fewer changes were mentioned, grandparents who lived with a grandchild of whom they did not have legal custody reported changes that were similar to those mentioned by the custodial grandparents.
- **Most custodial grandparents reported lifestyle changes that generally accompany a child's entry into one's life and home.** The most common changes included having an increased need to alter routines and plans (86 percent), less privacy (80 percent), less time for self (77 percent), feeling more physically tired (69 percent), having less time to get everything done (63 percent), feeling more emotionally drained (60 percent), having less time for one's spouse (59 percent), less contact with friends (56 percent),

being less likely to do things for fun and recreation (56 percent), worrying more about things (52 percent), giving less attention to one's spouse (50 percent), and having less money (50 percent). Although the burden of rearing grandchildren often seemed heavy, two-thirds (66 percent) of the custodial grandparents also reported having more of a purpose for living because of providing care to their grandchild.

- **Grandparents providing day care, as opposed to custodial or lives-with care, for their grandchild were least affected by their caretaking role.** Of the three types of grandparent providers, these grandparents tended to function more according to our societal definition of grandparents than of parents; in these cases, the children go home at the end of the day. For these grandparents disruptions were surprisingly minimal. Although these grandparents organized their day around the children, neither their friendship and family networks nor their marriages were substantially affected.
- **Custodial grandparents were most likely to report negative affects on family networks as a result of providing care to their grandchild, while very few day care grandparents reported such problems.** Almost half (47 percent) of the custodial grandparents said they had "some" or "a lot of" problems with family because they were providing care to their grandchild, while 28 percent of the living-with and 14 percent of the day care grandparents said they had such problems.
- **Married custodial grandparents were more likely than married living-with or day care grandparents to report that giving attention to their spouse had declined as a result of providing care to their grandchild.** Half of the married custodial parents, compared with 33 percent of the married living-with grandparents and 18 percent of the day care grandparents said that such attention had declined. Although most married grandparents reported that there caring for a grandchild had not created problems with their spouse, married custodial grandparents were significantly more likely than the other married grandparents in the sample to report problems. More than a third (38 percent) of the married custodial grandparents said that providing care created problems with their spouse, compared with 12 percent of the married living-with grandparents and 9 percent of the married day care grandparents.

**Determinants of Child Care Ideals Among Mothers of Preschool-aged Children. (1989).** Karen Oppenheim Mason and Karen Kuhlthau. *Journal of Marriage and the Family*, 51(3), pp. 593–603.

**Subject categories** Usage and Trends; Family Characteristics; Parental Preferences/Constraints

**Purpose of report** This report explores the types of child care parents prefer, as well as the characteristics of families with different child care ideals. Women's current use of child care, marital and employment status, income, youngest child's age,

gender role ideology, religion, religiosity, education, race, proximity to relatives, and place of residence are all hypothesized to affect child care ideals.

## Study design

**Data sources:** Interviews with mothers of children under age six

**Year(s) of data collection:** 1986

**Data collection sites:** 3 counties in the greater Detroit metropolitan area

**Sample design:** Multi-stage probability sampling procedure by which census block or block groups were stratified according to the 1980 female age distribution. Units of relatively heavy concentrations of women in prime reproductive ages were oversampled.

**Target group:** Mothers between ages 15–39 with at least one child under age six who has not yet entered kindergarten

**Sample size:** 1,302 mothers

**Data collection method:** Interviewer-administered parent questionnaires

**Definition of child care:** Primary child care arrangement used by the youngest child to have received care during the month of the interview

**Types of child care included in study:** Parental care; relative care;\* nonrelative care (i.e., regulated and nonregulated family child care and in-home care); and other care arrangements\*\*

**Definition of informal child care:** Relative care

**Notes/limitations:** This sample differs from national samples in many respects. Slightly less than half of the sample were employed. Although more than half were using some form of regularly scheduled child care, none were using formal care. Also, the religious composition of the sample is somewhat more heavily skewed toward Roman Catholics than in most national samples.

## Relevant findings

- **Just over half (52 percent) of the respondents either cared for their youngest child themselves or relied on the child's father for regular child care. Mothers who used nonparental care were more likely to use nonrelative care than relative care for their child's care arrangement.** Thirty-one percent of the respondents who relied on a nonparental child care arrangement for their youngest child used relative care, while 69 percent relied on a nonrelative care arrangement such as a family child care home or babysitter; none of the respondents used formal care.
- **Although care by one of the child's parents clearly remained the ideal for a majority of the women (both employed and nonemployed), the use of a relative was the next preferred option for younger children**

---

\* Although this category primarily consists of relatives outside of the nuclear family, in a few cases it includes care by the child's older sibling or some alternative arrangement involving either relatives or nonrelatives.

\*\* Although formal child care arrangements, including child care centers, preschools, and nursery schools, were included as an option for respondents to choose as their preferred child care arrangement, none of the mothers in this sample were using this type of care for their youngest child at the time of the interview.

**whose mother was employed.** Almost one third of the employed mothers who had a child under age three named a relative, such as the child's grandmother, as their ideal caregiver. Between 93–97 percent of nonemployed mothers of children under age three preferred parental care over other types of child care.

- **For children ages three to five, formal arrangements such as preschools, nursery schools and day care centers were the preferred form of nonparental care.** In fact, for employed mothers with a child aged four to five, formal care was more popular than parental care (50 percent versus 34 percent). Among mothers who preferred nonparental care arrangements, 80–91 percent of nonemployed mothers and 59–75 percent of employed mothers reported formal center-based care as the ideal form of child care for their three to five-year-old child. By comparison, relatives were preferred by 8–15 percent of nonemployed mothers and 22–35 percent of employed mothers with a child between ages three to five.
- **The use of sitters or family child care homes, although common in practice, was rarely named as ideal, regardless of the child's age or the mother's employment status.** Only 1–2 percent of nonemployed mothers and 2–5 percent of employed mothers said that one of these types of care was ideal. Among mothers who preferred nonparental care arrangements, these nonrelative care arrangements were more popular for younger rather than older children, but were significantly less likely to be preferred than relative care.

