



# Supporting and Strengthening FFN Care: Honoring Family Choice and Recognizing the Need for Flexible Care

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## A Note from the Directors

Addressing equity in early childhood systems means supporting the child care decisions of parents and families. It means respecting that they know what is best for their families.

Half of all families whose children who are in non-parental care choose and use family, friend and neighbor (FFN) child care, and yet this is the least supported aspect of the child care and early learning sector. FFN care is also the setting in which we find the most children, families and caregivers from marginalized and underserved communities. These are the caregivers who care for children whose parents work late nights and early mornings, weekends, and swing shifts; who care for families with home languages other than English; who provide care in child care deserts. For the early childhood sector to seriously tackle issues of equity and decades of systematic racism, we must address the lack of attention to and support for family, friend and neighbor child care.

We must turn our interest, our investigations and our investments toward this setting and the children, families and caregivers for whom it is truly a lifeline in order to address the deep inequities in our system. We must act now because parents want and need this form of care and the science supports that quality care and developmental thriving can be realized in this setting. By creating systems to support and strengthen FFN care, our nation can provide critical support for children, families and caregivers.

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## SECTION 1

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# Who Are the FFN Caregivers?

There are over 4 million [home-based child care](#) providers providing care to 7 million children ages 0-5 in the United States. The providers and caregivers in this sector are as diverse as the children and families they serve. They include both licensed family child care providers, who typically operate as small businesses, as well as family, friend and neighbor child caregivers. Family, friend, and neighbor care (FFN), sometimes referred to as Kith and Kin care, is the largest group of caregivers in the country<sup>1</sup>. In fact, one in four children under the age of five is cared for by a grandparent<sup>2</sup>. Most FFN caregivers are women and approximately half are people of color<sup>3</sup>. Family, friend and neighbor care exists in every community in America and is the mainstay of child care for rural communities, babies and toddlers<sup>4</sup>, Black and Latinx families, and those living in homes with low-incomes<sup>5</sup>.

## SECTION 2

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# Why FFN Care?

Family, friend, and neighbor caregivers and providers may have different motivations for providing child care and different goals for themselves and the children they care for. The majority of FFN caregivers are motivated to provide this form of care out of a sense of duty to support their family, their neighbors, or their community and because of their love and concern for the children they care for. Many do not consider themselves providers at all but rather grandmothers, aunts, and life-long family friends caring for children they love. Relative and neighbor caregivers often share the cultural, linguistic and child rearing practices of the family. Spanish-speaking parent respondents of a large survey of child care users in California showed a strong preference for home-based child care with 28% preferring licensed home-based care and 23% preferring FFN care (compared to 18% preferring center-based care)<sup>6</sup>. These caregivers are trusted members of their extended family and community and are the **deliberately chosen child care option for many families**, especially for their babies. They are also often the caregivers who are available to parents who work non-traditional or unpredictable hours, want to keep siblings together, and are looking for the most affordable care.

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<sup>1</sup> Toni Porter, Diane Paulsell, Patricia Del Grosso, Sarah Avellar, Rachel Hass, and Lee Vuong. [A Review of the Literature on Home-Based Child Care: Implications for Future Directions](#) Mathematica. January 15, 2010.

<sup>2</sup> [The Grand Plan: Hear from Grandparents Who Provide Child Care](#). Zero to Three, 2017.

<sup>3</sup> [About the Early Childhood Workforce, Early Childhood Workforce Index 2018](#), Center for the Study of Child Care Employment, University of California, Berkeley, 2018.

<sup>4</sup> Katherine Paschall, [Nearly 30 percent of infants and toddlers attend home-based child care as their primary arrangement](#), Child Trends, 2019.

<sup>5</sup> Toni Porter, Diane Paulsell, Patricia Del Grosso, Sarah Avellar, Rachel Hass, and Lee Vuong. [A Review of the Literature on Home-Based Child Care: Implications for Future Directions](#) Mathematica. January 15, 2010.

<sup>6</sup> [COVID-19 Parent Survey: How the pandemic has impacted California parents' child care plans and preferences](#), California Child Care Resource and Referral Network. September 2020.

**SECTION 3**

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## Science affirms the critical role of FFN caregivers

The evidence is clear: healthy brain development and resilience in young children is grounded in their attachment to loving and available caregivers who engage them in responsive relationships<sup>7</sup>. This is precisely who FFN caregivers are and who our systems should be supporting to facilitate lasting, trusting relationships, the foundation of quality care for millions of children.

