



Executive Summary

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PRIMARY CHILD CARE ARRANGEMENTS OF U.S. INFANTS: PATTERNS OF UTILIZATION BY POVERTY STATUS, FAMILY STRUCTURE, MATERNAL WORK STATUS, MATERNAL WORK SCHEDULE, AND CHILD CARE ASSISTANCE

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OVERVIEW

A substantial proportion of children under the age of 3 are cared for by adults other than their parents. Recent analyses of the 2005 National Household Education Survey (NHES) indicate that 42% of infants under the age of 1, 53% of 1-year-olds, and 73% of 2-year-olds had at least one nonparental care arrangement that occurred on a weekly basis.¹ The large proportion of infants and toddlers in nonparental care reflects, in part, societal trends of increased maternal employment among families of all socioeconomic backgrounds. Labor force participation for mothers with children under the age of 3 increased steadily between 1975 and 2006, from 34% to 60%.^{2,3} As of 2006, 56% of mothers with children under the age of 3 were actively employed.⁴

The use of child care arrangements, especially among low-income working parents, is of key interest to policy makers and others who want to understand how child care can support employment among low-income families and families who are leaving welfare. Child care use is also of key interest to those interested in child development, since in addition to supporting employment among low-income families, high-quality child care has been linked to positive child outcomes.^{5,6,7}

The purpose of this research brief is to examine patterns of primary child care arrangements among infants approximately 9 months of age, comparing those in households at or below 150% of the poverty threshold to those in households above 150% of the poverty threshold. Data from the Early Childhood Longitudinal Study–Birth Cohort (ECLS-B) provide a snapshot of patterns in primary child care arrangements using a nationally representative sample of infants born in the United States in 2001.

This research brief addresses four main questions for families who use nonparental care for their 9-month-old infants:

- What is the primary type of arrangement⁸ used by families with 9-month-old infants?
- Are there differences in the types of primary care used by demographic characteristics such as race/ethnicity, family structure, home language, and maternal education?
- Are there differences in the types of primary care used based on mothers' employment status and work schedule?

- Are there differences in the types of primary care used based on receipt of financial assistance for child care?⁹

For each of these questions, we further determine whether the patterns of child care use differ by family income. Patterns of primary child care arrangements are summarized and discussed in terms of their policy implications.

KEY FINDINGS

- Half of all 9-month-old infants are in some form of nonparental care on a regular basis.
- Of those infants in nonparental care, over 80% are in some form of *home-based care* as their primary source of care, that is, the care they are in for the most hours per week. About 6% of infants in nonparental care were in their primary nonparental care arrangement for 5 hours a week or less.
- Over half of infants in nonparental care are primarily cared for by a relative, either in the child's home or in another home; another quarter are cared for by a nonrelative in another home; and less than one in five are cared for in centers. Therefore, center-based care is not a common form of primary care for 9-month-old infants.
- Low-income infants in a regular care arrangement are more likely to be cared for by a relative and less likely to be cared for by a nonrelative than are higher-income infants. This pattern holds even when considering additional demographic factors, such as race/ethnicity and family structure. Even for infants whose mothers work full- or part-time or who are not in the labor force, and for infants with working mothers who work a regular daytime shift, this pattern holds true.

- Despite this consistent pattern of findings regarding family income and child care use, differences in patterns of nonparental care arrangements are evident by demographic and maternal employment characteristics. In particular:

Relative care in the child's home is a more common primary arrangement for infants:

- in households at or below 150% poverty
- of Asian descent
- in single-parent households

- in families that speak Spanish at home
- of mothers who have a high school degree or less
- whose mothers are looking for work or not in the labor force

Center-based care was found to be a more common primary arrangement among infants:

- who are Black or White
 - who live in English-speaking households
 - whose mothers have a bachelor's degree or more
 - whose mothers were employed full-time or were looking for work
- Infants in families receiving some form of child care assistance for their care at 9 months of age are more likely to be in center-based care than their peers whose families are not receiving child care assistance, regardless of family income. This pattern is supported by data from other national data sets, which find an increased use of center-based care among low-income families who receive subsidies.¹⁰
 - Low-income infants are less likely to be in relative care if their families are receiving some form of child care assistance for their care. This finding suggests that monetary support for child care expenses may be a particularly important factor in the choice of care among low-income families.