**Child Care in JOBS Employment and Training Program: What Difference Does Quality Make? (1993).** Marcia Meyers. *Journal of Marriage and the Family*, 55(3), pp. 767–83.

**Subject categories** Usage and Trends; Impact of Subsidy Policies

**Purpose of report** This report evaluates the adequacy of child care used by single mothers participating in California's GAIN program, a welfare-to-work program that provides child care subsidies and other services to help AFDC recipients meet mandated work requirements. Of particular interest is whether or not variations in the adequacy of the child care arrangement affect mothers' success in the program.

**Study design** *Data sources:* Panel study of California's GAIN program participants

*Year(s) of data collection:* 1992

*Data collection sites:* 3 counties in California

*Sample design:* Participants meeting study criteria were recruited in person at their GAIN orientation and offered \$20 for their participation in 3 telephone interviews. Only participants who actually began an education or job search activity after registering for GAIN were interviewed.

**Target group:** Single AFDC mothers participating in California's GAIN program with at least one child under age 13

**Sample size:** 356 mothers

**Data collection method:** 3 telephone interviews conducted during 1 year panel study

**Definition of child care:** Primary child care arrangement for the respondent's youngest child. Child care was defined as any care by an individual or facility other than the mother.

**Types of child care included in study:** Informal care by relatives or friends; licensed family child care; and licensed center-based care

**Definition of informal child care:** Informal care by family or friends and cases where no care is provided

**Notes/limitations:** Significant differences were found between study respondents and cases lost through attrition, and between study respondents and the larger GAIN population.

- Relevant findings**
- **After beginning the GAIN program, the percentage of participants using informal care substantially decreased.** During the three months prior to participating in the GAIN program, the majority of single mothers relied on informal child care arrangements for their youngest child. Eighty-four percent of these women either used informal care by family or friends or did not use any child care arrangements on a regular basis. The remaining 16 percent were using organized child care in a family child care home or center.
  - **During the three months following the GAIN orientation, only 39 percent of the women said they still relied on family or friends while they were in job readiness activities.** Fifty-two percent used licensed care in either a family child care home or center.
  - **The type of child care used while in the GAIN program did not make a significant contribution to women's success in the program.** There was no evidence that women who relied on informal care rather than organized arrangements had a different likelihood of dropping out before completing one year of the program.

**Characteristics of Infant Child Care: Factors Contributing to Positive Caregiving.** (1996). The NICHD Early Child Care Research Network. *Early Childhood Research Quarterly*, 11(3), pp. 269–306.

**Subject categories** Provider Characteristics; Quality of Care

**Purpose of report** This report had three purposes: (1) to identify the structural characteristics and caregivers' qualifications associated with sensitive, warm, and cognitively stimulating infant care; (2) to contrast five different types of nonmaternal infant child care in terms of structural features and caregivers' behaviors; and

(3) to contrast the results of this project with other recent large-scale studies of child care.

## Study design

**Data sources:** Sub-sample of NICHD Study of Early Child Care

**Year(s) of data collection:** 1991

**Data collection sites:** National sample of U.S. households

**Sample design:** Conditional random sampling of families reflecting demographic characteristics of catchment area. Sampling frame generated from birthing lists at 31 hospitals in the 10 research sites.

**Target group:** Children followed from birth who, at 6 months, were using nonmaternal child care for at least 10 hours per week

**Sample size:** 879 infants

**Definition of child care:** Primary nonmaternal child care arrangement provided to the focus child for 10 or more hours per week

**Types of child care included in study:** Paternal care; grandparent care; in-home care; family child care; and center-based care

**Definition of informal child care:** Paternal care; grandparent care; and in-home care

**Data collection method:** Parent interviews and 2 half-day observations of infants in their child care settings

**Notes/limitations:** Families in which child care observation was refused were more likely to have less educated parents, be a single-parent household, and have minority race status. Also, the sample did not include mothers under age 18, non-English-speaking mothers, or very ill infants. When combined, structural characteristics of child care settings and caregivers' qualifications accounted for only approximately 25 percent of the variance in observed positive caregiving behaviors.

## Relevant findings

- **Almost half of the infants received informal care from their father, grandparent, or in-home sitter as their primary child care arrangement.** Fifteen percent used paternal care; 17 percent used grandparent care; 15 percent used in-home care; 35 percent used family child care; and 18 percent used center-based care.
- **Center-based providers had more experience and specialized training in child development than home-based caregivers.** However, these variables were not found to be significantly associated with differences in caregiving behaviors.
- **Regardless of the type of care used, the majority of infants were observed to receive moderately or highly positive care.** This is a more positive view of nonmaternal infant care than reported by earlier large-scale studies.
- **For all types of child care, more positive caregiving behaviors were associated with child care settings with smaller numbers of children and smaller child-adult ratios.** The closer the child-adult ratio was to 1:1, the higher the probability of positive care. Results suggested that group sizes

and child-adult ratios were highest in child care centers and smallest in informal care provided within the child's home (e.g., with fathers, grandparents, and in-home sitters).

- **For all types of child care, the physical environment of the child care setting was significantly associated with the quality of care provided.** Those settings which appeared cleaner, safer and more stimulating had caregivers who provided more sensitive, warmer care. No significant difference in the quality of the physical environment was found for the four home-based types of care.
- **Positive caregiving behaviors with infants were most likely to be observed in arrangements provided in the child's home, whether provided by relatives or nonrelatives.**

**Poverty and Patterns of Child Care.** (1997). NICHD Early Child Care Research Network. In *Consequences of Growing up Poor*, Greg J. Duncan and Jeanne Brooks-Gunn, Editors, pp. 100-131. Russell Sage Foundation, 112 East 64th Street, New York, NY 10021. (212) 750-6000/Fax (212) 371-4761. (640 pp.; \$49.95 cloth, \$24.95 paper).

**Subject categories** Usage and Trends; Family Characteristics; Quality of Care; Impact of Subsidy Policies

**Purpose of report** This report examines how poverty affects the child care experiences of infants in terms of age of entry into nonmaternal care, number of hours in child care, type of care selected, and quality of care.

