Family, Friend and Neighbor Child Care: Supporting Diverse Families and Thriving Economies

Even before the COVID-19 pandemic, our nation faced a child care crisis for working families with an estimated $57 billion in lost earnings, revenue, and productivity. This was only exacerbated by COVID-19 as many workers, and women in particular, were forced out of the workforce. Access to consistent, high quality childcare is a prerequisite for workforce participation. The most widely used form of child care in America is family, friend and neighbor (FFN) child care. Most states allow FFN caregivers to be legally license exempt, or legally nonlicensed, meaning they are not required to pursue licensure to serve the (usually smaller) number of children they care for. FFN is the care that supports families when centers close, when school is out, and when mom works late. It is also the care that gets the fewest resources and support. Rebuilding a thriving economy will depend on strengthening FFN child care.

Families Rely on FFN Care

Family, friend and neighbor (FFN) providers, who include grandparents, aunts, family friends and neighbors, are the mainstay of the American child care sector:

- Over 5 million FFN caregivers look after 11.5 million children including 6.8 million children ages 0-5. (NSECE 2019)
- One in four children in the U.S. under the age of five is cared for by a grandparent some or all of the time their parent is at work. (ZERO TO THREE 2017)
- 30% of infants and toddlers attend home-based child care as their primary care arrangement compared to just 12% in centers. (NSECE)

Below is additional insight into who chooses FFN care and why.

Parents of diverse backgrounds prefer and choose FFN care.

- **FFN care is preferred by immigrant and Dual Language Learner (DLL) families:** While many U.S. families rely on FFN care, it is particularly prevalent among immigrant and DLL families. Formal center-based child care is often expensive and frequently lacks the flexible scheduling options, multilingual staff, and culturally and linguistically responsive practices these families look for in a care provider. By contrast, FFN caregivers are far more likely to share a language and culture with the families of the children in their care, leading to an enhanced sense of trust and safety and offering a high-quality experience that is responsive to these families’ priorities and needs. (Migrant Policy Institute 2021).
- **Spanish-speaking parents prefer home-based care to center care:** Spanish-speaking 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). (CA CCRR Network 2020).

FFN care is utilized by rural families:

- **Rural children are less likely to use child care centers than children living in urban and suburban areas.** Although rural children were as likely as urban children to be in some form of nonparental care, they were more likely to be cared for by relatives and had lower rates of center care participation. (Urban Institute 2018)
An analysis of the availability of child care across eight states found that 55 percent of children in rural communities live in areas with low or no child care availability, sometimes called child care deserts. In addition, home-based care has been found to be more common in rural areas than in urban areas. Prior research also suggests that families in rural areas prefer home-based care or care from someone they know over center-based care. (OPRE 2020).

Parents with jobs with nontraditional or unpredictable hours need FFN care to be able to work.

Many families need care during nontraditional hours: One third of kids under age 6 are in households with parents working nontraditional hours. About half of all children living with working parents whose family income is below the poverty level have parents who work nontraditional hours. Black and Latinx children are more likely than children who are white to have parents who work nontraditional hours. Sixty percent or more of young children living in single-parent households with working parents have parents who work nontraditional hours. (Urban Institute 2022 and Urban Institute 2021).

Parents prefer FFN care during nontraditional hours: Across most nontraditional-hour periods, a recent study found that most parents across locations and racial/ethnic groups preferred care in the child’s home by a relative or friend as their first choice during early mornings, evenings, and overnight. (Urban Institute 2022).

Care during nontraditional hours is most commonly offered by FFN providers and least likely to be offered in center based settings (NSECE). 82% unpaid FFN providers, 63% of paid FFN providers caring for children under age six offered some care during nonstandard hours (evenings, overnight, and/or weekends), compared to just 8% of center-based providers. (ACF 2016)

FFN care nurtures child development

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 (Center on the Developing Child, Harvard University). 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.