CONCLUSIONS

Compared with infants in higher-income households, among infants in households at or below 150% of poverty whose mothers are employed full-time or part-time, there is a higher use of relative care, specifically relative care in another's home. When comparing infants whose mothers vary in employment status, we find that infants whose mothers work part-time are less likely than those whose mothers work full-time or who are looking for work to be in center-based care. Further analyses should explore the parental decision-making processes underlying these disparate utilization patterns among low-income, working parents.

The use of center-based care for 9-month-old infants is not common, especially for those in households at or below 150% of poverty. The main factor associated with use of center-based care among low-income families is the receipt of financial assistance to pay for child care. Indeed,

the proportion of 9-month-olds using center-based care reaches 46% among low-income families who receive financial assistance for care; no more than about 20% of infants in low-income families were in center-based care when looking at patterns by race/ethnicity, family structure, maternal education, maternal employment, or maternal work schedule. In fact, receipt of some form of monetary assistance for child care tends to equalize the use of center-based care across income groups. There are limitations to the analyses of child care assistance reported here. We cannot distinguish federally funded support from other forms of support, and the overall proportion of children in the sample receiving support was only 9%. Further, we cannot untangle potentially complex paths of causation. For example, while monetary support for child care expenses may be an important factor in the choice of care among low-income families, it may also be the case that families who select center-based child care are more likely to seek or be directed toward such assistance.

SUGGESTIONS FOR FUTURE RESEARCH

The findings reported in this research brief suggest several avenues for further investigation and data development:

- **Increase the focus of research and population estimates for low-income children in family, friend, and neighbor care.** Repeatedly, these analyses showed that infants in households at or below 150% of poverty were most likely to be cared for by relatives, either in the child's home or in another home. Compared to more formal arrangements (such as center-based care and family child care), much less is known about family, friend, and neighbor care. More targeted research with national samples of families who use family, friend, and neighbor care is needed to better understand the demographic characteristics of these families; the characteristics of the children in this type of care; and the level of quality of family, friend, and neighbor care and its relation to child outcomes.
- **Improve the amount and quality of national data on child care utilization for families who work nonstandard hours.** The number of infants in this national sample whose mothers worked during nonstandard hours was not high enough for detailed analyses. However, low-income children may be more likely than higher-income children to have parents who work nonstandard hours. A more targeted study of families

who work nonstandard hours would provide information to understand how such families make decisions about child care arrangements.

- **Improve national survey data on the receipt of federally funded forms of child care assistance and support research to determine the influence of child care subsidies on child care use.** These analyses showed that, when financial assistance is available, infants in low-income families are more likely to be in center-based care and less likely to be in relative care. As noted earlier, this pattern is supported by data from other national data sets, which find higher use of center-based care among low-income families who receive subsidies.¹¹ Unfortunately, the ECLS-B data do not permit us to determine the exact source of the financial support received by the families in this sample; it could be from government-based child care subsidies, relatives, employers, or other individuals. There is a clear need for population-based estimates that are detailed enough to determine the patterns of child care use by child care subsidy receipt and its relation to child and family functioning. However, parent surveys (such as those used in the ECLS-B) may not be the best way to obtain information about subsidy receipt. New efforts to link administrative data with other forms of survey data collection would address this need. Although targeted experimental studies of state-level child care subsidy programs exist, as do national administrative data on subsidy receipt, to date no population estimates are available that have the ability to link patterns of child care use at the national level by subsidy receipt to other measures of family and child well-being. A new National Study of Child Care Supply and Demand is currently in development and will likely address this gap by providing national survey data on subsidy receipt and its relation to the use of different types of nonparental care settings and to child and family outcomes.

The analyses presented in this brief provide descriptions of primary nonparental care arrangements at one point in time, and look at the patterns of child care use within specific demographic or employment characteristics. Additional analyses of the ECLS-B and other national data sets could be conducted to examine:

- **Multiple care arrangements used by families for their infants and young children:** This brief focuses on the primary care arrangement, meaning the care arrangement in which an infant spends the greatest number of hours per week. Additional analyses of child care arrangements could extend this work by examining the prevalence and constellation of multiple care arrangements and the associations between various combinations of arrangements and demographic characteristics, such as race/ethnicity, family structure, home language, maternal education, maternal work status, and income.
- **Patterns of child care use taking into account hours in care:** In these analyses, we examined the type of primary nonparental care arrangement that children were in when they were about 9 months of age. However, these analyses did not take into account the extent of time in this primary care arrangement. The amount of time infants spent in their primary nonparental care arrangement varied widely in this sample. Further examination of patterns of care that take into account both type and extent of care would provide a more nuanced picture of infants' care experiences.
- **Patterns of child care use for different thresholds of hours of employment:** The analyses in this brief revealed some interesting differences in child care use patterns by maternal employment status. However, these analyses were based on three broad categories of maternal employment (full-time work, part-time work, and looking for work) and did not take into account the number of hours worked. Further analyses could look more closely at the range of hours worked among those parents employed part-time or full-time. For example, patterns of child care use may differ among infants whose mothers work fewer than 10 hours a week, compared to those whose mothers work 10-20 hours a week, those who work 20-35 hours a week, and those who work more than 35 hours a week. It is possible that analyses based on hours of employment may reveal meaningful differences that are obscured in the current analyses that are based on employment status.
- **The relationships among multiple demographic and work-related factors that are associated with families' child care use patterns:** More complex statistical analyses would allow for comparisons of multiple factors at the same time (such as employment status along with hours of employment and work shift), and examinations of child care use by one factor could be explored while taking into account, or controlling for, other

- characteristics. For example, patterns of child care use could be explored for low-income and higher-income families, taking into account the different constellations of family structure and work status combined (such as both parents working full-time within a two-parent family, one parent working part-time within a two-parent family, one parent working full-time within a single-parent family), taking into account race/ethnicity and home language.
- **The stability of child care arrangements:** Longitudinal analyses that examine the child care arrangements of children over time would provide information on the relationships between demographic/employment characteristics (and also the receipt of child care assistance) and child care stability.
 - **The decision-making process parents of infants use when selecting a type of nonparental care, especially low-income parents adhering to work requirements for subsidy receipt:** New research that examines values, preferences, and beliefs about child care, as well as the perceived constraints on resources, that are the basis for parents' decisions about child care arrangements for their infants and young children would be a valuable supplement to the information provided in this brief. Although the ECLS-B does not contain adequate data to explore these additional factors, the upcoming National Study of Child Care Supply and Demand may be able to address this important set of questions around parental decision-making processes, with implications for both policy makers and program administrators.

- 1- Iruka, I. U., & Carver, P. R. (2006). *Initial results from the 2005 NHES Early Childhood Program Participation Survey*. Washington, DC: U.S. Department of Education, National Center for Education Statistics.
- 2- U.S. Department of Labor and U.S. Bureau of Labor Statistics, *Annual social and economic supplements 1975-2006, Current Population Survey*, available online: <http://www.nchs.census.gov/cps/asec/adsmain.htm>.
- 3- Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services (1997). *Trends in the well-being of America's children & youth, Economic security: ES3.2 Maternal employment*, available online: <http://aspe.hhs.gov/HSP/97trends/Es3-2.htm>.
- 4- U.S. Department of Labor and U.S. Bureau of Labor Statistics, *2006 Annual Social and Economic Supplement, Current Population Survey*, available online: www.nchs.census.gov/cps/asec/adsmain.htm.
- 5- Magnuson, K., Meyers, M.K., Ruhm, C.J., & Waldfogel, J. (2004). Inequality in preschool education and school readiness. *American Educational Research Journal*, 41, 115-157.
- 6- Peisner-Feinberg, E.S., Burchinal, M., Clifford, R.M., Yazejian, N., Culkin, M.L., Zelazo, J., et al. (1999). *The children of the cost, quality, and outcomes study go to school: Executive summary*. Chapel Hill, NC: The University of North Carolina at Chapel Hill, Frank Porter Graham Child Development Center.
- 7- Committee on Family and Work Policies (2003). *Working families and growing kids: Caring for children and adolescents*. Washington, DC: National Academies Press.
- 8- A child's nonparental care arrangement was considered "primary" if it was the setting in which the child spent the most hours per week. If the child was in two different settings for the same amount of time, he or she was not included in these analyses.
- 9- Information on child care assistance in the ECLS-B is gathered by asking parents if they receive monetary assistance from relatives, social service or welfare agencies, employers, and other people for their children's care for each type of nonparental care arrangement. This measure may include, but is not exclusive to, assistance received in the form of child care subsidies.
- 10- Kinukawa, A. L., Guzman, L., & Lippman, L. (2004). *National estimates of child care subsidy receipt for children ages 0-6: What can we learn from the National Household Education Survey?* Washington, DC: Child Trends; Weinraub, M., Shlay, A. B., Harmon, M., & Tran, H. (2005). Subsidizing child care: How child care subsidies affect the child care used by low-income African American families. *Early Childhood Research Quarterly*, 20(4), 373-392.
- 11- See endnote 10.