**Study design** *Data sources:* Sub-sample of NICHD Study of Early Child Care

*Year(s) of data collection:* 1991

*Data collection sites:* National sample of U.S. households

*Sample design:* Conditional random sampling of families reflecting demographic characteristics of catchment areas. Sampling frame generated from birthing lists at 31 hospitals in the 10 research sites.

*Target group:* A sub-set of children followed from birth who at 15 months of age were in nonmaternal child care for 10 or more hours per week

*Sample size:* 1,281 children

*Data collection method:* Home visits and maternal interviews when infants were ages 1, 6, and 15 months of age; observations of child care settings at ages 6 and 15 months

*Definition of child care:* Primary nonmaternal child care arrangement provided to the focus child for 10 or more hours per week

*Types of child care included in study:* Paternal care; grandparent care; in-home care; family child care; and center-based care

*Definition of informal child care:* Paternal care; grandparent care; and in-home care

*Notes/limitations:* Overall study sample did not include mothers under age 18, non-English-speaking mothers, or infants who were very ill at birth.

- Relevant findings**
- **At age 15 months, the primary care arrangement for over half of the children was care by their father, grandparent or in-home sitter.** Both family income and percentage of income contributed by the mother's earnings significantly predicted the type of care used for infants. Children receiving in-home care from someone other than a parent or grandparent were more likely to be in relatively large families with highly educated mothers and high incomes. Moderate-income families, especially those in which the mother contributed more than half the family income, were more likely to use out-of-home care by nonrelatives than were lower-income families and families in which the mother's income contributed less. Family size, mother's education, and having a partner or adult relative at home were all found to predict the type of care used for infants.
  - **One reason for the curvilinear relation of income to quality of care could be the availability of subsidies.** While only one-quarter of the poor families that used child care homes also used subsidies, the majority of poor families that used child care centers were subsidized.
  - **The percentage of poor families that received private "subsidies" in the form of financial help or free child care ranged from 9 percent to 83 percent, depending on the type of care.** Poor and near-poor families using in-home care by nonrelatives or relatives other than grandparents typically received it free or at reduced cost.
  - **Whether in grandparent care, in-home care, or family child care homes, children living in poverty received care that scored lower on most quality measures than the care received by children from families with incomes above poverty.**
  - **In relative care and in-home care, children in larger families received lower-quality care scores than did children from smaller families.**
  - **The quality of the care provided to girls was rated higher than that provided to boys in both child care homes and centers.**

**Neighborhood Child Care: Family, Friends, and Neighbors Talk about Caring for Other People's Children.** (1998). Toni Porter. Bank Street College of Education, Center for Family Support, Division of Continuing Education, 610 West 112th Street, New York, NY 10025. Report can be downloaded from the Center for Family Support Web site <[www.bnkst.edu/html/continuing/familySupport/neighborhood.pdf](http://www.bnkst.edu/html/continuing/familySupport/neighborhood.pdf)>.

- Subject categories** Parental Preferences/Constraints; Provider Characteristics; Quality of Care
- Purpose of report** This report provides descriptive information about kith and kin providers and sheds light on such issues as how these arrangements start, why they end, and the role that payment plays. The research is also intended to serve as the basis for planning services for kith and kin providers.
- Study design**
- Data sources:* New York City Focus group discussions with kith and kin providers
- Year(s) of data collection:* 1997
- Data collection sites:* New York City: East Tremont and Morrisania sections in the South Bronx and the Cypress Hills section in Brooklyn
- Sample design:* Nonprobability sample of providers who responded to fliers posted throughout three low-income New York City neighborhoods with large concentrations of Spanish speaking families
- Target group:* Low-income kith and kin providers
- Sample size:* 45 child care providers
- Data collection method:* Six focus group discussions
- Definition of child care:* People who care for at least one child under age six for at least 12 hours a week
- Types of child care included in study:* Care by relatives, neighbors, and friends
- Definition of informal child care:* Except where indicated, all findings are intended to represent a population of low-income informal kith and kin providers
- Notes/limitations:* (1) Most findings are presented as representing a population of informal kith and kin providers, although three of the participants were regulated. (2) Sample limited to a small nonprobability sample of low-income Hispanic and African American providers who were recruited to participate after responding to a flyer. (3) Statistical tests suggest that this population differs from the national population of kith and kin providers.
- Relevant findings**
- **Most providers lacked formal child care training and few had attended college.** However, almost all of them had cared for children for many years and a significant number had actively sought opportunities to learn more about children by volunteering at their child's early childhood program or school, by attending parenting classes or workshops, or by reading materials. Most providers had children of their own.

- **Two-thirds of the providers cared for only one or two children other than their own children.** Four providers cared for five or six children, but these children came at different times of the day or night; they were not all in care at the same time. Nearly half of the children in care were toddlers. Five-year-olds represented the second largest age group, followed by school-age children. Only four participants cared for infants under one year of age.
- **Many of the providers had long-standing relationships with the children for whom they cared.** Almost half of the providers were related to the children, and some had been caring for toddlers or two-year-olds since they were a few weeks old. There were, however, a small number of providers, younger women in their 20s, who had only been watching the children in their care for two or three months.
- **Problems with parents represented difficult aspects of caring for other people's children.** These included conflicts over payment, ambivalence about helping out and being taken advantage of, differences in child rearing styles, boundaries, and coping with behavioral issues. While many providers indicated that the issues placed stress on their relationship with parents, only one woman had actually ended a child care situation as a result.
- **Low-income kith and kin providers offered a variety of reasons for their decision to care for other people's children.** Some cited the gratifying experience of being able to help out their daughters or sons, their sisters, their friends, or their neighbors. Others talked about the satisfaction of caring for children and watching them grow as well as teaching them and seeing them learn. There were also some women, irrespective of their relationship to the parents, who said that children filled a gap, an empty space in their lives, and who talked about child care in terms of being needed.
- **When asked how their child care arrangements started, most low-income kith and kin providers talked about offering to help or responding to requests for assistance, rather than seeking opportunities to earn money.** Some women talked about arrangements that started with recommendations from other parents. Other women, primarily older women who had been watching people's children for many years, proudly described their reputations as the "caregiver of the neighborhood." Only two women said that they actively sought out parents who needed child care.
- **Many low-income kith and kin providers talked about having a schedule, with rhythms that sound like those of parents of young children.** Participants did not use the term curriculum to describe the activities in which they engaged children. Instead, they said they took the children to the park or on other outings, read books with them, helped them with their homework, prepared meals for them, bathed them, and put them down to sleep. Many providers also turned to television, especially videos and video games, to occupy the children.
- **Most low-income providers expressed interest in gaining information on a wide range of issues, ranging from how to support children's**