Research has established that learning, development and thriving for young children depends on reciprocal, loving relationships that stimulate child development<sup>8</sup>. To improve outcomes for children, we must prioritize relationship-based caregiving and continuity of care. Upon this critical foundation of loving care, we can build opportunities for cognitive skill development and school readiness support by upskilling caregivers through effective professional development and coaching and by leveraging innovation to ensure that both loving care and appropriate learning occur.

**INNOVATION EXAMPLE:** [LENA](#) is a talk-odometer that counts the number of conversational turns between an adult caregiver (parent, caretaker, teacher) and a young child. High number of conversational turns are correlated with improved kindergarten readiness and school success. [LENA Start](#) helps families capture this data and then use it to inform small group coaching sessions with parents. [LENA Grow for FCC](#) does the same for home-based child care providers; it measures conversational turn taking in the home and then coaches use the data to support caregivers in increasing and improving quality talk interactions.

**SECTION 4**

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## We Can Support and Strengthen FFN Care

As the body of evidence and research base for including and supporting FFN care is emerging, there are already great examples of ways to strengthen the sector and give providers the support and resources their critical role in child care and development merits. There are also lessons to be learned from other sectors.

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<sup>7</sup> “In Brief: The Science of Early Childhood Development,” Center on the Developing Child, Harvard University, accessed on May 17, 2021 at <https://developingchild.harvard.edu/resources/inbrief-the-science-of-early-childhood-development/>

<sup>8</sup> “Three Principles to Improve Outcomes for Children and Families,” Center on the Developing Child, Harvard University, accessed on May 17, 2021 at <https://developingchild.harvard.edu/resources/three-early-childhood-development-principles-improve-child-family-outcomes/#responsive-relationships>

We can support and strengthen FFN care in the areas of:

**SAFETY:** An important goal of licensing systems is keeping children safe. But the goals of these systems extend well beyond safety; these systems are often the entry point for child care providers to a business relationship with the state and a way to access training and quality supports. While some FFN caregivers may want to pursue licensure, most FFN caregivers are not businesses and they are not likely to need or want a business relationship with the state. Instead, FFN providers could be supported in meeting safety guidelines outside of the licensing system. When we look beyond the child care sector there are many examples of supporting parents in keeping young children safe. For example:

- **Public safety campaigns** focused on safe sleep, car seats, carbon monoxide poisoning, lead safety, etc, are all relevant to this group of caregivers and could be targeted toward them.
- **Enhancing fire departments' infrastructure** to support home fire safety, distribute fire extinguishers, and support car seat installation would benefit this group of caregivers.
- **Expanding public health infrastructure** to address lead exposure, radon leakage, pest, mold and other household safety risks would benefit these care providers and ensure children's health and safety.

Child care systems could leverage, invest in and target these approaches to FFN caregivers, ensuring safety outside of the current child care licensing system.

**QUALITY:** As noted above, young children's learning, development and thriving depends upon reciprocal, loving relationships with caregivers. With loving relationships as the foundation of FFN care, FFN caregivers are well-positioned to meet the development needs of young children. Understandably, they may need support to do it, just as parents and classroom-based teachers and caregivers do. Here are some ways to do this:

- **Adapt family support and home visiting to serve FFN caregivers.** Just as home visiting programs partner with families to support learning and healthy development for young children, home visiting staff are now working with FFN caregivers with visits during the day while the children in their care are present. These visits provide support around age-differentiated activities, social-emotional learning, and developing further school readiness skills. Home visiting staff also support caregivers in engaging families in these practices and being a resource and support for parents. For example, [ParentChild+](#) Early Learning Specialists provide 48 home visits over 24 weeks to an FFN caregiver. At these visits the Specialist provides books, toys, and art materials for the learning environment (and the books for children to take home too) and the Specialist supports the caregiver in using these materials to enhance learning interactions and develop children's early learning, counting and reasoning skills. Providers get new ideas for activities and ways to support children's learning and development.
- **Invest in peer support groups that reduce isolation and offer ways to share resources with caregivers.** Isolation and disconnection are often cited concerns for FFN caregivers. Opportunities to engage with other FFN caregivers, to share experiences and to gain new resources and knowledge have demonstrated impact in supporting the quality improvement needs of FFN caregivers. Association for Supportive Child Care's [Kith & Kin](#) program offers a 14-week, bi-weekly opportunity for FFN providers to meet with each other and a trained facilitator. This meeting is structured as an emotional support group that integrates concepts around child development, safety and resilience into the discussions. The program is also sometimes offered via home-visiting or in a play and learn format where young children and their caregivers work side-by-side.
- **Create supportive spaces and environments for caregivers and children to learn together.** Play and Learn groups bring together groups of children and caregivers in trusted community locations to learn, share, and connect with each other. Structured curriculum informs the content of each session and is adapted by facilitators