Recommendations for Supporting FFN Caregivers

FFN caregivers need more support to continue to serve working families. FFN caregivers represent communities that are disconnected from resources; the FFN workforce is 97% women and 50% people of color (compared to 40% of color among licensed child care workers) and the FFN workforce is overrepresented by immigrants. FFN caregivers, when paid, have an average annual earning of $7,420 (OPRE 2016). Upon the critical foundation of loving care provided by FFN caregivers, 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.

Recommendations for supporting FFN Caregivers include:

- Extend child care benefits and subsidies 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.

- Create meaningful grants programs that allocate flexible funds to FFN caregivers to use in addressing basic needs and improving the learning environment and activities for young children.

- Do not require licensure as a threshold to access funding and programs that would also benefit FFN caregivers who are legally license exempt (e.g., CACFP, Professional Development Opportunities). For many FFN caregivers, licensure is not necessary or appropriate; licensure requirements include regulations on operating a business, which many FFN caregivers are not doing. Instead, develop program eligibility requirements to include FFN caregivers that do not have a long term business interest in the
childcare sector, but are working to provide a safe, responsive and quality caregiving experience for children in response to the immediate needs of their family or community.

- Prioritize the economic well-being of FFN caregivers as a foundation for meeting parents’ needs and engaging providers in quality supports, including providing benefits counseling to FFN caregivers and the families they serve to maximize available income and resources such as the Child and Dependent Care Tax Credit, and supporting asset building activities once income is stabilized (debt reduction, saving, homeownership, retirement preparation)
- Create appropriate and supportive systems for validating the safety and legality of FFN care. (See the Child Care Subsidies paper linked above for recommendations on health and safety processes.)
- Provide appropriate and responsive professional development support 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.
- Ensure quality and accountability frameworks align with the unique FFN context and prioritize the voice of families in identifying the caregivers that best support their child’s development
- Invest in the creation of comprehensive networks of support on behalf of FFN caregivers that are able to engage caregivers in quality supports that are differentiated and appropriate to their setting.
  - Provide public investments in organizations that have trusted relationships with FFN caregivers and families, including immigrant and dual language learner communities.
- Reduce legislative and administrative barriers to public supports for FFN providers including:
  - Simplify application processes;
  - Provide meaningful language access support;
  - Consider methods of access for mixed status FFN caregivers and their families and eliminate barriers for utilization (ex: Drivers License for All, alternate payment methods for the unbanked, use of ITIN in addition to SSN);
  - Allocate funds specifically for recruitment and engagement to ensure utilization of resources. Partner with trusted community based and grassroots organizations that hold relationships with FFN caregivers to recruit and deliver TA to ensure equitable access to and utilization of public resources for FFN providers that are not already engaged with public systems;
  - Ensure services delivered to FFN caregivers are community embedded, culturally relevant and are provided in methods that are accessible to caregivers during times of their availability;
  - Elevate provider voice in designing support services, policies, processes, tools and even vendor selection to ensure alignment between provider needs and services delivered;
  - Provide equitable access to compensation which can support provider ability to meet parental care needs and engage in quality improvement. Ensure system requirements and the costs of meeting those requirements are in proportion to compensation.
- Create intentional supports for immigrant and Dual Language FFN caregivers. As noted in the Migration Policy Institute report, The Invisible Work of Family, Friend, and Neighbor Care for Immigrant and Dual Language Learner Families, additional strategies include:
  - Funding home visiting services as a strategy to support immigrants and other FFN care providers alongside the children and families they serve;
  - Improving data systems and promoting research to highlight equity gaps in early childhood systems affecting immigrants and other populations as a way to promote accountability and responsive policy changes; and
  - Expanding the visibility of the FFN care sector by including FFN caregivers and families who rely on them in early childhood policy conversations.

Home Grown is a national collaborative of philanthropic leaders committed to improving the quality of and access to home-based child care. We use numerous strategies to better understand and support various forms of home-based child care including regulated family child care, regulation-exempt care, and family, friend and neighbor care. Learn more on our website.