development to other services in the community and opportunities for employment in child care. When asked about how they wanted to obtain this information, participants voiced strong opinions in favor of both written materials and video tapes, with arguments about the advantages of each source. Participants also expressed overwhelming interest in support groups, where providers could talk to and learn from one another.

**Patterns and Growth of Child Care Voucher Use by Families Connected to Cash Assistance in Illinois and Maryland. (1999).** Jessica Brickman Piecyk, Ann Collins, and J. Lee Kreder. New York, NY: Columbia University, National Center for Children in Poverty at the Mailman School of Public Health, 154 Haven Avenue, New York, NY 10032. (212) 304-7100; Fax: 212-544-4200; E-mail: nccp@columbia.edu; (31 pp. \$5.00). Report can be downloaded from <<http://cpmcnet.columbia.edu/dept/nccp/ccrprb2o.html>>.

- Subject categories** Usage and Trends; Family Characteristics; Parental Preferences/Constraints; Quality of Care (1, 2, 3 & 6)
- Purpose of report** This report examines the use of child care vouchers by children from Illinois and Maryland whose families were current or former recipients of cash assistance (either AFCD or TANF). It also discusses child care subsidy policy within these two states and patterns of growth and change over time in voucher use by current and former recipients of cash assistance.
- Study design**
- Data sources:* Records from state child care subsidy administrative systems
- Year(s) of data collection:* 1997–1998
- Data collection sites:* Illinois and Maryland
- Sample design:* Analyzed child care subsidy administrative system records for all children meeting study criteria in January 1998
- Target group:* Children of current or former recipients of AFDC or TANF who used child care subsidy vouchers
- Sample size:* 79,410 children in Illinois and 16,831 children in Maryland. These children were members of 56,575 families (40,338 in Illinois and 9,363 in Maryland).
- Data collection method:* Record review
- Definition of child care:* Primary child care arrangements for all subsidized children in the respondent's household under age 14
- Types of child care included in study:* Relative care; in-home care; family child care; and center-based care (excluding Head Start and prekindergarten programs)
- Definition of informal child care:* Relative care and in-home care
- Notes/limitations:* (1) Illinois data exclude children receiving subsidies through contracts as opposed to vouchers. Since Maryland only uses vouchers, data for

all of its subsidized children are included. (2) The accuracy of the data may be questionable as they were developed/entered for administrative purposes, and standardization and quality control guidelines may not have followed strict research protocols.

#### Relevant findings

- **In January 1998, most subsidized children in Illinois used informal child care arrangements, while subsidized children in Maryland more frequently used formal arrangements.** In Illinois, 66 percent of the children used either relative care (41 percent) or in-home care (25 percent); 34 percent of the children used either center care (18 percent) or family child care (16 percent). In Maryland, only 30 percent of the children used either relative care (13 percent) or in-home care (17 percent), while 70 percent used either center care (39 percent) or family child care (31 percent).
- **In Maryland, the most common form of relative care was care by one of the child's grandparents.** Among the 13 percent of children using relative care in this state in January 1998, 57 percent had a grandparent as their primary child care provider; aunts and uncles cared for 30 percent of these children; and 13 percent were cared for by other relatives. (This was not analyzed in Illinois.)
- **While Illinois experienced significant growth in the use of all forms of non-parental child care between January 1997 and January 1998, the distribution of children by type of care did not significantly change.** Slight changes were observed in Maryland, where usage of family child care declined (from 35 to 31 percent) and relative and in-home care usage increased (from 26 to 30 percent).
- **In January 1998, school-age children were more likely than younger children to use informal child care arrangements.** In Illinois, 86 percent of children ages 10-12 and 74 percent of children ages six to nine used relative care or in-home care, while only 58 percent of children ages three to five and 57 percent of children under age three used these informal arrangements.\* Similarly, in Maryland, while 49 percent of children ages 10-12 and 37 percent of children ages six to nine used relative or in-home care, these types of care were only used by 23 percent of children ages three to five and 28 percent of children under age three.\*\* For both states, infants and toddlers were more likely than children in other age groups to use family child care, and preschoolers were the most likely to use center care.
- **In January 1998, children from families with three or more children were more likely to use informal care than children from smaller fami-**

---

\* In Illinois, relative care was used by 50 percent of children ages 10-12; 45 percent of children ages six to nine; 37 percent of children ages three to five and 39 percent of children under age three. In-home care was used by 36 percent of children ages 10-12; 29 percent of children ages six to nine; 21 percent of children ages three to five and 18 percent of children under age three.

\*\* In Maryland, relative care was used by 19 percent of children ages 10-12; 16 percent of children ages six to nine; 10 percent of children ages three to five and 13 percent of children under age three. In-home care was used by 30 percent of children ages 10-12; 21 percent of children ages six to nine; 13 percent of children ages three to five and 15 percent of children under age three.

lies. In Illinois, 78 percent of children from families with three or more children used relative or in-home care, compared to 56 percent of children from families with one to two children.\* In Maryland, relative or in-home care was used by 39 percent of the children from families with three or more children and 25 percent of the children from families with one to two children.\*\*

**Some Economic Complexities of Child Care Provided by Grandparents.**  
(1989). Harriet B. Presser. *Journal of Marriage and the Family*, 51(3), pp. 581–591.