based on the groups of children and caregivers at each event. [Kaleidoscope Play & Learn groups](#) use trusted facilitators to offer guidance and modeling, spark conversations and peer learning, and plan hands-on experiences so that caregivers learn what they can do at home to support children's learning and healthy development.

**COMPENSATION:** Informal home-based providers, when paid, earn on average \$7,420 per year from providing child care<sup>9</sup>. While motivated by love and duty, FFN caregivers need and deserve to be compensated for their work caring for young children. Compensation assures the economic stability of the caregiver and maintains the supply of loving care for children of working families. Most states use some federal and state child care funds to pay for FFN and regulation exempt care, but access to this support and amounts paid vary significantly across the country. In Hawaii, 72% of children benefiting from home-based child care (majority relative care) are covered, the most of any state. However, 11 states don't serve any children in FFN using Child Care and Development Fund (CCDF) funding<sup>10</sup>. The disproportionate access to subsidies for FFN care hurts families of color, those working nontraditional hours and those living in child care deserts who rely on FFN care<sup>11</sup>.

## WHERE DO WE GO FROM HERE? RECOMMENDATIONS

In addition to the specific recommendations and example above, Home Grown and ParentChild+ recommend making the following shifts in our systems to better include and support FFN caregivers and the families that choose this care:

1. Extend child care benefits to families who choose FFN care and fairly compensate FFN caregivers. See these papers from the [Urban Institute](#) for further recommendations for expanding access:
  - [Child and Adult Care Food Program for Home-Based Child Care Providers](#), including recommendations for improving access for FFN caregivers.
  - [Child Care Subsidies and Home-Based Child Care Providers](#), including recommendations for easing barriers for FFN caregivers.
2. Create appropriate and supportive systems for validating the safety and legality of this care and create a national framework for states to adopt and adapt. (See the Child Care Subsidies paper linked above for recommendations on health and safety processes.)
3. Provide appropriate and responsive supports to FFN caregivers informed by their needs, and the needs of the families they are caring for, that build on their strengths and the science of early childhood development.

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<sup>9</sup> National Survey of Early Care and Education Project Team, Characteristics of Home-based Early Care and Education Providers: Initial Findings from the National Survey of Early Care and Education (OPRE Report #2016-13) (Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research and Evaluation, 2016), 22, available at <https://www.acf.hhs.gov/opre/report/characteristics-home-based-early-care-and-education-providers-initial-findings-national>

<sup>10</sup> Maggie C. Kane, Phoebe Harris, Dorothy Jordan, Chrishana M. Lloyd, Mary Beth Salomone Testa, [Promising Practices in Policy for Home-Based Child Care: A National Policy Scan](#), Child Trends, 2020.

<sup>11</sup> Gina Adams, Peter Willenborg, Cary Lou, Diane Schilder, [To Make the Child Care System More Equitable, Expand Options for Parents Working Nontraditional Hours](#). Urban Institute. January 14, 2021

## Additional Reading:

[Home-Based Child Care Fact Sheet](#) | Home Grown

[Sustaining Family, Friend, and Neighbor Child Care During and After COVID-19: Survey Findings](#) | National Women's Law Center

[The Aunt Bees of America](#) | Early Learning Nation

[When Grandma Becomes an Early Childhood Educator](#) | New America

[Grandmothers Providing Child Care Must Get State Support](#) | Bay State Banner

[Connection in a Time of Isolation](#) | The David and Lucile Packard Foundation

[Shadow Workers: The Hidden Caregivers of America's Families](#) | The Century Foundation

[Centering Family, Friend, and Neighbor Care in the Early Learning System](#) | The David and Lucile Packard Foundation