<b>Subject categories</b>	Usage and Trends; Family Characteristics; Child Care Costs; Provider Characteristics
<b>Purpose of report</b>	This report focuses on grandmothers as providers of child care, exploring some of the economic complexities involved in such arrangements.
<b>Study design</b>	<p><i>Data sources:</i> Sub-sample of the 1984 Youth Cohort of the National Longitudinal Survey of Labor Market Experience (NLSY)</p> <p><i>Year(s) of data collection:</i> 1984</p> <p><i>Data collection sites:</i> National sample of U.S. households</p> <p><i>Sample design:</i> National probability sample of males and females who were between 14–21 years of age as of January 1, 1979. Blacks, Hispanics and economically disadvantaged whites were oversampled. Provider sample is linked to parent sample.</p> <p><i>Data collection method:</i> Fifth round of panel study interviews</p> <p><i>Target group:</i> Employed mothers between ages 19–26 with at least one child under age five</p> <p><i>Sample size:</i> 796 mothers</p> <p><i>Definition of child care:</i> Primary child care arrangement used by youngest child while mother works</p> <p><i>Types of child care included in study:</i> Parental care; relative care; and care by nonrelatives (e.g., in-home care, family child care, and center care)</p> <p><i>Definition of informal child care:</i> Relative care</p> <p><i>Notes/limitations:</i> The determinants of grandmother care cannot be assessed adequately with this data set, given the absence of data on the social and economic characteristics of all grandmothers (not only those who provide child care) as well as their physical proximity to the mother.</p>

---

\* In Illinois, relative care was used by 47 percent of families with three or more children and 37 percent of families with one to two children. In-home care was used by 31 percent of families with three or more children and 19 percent of families with one to two children.

\*\* In Maryland, relative care was used by 16 percent of families with three or more children and 11 percent of families with one to two children. In-home care was used by 23 percent of families with three or more children and 14 percent of families with one to two children.

## Relevant findings

- **About half of the children in nonparental care arrangements were cared for by a relative while their mother worked.** Grandmother care was the most common form of relative care. Two-thirds of care provided by a relative was care by the child's grandmother. Grandmother care accounted for 30 percent of all child care arrangements (including parental care), 24 percent of all primary care arrangements, and 7 percent of all secondary arrangements.\*
- **Children of unmarried mothers were more likely than children of married mothers to use relative care.** Among children of unmarried mothers who were in a nonparental care arrangement, 51 percent used relative care compared with 46 percent of the children of married mothers.
- **Over one-third of the grandmothers caring for their grandchildren had other employment.** Almost one-third of the grandmothers who were principal caregivers and half of grandmothers who were secondary caregivers reported that they had other employment in addition to caring for their grandchild(ren).
- **Employed caregiving grandmothers were less likely to work nontraditional hours than children's mothers.** Among employed mothers who relied on grandmothers for child care, 26 percent began work between 4 p.m. and 4 a.m. or had rotating shifts compared with 11 percent of employed caregiving grandmothers.
- **Less than half of the grandmothers who provided child care for a grandchild received some type of compensation for their services.** Thirty-one percent of these grandmothers received cash payments, and an additional 12 percent received noncash payments such as meals, transportation, or other services. Employed grandmothers were less likely than nonemployed grandmothers to receive some type of compensation for providing care to their grandchild. More than half of nonemployed grandmothers received either cash or in-kind services in exchange for their child care services compared with just over a quarter of employed grandmothers. Grandmothers who provided care for more hours per week were more likely to receive cash payments for their services. While 50 percent of grandmothers who provided care for a grandchild 40 or more hours per week were paid in cash, cash payment was received by only 13 percent of grandmothers who provided care for less than 20 hours per week. When noncash payments were included, this relationship was not significant at the .05 level.

---

\* There were some cases where different grandmothers were primary and secondary caregivers.

**REACH/JOB Participants “Approved Home” Child Care Survey. (1991).** Janet Rosenzweig Smith. State of New Jersey Department of Human Services, Division of Economic Assistance. Janet Rosenzweig Smith, Ph.D., Director, Mercer County Department of Human Services, P.O. Box 8068, Trenton, NJ 08650. (609) 989-6526. (Free).

<b>Subject categories</b>	Family Characteristics; Parental Preferences/Constraints; Provider Characteristics; Quality of Care
<b>Purpose of report</b>	This report explores child care decisions and experiences of parents participating in New Jersey’s REACH/JOB program, a welfare-to-work program that provides child care subsidies and other services to help AFDC recipients meet mandated work requirements. Specifically, researchers examined reasons why many participants choose to use “approved child care homes” over other types of child care providers, the extent to which accessibility of different child care arrangements affects that choice, and how satisfied participants utilizing approved home care are with their child care arrangement. This report also describes the attitudes, behaviors, and demographic characteristics of approved home providers and the environments where care is provided.
<b>Study design</b>	<p><b>Data sources:</b> Surveys of parents and interviews/observations of providers participating in New Jersey’s REACH/JOB approved home child care program</p> <p><b>Year(s) of data collection:</b> 1990</p> <p><b>Data collection sites:</b> New Jersey</p> <p><b>Sample design:</b> All REACH/JOB participants with children in approved homes were mailed parents surveys. Also, a stratified random sample of approved child care homes was drawn from a list of all self-arranged providers known to the New Jersey Department of Economic Assistance.</p> <p><b>Target group:</b> REACH/JOB participants using approved child care homes and a sample of approved child care homes</p> <p><b>Sample size:</b> 1,155 REACH/JOB participants and 200 providers</p> <p><b>Data collection method:</b> Data for REACH/JOB participants were collected via mail surveys and data for approved home providers were collected via in-person interviews and observations</p> <p><b>Definition of child care:</b> Care provided to all children in the respondent’s household who receive primary child care within an approved family child care home</p> <p><b>Types of child care included in study:</b> “Approved child care homes,” i.e., license-exempt informal child care providers (such as friends, neighbors, or relatives) who have been permitted to care for children subsidized through New Jersey’s REACH/JOB program</p> <p><b>Definition of informal child care:</b> Approved child care homes</p> <p><b>Notes/limitations:</b> Analyses are limited to sample respondents who completed questionnaires, interviews, and/or observations.</p>

- Relevant findings**
- **The most common reason cited for choosing an approved home over other child care options was a preference for a provider the family already knew or liked.** Eighty-seven percent of the participants said they wanted someone they knew to care for their children, and 80 percent stated that their family liked the caregiver and so they wanted that person to provide care. When asked whether they would switch to a different child care provider if there were other types of child care arrangements available near them that were affordable and that had openings for their children, only 12 percent said they would opt for a change.
  - **Seventy percent of the providers reported that they started caring for these children before the parent enrolled in the REACH program.** Eighty-seven percent reported that there hadn't been a break in child care for these children since they started caring for them.
  - **For the vast majority of kith and kin providers, the motivation for providing care was to help out the child's parents.** Eighty-five percent of the providers became an approved home caregiver at the request of the parents, while only 9 percent did this for the money.
  - **Only 34 percent of the approved home providers indicated that they were willing to complete all of the requirements for becoming a registered family child care home in the state, even though they were informed that this would result in a higher payment rate.** Three percent said they would be willing to complete some of the requirements, but almost two-thirds said they wouldn't complete any. More than half of the providers were aware that they could receive a higher REACH payment rate if they became a registered family child care provider. Younger providers and renters, as opposed to homeowners, were more likely to agree to comply with all of the registration requirements.
  - **Most approved home providers had all the equipment necessary to ensure the health and safety of the children in their care.** Seventy-one percent of the providers possessed all the safety items the state required for regulated family child care providers, including smoke detectors, safety gates, outlet covers, flashlights, first aid kits, and batteries. Most also took the required safety precautions to prepare for emergency situations. Fifty-nine percent of approved homes had complete emergency contact number information for the child(ren)'s parent(s), and 86 percent were able to identify a back-up care provider in the event an emergency took them away from home.

**Child Care and AFDC Recipients in Illinois: Patterns, Problems and Needs.** (1991). Gary L. Siegel and L. Anthony Loman. Institute of Applied Research. Distributed by Illinois Department of Public Aid, Child Care and Development Section, 310 South Michigan Avenue, Chicago, IL 60605. (312) 793-3610/Fax (312) 793-4881. (146 pp., Free; *Digest of findings and conclusions*, 36 pp., Free).

**Subject categories** Usage and Trends; Family Characteristics; Parental Preferences/Constraints; Child Care Costs; Provider Characteristics; Quality of Care; Impact of Subsidy Policies

**Purpose of report** This report examines the child care needs and experiences of single parents with children under age 14 as they tried to enter the workforce and leave the AFDC program in Illinois. A multi-method research project, it involved mail surveys to parents and providers, as well as focus group discussions and key informant interviews.

**Study design** *Data sources:* Parent and provider surveys, focus groups, and key informant interviews about child care used by single-parent AFDC families in Illinois  
*Year(s) of data collection:* 1990  
*Data collection sites:* Illinois  
*Sample design:* *Initial parent survey:* Stratified sample of families meeting study criteria within the Illinois Department of Public Aid client information system database. *Follow-up parent survey:* Sample of parent survey respondents residing in areas with the highest response rates. *Focus groups:* Nonprobability sample of AFDC and former AFDC clients. *Provider survey:* Centers and family child care homes were primarily sampled from licensed provider lists in areas with the highest rates of AFDC participation and from lists of Title XX providers. Other providers were sampled directly from lists of providers being reimbursed for transitional child care.  
*Target group:* *Initial parent survey:* Current and former single-parent AFDC families with children under age 14. *Follow-up parent survey:* Parent survey respondents with the greatest need for child care (i.e., current or former Project Chance participants and parents who were in school, working, or worked sometime in the past). *Focus groups:* AFDC and former AFDC recipients. *Provider survey:* Providers accessible to low-income and AFDC families  
*Sample size:* *Initial parent survey:* 7,168 families. *Follow-up parent survey:* 121 families. Focus groups: 164 parents. *Provider survey:* 1,001 providers  
*Data collection method:* *Parent survey:* Initial mail survey. *Follow-up parent survey:* In-person, in-depth interviews. *Focus groups:* 15 focus group sessions. *Provider survey:* Mail survey  
*Definition of child care:* *Parent surveys:* All child care arrangements used for all children needing care in the respondent's household. *Provider survey:* Care provided for all children in the provider's care  
*Types of child care included in study:* *Parent surveys:* Relative care; in-home

care; family child care (primarily unlicensed); center-based care, and other child care arrangements (e.g., sibling care, self-care, and before- and after-school programs). *Provider survey:* Relatives and other informal providers; family child care homes (primarily licensed); and child care centers

**Definition of informal child care:** *Parent surveys:* Relative care and in-home care. *Provider survey:* Relatives and other informal providers

**Notes/limitations:** There were some significant demographic differences between respondents and nonrespondents in the parent survey sample (e.g., parent's age, study group, geographical region). Weights were developed to correct for biases.

### Relevant findings

- **Most of the parents who used some form of nonparental child care relied on informal providers for at least part of the week.** Of these 47 percent used relative care, 13 percent used in-home care, and 31 percent used family child care that was primarily unlicensed\* on a regular basis. Families with many children were more likely to use lower-cost informal care arrangements. Relative or in-home care was exclusively used by almost half of the families, regardless of the number of children under age 14 in the respondent's household. However, these informal arrangements were used most by families with four children as opposed to one to three (56 percent versus 47 percent). Families with seriously disabled or chronically ill children were more likely to use informal child care arrangements for their children under age six. Children in rural areas were more likely to use relative and in-home care than children in more urbanized parts of the state.
- **Although most families used informal child care, over half indicated a preference for a formal child care arrangement.** Parents who preferred informal care with relatives or in-home care providers most often referred to the safety of their children and their comfort in a familiar environment. Safety was important to most parents, regardless of their preferred child care type, but definitions of safety varied.
- **A majority of parents expressed a concern for quality care, but their perceptions of quality varied.** Quality care most often referred to care that was nurturing and attentive to their children, but parents who preferred center care often emphasized their desire for educational and social development opportunities.
- **More than half of the parents interviewed said that it was important that their children be taken care of by a provider licensed by the state.** Many of those who were currently using relatives said that, if they had to use nonacquaintances, they would want them to be licensed.

---

\* Although information on licensing was not obtained from the surveys mailed to parents, data obtained through interviews and focus groups suggested that the bulk of family care homes were not licensed. These providers were often referred to by respondents as "sitters" or "friends." The authors' conservative estimate was that less than a fourth of the family child care homes were licensed.

- **Most of the families who expressed a preference for formal child care were not using this type of care.** Only 28 percent of the families who preferred a center or nursery school and 22 percent of the families who preferred a before/after school program were using one or both of those arrangements full time. By comparison, more than half of those who said they wanted child care in their own home and 74 percent who preferred child care in a relative's home were using one or both of those arrangements full time. Half of the families who preferred licensed family child care homes were using a family child care home.
- **The cost of care was the most frequently cited constraint that led many parents to rely on informal care, often provided by relatives.** Over half of the families using each type of care reported affordability problems, but those using the least expensive arrangements most often cited cost as a problem.
- **Long waiting lists and an overall shortage in the supply of child care center slots encouraged many parents to turn to relatives and other informal providers for child care assistance.** Over half of all parents surveyed (52 percent) reported having trouble finding care without a long wait for an opening.
- **Many families reported difficulties in finding formal child care facilities within a reasonable distance from their home.** During follow-up interviews and focus group discussions with parents, transportation was often cited as an obstacle to using formal care, and some families said they chose to use an informal provider to save on transportation costs.
- **The lack of child care centers offering care during nontraditional hours generated an increased demand for informal child care arrangements.** Half of the parents who worked had jobs that required at least some work during evenings and on weekends, and 64 percent reported trouble finding child care during these nontraditional hours. Few of the child care centers surveyed for this study were open after 6 p.m. or on weekends, and most were reluctant, if not unwilling, to accept children on an intermittent and changing basis; over half of the informal providers offered evening and/or weekend care. Informal providers were the most likely to offer care during weekend and evening hours and to provide care when children were sick.
- **Families who did not receive subsidies through Project Chance or Transitional Child Care Assistance were more likely to use informal arrangements than families who did.** Families receiving child care subsidies through Project Chance were significantly less likely than families not receiving subsidies to use informal child care arrangements. Among families where the parent attended school, 36 percent of Project Chance families relied exclusively on relative or in-home care, compared to 55 percent of families who did not receive any child care subsidies. Twenty-eight percent of the Project Chance participants solely relied on formal child care facilities, compared to 14 percent of families who did not receive any subsidies. Among families where the parent worked and did not receive AFDC, 34

percent of Transitional Child Care Assistance participants relied exclusively on relative or in-home care, compared to 51 percent of similar families who did not receive any child care subsidies.

- **Many informal providers cared for only one child, but 34 percent frequently had children of their own who required care.** Including their own children, informal providers cared for about 2.5 children each. Forty-two percent of the children cared for by informal providers were of school-age; 30 percent were preschool-age; and 29 percent were infants or toddlers.

**Statistics in Brief: Child Care and Early Education Program Participation of Infants, Toddlers, and Preschoolers.** (1996). Jerry West, Dee Ann Wright, and Elvie Germino Hausken. National Center for Educational Statistics, U.S. Department of Education, ED Pubs, P.O. Box 1398, Jessup, MD 20794-1398. (877) 4ED-PUBS/Fax (301) 470-1244. (10 pp.; Report No. NCES 95-824, Free).

<b>Subject categories</b>	Usage and Trends; Family Characteristics; Parental Preferences/Constraints
<b>Purpose of report</b>	This report contains information on the care and educational experiences of young children who have yet to enter kindergarten. It describes their participation in a variety of early care and education settings, including home-based and center-based arrangements. It also examines characteristics of children and their families that have been found to be related to children's participation rates.
<b>Study design</b>	<p><b>Data sources:</b> Sub-sample of the 1995 National Household Education Survey (NHES), Early Childhood Program Participation Component</p> <p><b>Year(s) of data collection:</b> 1995</p> <p><b>Data collection sites:</b> National sample of U.S. households</p> <p><b>Sample design:</b> Random digit-dial sample of households within the data collection sites. Children enrolled in transitional kindergarten, kindergarten and pre-first grade were assigned a higher probability of selection.</p> <p><b>Data collection method:</b> Computer-assisted telephone interviews</p> <p><b>Target group:</b> Families with at least one child under age six who was not yet enrolled in kindergarten</p> <p><b>Sample size:</b> 7,557 households</p> <p><b>Definition of child care:</b> All care provided for up to 2 children in the respondent's household. No consideration is given to the number of hours a child spends in one setting as compared to others.</p> <p><b>Types of child care included in study:</b> Parental care; relative care; in-home care; family child care; and center-based care</p> <p><b>Definition of informal child care:</b> Relative care and in-home care</p>
<b>Relevant findings</b>	<ul style="list-style-type: none"><li>• <b>Among families using nonparental child care arrangements, 42 percent</b></li></ul>

relied on informal providers on a regular basis for at least part of the week. Thirty-five percent of the children used relative care, while 7 percent used in-home care.

- **Among those using nonparental child care arrangements, younger children were more likely than older children to be in relative care, while older children were more likely to be in center care.** Fifty-three percent of children under age one were in relative care; this percentage declined progressively as the children aged, with only 18 percent of five-year-olds in relative care. Younger children were also more likely than older children to use a family child care home, although the differences were smaller; family child care usage declined from 31 percent before age one to 1 percent at age five. In comparison, while only 16 percent of infants used center care, 89 percent of five-year-olds used this formal child care arrangement.
- **Among mothers using nonparental child care arrangements, those with more education were less likely to place their birth to five-year-old children in the care of a relative while they worked, but more likely to rely on an in-home care provider.** The mothers of 29 percent of the children in relative care had attended at least some college, while the mothers of 44 percent of the children had not gone to school beyond high school.
- **Among families using nonparental child care arrangements, those with lower household income were more likely to use relative care.** Forty-four percent of children living in households earning \$10,000 or less used relative care, compared with only 18 percent of families making more than \$75,000.
- **Among families using nonparental child care arrangements, blacks and Hispanics relied more heavily on relatives for child care than whites.** Forty-eight percent of black and Hispanic children used relative care compared with only 29 percent of white children.

**Raised in East Urban: Child Care Changes in a Working Class Community.** (1991). Caroline Zinsser. Teachers College Press of Columbia University, 1234 Amsterdam Avenue, New York, NY 10027. Distributed by American International Distribution Corporation, 64 Depot Road, Colchester, VT 05446. (800) 222-8333. (188 pp.; \$17.95 + p/h).

**Subject categories** Usage and Trends; Family Characteristics; Parental Preferences/Constraints; Child Care Costs; Provider Characteristics; Quality of Care

**Purpose of report** Through findings from an ethnographic case study, this report presents a detailed picture of how families in a small, ethnically diverse urban area balance family life with employment. It includes information on parental expectations about child care and the types of arrangements used, as well as parental satisfaction with these arrangements and information regarding the arrangements themselves.

## Study design

**Data sources:** Ethnographic case study

**Year(s) of data collection:** Not given

**Data collection sites:** A small, ethnically diverse city in the Northeast—East Urban—with well-established neighborhoods, that was experiencing changes due to economic and social forces, such as the movement of major employers out of the city and gentrification

**Sample design:** Nonprobability sample of child care users and providers in an urban working class community

**Target group:** Primarily white, working, and lower-middle class families and child care providers residing within the city

**Sample size:** 18 parents, 14 providers, and one community representative

Data collection method: 50 in-person, qualitative interviews and conversations with families and providers conducted over a seven-month period

**Definition of child care:** All child care arrangements made for all children while one or both parents are working

**Types of child care included in study:** Care by family and relatives; babysitters (i.e., in-home care and unregulated family child care), and child care centers

**Definition of informal child care:** Care by family and relatives; in-home care providers; and family child care homes

**Notes/limitations:** Ethnographic case study of a small nonprobability sample of families and providers in one urban community. Sample was not meant to statistically represent any one segment of the U.S. population.

## Relevant findings

- **In general, families' child care preferences were shaped by deeply held traditional family values, but changes in economic circumstances also played a role.** Most of these families viewed maternal care as the ideal child care arrangement for their children. When mothers were employed outside the home, they generally tried to make arrangements that came closest to this ideal, choosing providers who provided care in a home setting and who were similar to themselves, provided continuity in child rearing, and reinforced their own value system. Younger mothers were more likely than their mothers to work and use nonparental care.
- **The scarcity of child care centers left many families with no alternative except an informal child care arrangement: there were only five centers—two fairly expensive privately funded centers, and three publicly funded centers with waiting lists of 50–100 families.** In addition, the social stigma of public assistance and the cost of child care centers prevented many working-class families from enrolling their children in a center.
- **The cost of child care was greatest for those families who earned incomes in the middle- or lower-middle range.** Families in this income bracket earned too much to be eligible for child care subsidies, but found it difficult to afford private center care. These families often turned to infor-

mal care providers, but were unable to benefit from the tax policies designed to help working parents because they didn't report their child care expenses; reporting these expenses would have risked identification of the informal providers who were not reporting their child care income on their tax forms. Families who earned high-end salaries were able to afford child care with or without the child care tax credit.

- **Informal providers generally viewed the child care they provided as a familial or social service rather than a business.** Both relatives and nonrelatives viewed their employers as family. For informal providers, child care was simply an extension of their own familial responsibilities and domestic talents. Informal providers had mixed feelings towards the mothers they worked for, especially toward those mothers who appeared to them to work by choice rather than necessity. While providers viewed staying at home with young children as ideal and self-fulfilling behavior for young mothers, their upper-middle-class employers regarded combining motherhood with a career as self-fulfilling.
- **Most informal providers did not report their earnings as income to be taxed.** Most of the informal providers interviewed were paid in cash, and none had ever provided their employer(s) with a social security number. Many felt that, because their overall earnings were so low, they could not pay the taxes they would incur by reporting their income. Neglecting to report this income made them ineligible for government-supported benefits such as social security and federal unemployment insurance, but this simply reinforced their views that this work was different from regular employment. In addition, informal child care providers did not receive standard benefits from their employment. None of the informal child care providers received health insurance from their employers, and most didn't receive payment when the child was on vacation or when they were on vacation or out sick.
- **Economic factors generally determined the number of children cared for by informal providers.** To ensure that their children received more individual attention from their caregiver, many higher-income families were willing and able to pay larger sums of money to ensure that their child care provider did not care for very many children at once; some paid for exclusive care within their own homes (i.e., nannies). Providers caring for lower-income families generally charged less for their services, but had to compensate for this by caring for a greater number of children. Few informal providers cared for an illegally large number of children. Most of the informal providers cared for only a few children, and those caring for larger numbers, usually provided care on staggered schedules, which kept them within the legal limits of no more than five children.
- **Informal child care providers emphasized physical care and keeping children safe and healthy over opportunities for educational or social development.** These providers were much less likely than child care centers to care for children with special needs and tended to offer activities such as

eating, napping, watching television, or playing with games and toys; outdoor activities often included trips to the park and nearby stores. Overall, there was little creative or expressive play, and little emphasis was placed on activities that promoted literacy.

- **Informal providers were better able to accommodate parents' nontraditional work schedules and were more likely than centers to provide care for infants and toddlers.**
- **Informal family child care providers reported that they had very little discussion with parents about their children's day once the initial period of employment was past.** Aside from reporting on illnesses or small accidents, communication between caregivers and parents appeared to revolve around a narrow spectrum of reporting how children ate and slept and whether they were "good." These reports served to reassure parents that the provider had been attentive to their children, not to describe children's development and activities.