Informal Caregivers Research Project:

Characteristics, networks, and needs of informal caregivers and parents in California

Webinar
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Agenda

• Introduction and study overview
• Who are informal caregivers in California?
• Understanding caregiving and social support networks
• Recommendations for programming and outreach
• Wrap-up and discussion
The Packard Foundation’s Early Learning Strategy

• Aims to improve the quality of early learning and developmental experiences for children birth through age 5 in California by
  – Improving professional development for educators and caregivers to improve the quality of care provided through the formal system
  – Providing parents, family, and friends who care for children with the skills and support they need to provide quality, nurturing environments for children to grow to ensure they are on track and ready for the classroom by age 5
Research questions

1. Who are informal caregivers in California?
2. What are their existing networks and needs for support?
3. What are promising outreach methods and approaches to meet their needs?
Five key activities

1. A literature scan of recent research on informal caregiving
2. Interviews with state- and county-level key informants
3. Discussions with individuals from child care resource and referral agencies
4. Interviews with informal caregivers and parents at community organizations in Alameda and Santa Clara counties
5. Graphic representations of social systems and supports for informal caregivers and parents
Who are informal caregivers in California?
Informal child care is an important topic to study

• Most common form of nonparental child care in U.S.
  – About half of children under age 5 receive care in informal settings
  – Over 3.5 million unlisted home-based child care providers

• Many children spend crucial developmental years in informal settings

• Limited research on characteristics of informal caregiving in California
We conducted site visits across the Bay Area

• Site visits in Alameda and Santa Clara counties

• Spoke with parents and caregivers about caregiving arrangements and how they obtain social support and information about child care

Public Libraries
- Temescal Branch, Oakland Public Library (Alameda County)
- César E. Chávez Branch, Oakland Public Library (Alameda County)

Family Resource Centers
- Lotus Bloom Child and Family Resource Center (Alameda County)
- Santee Family Resource Center (Santa Clara County)

Other Community Organizations
- East Valley Family YMCA (Santa Clara County)
- Sacred Heart Community Service (Santa Clara County)
We spoke with 68 parents and caregivers

- Conducted individual and small-group interviews with 59 parents and caregivers
  - Focused on the experience with informal care, sources of information and support, and needs

- Drew 21 ecomaps (graphic representations of support network related to child care)
  - Focused on the structure of informal care arrangements and the individual’s social support system
Limitations

• Small sample size
• Narrow geographical scope
• Self-selected group
Sample characteristics

Female
40 years old
Latina
Speaks very little or no English
High school graduate or less
Identified as informal caregiver and parent
Some parents and caregivers faced barriers

• Illiteracy

• No Internet access
Participation in the formal system was low

• “Formal system” = subsidy program and licensing system

• Less than 20 percent of informal caregivers and parents who also provided informal care were aware of subsidies

• Over 50 percent of parents who did not provide informal care were aware of subsidies

• Few informal caregivers expressed a desire to become licensed
Informal care arrangements vary

• Majority of care provided by a family member, usually a grandmother or aunt

• Number of children ranged from 1-8
  – About half were age 5 or younger

• Most were regular arrangements, some more ad-hoc

• Many involved an exchange of money
Reasons for using informal care

- Flexibility
- Low cost
- Accessibility
- Cultural consistency
- Trustworthiness

Reasons for providing care

- Helping family; as a favor
- Bonding with children
- Earning money
Some parents and caregivers provide enriching experiences

• Reading and singing
• Spending time outside
• Teaching values, rules, and manners
• Fostering basic living skills
Parents and caregivers access some resources

• Parenting and other websites
• Community-based programs and other places where parents and caregivers interact (mainly informally)
  – Schools
  – Libraries
  – Parks
  – Churches
  – Head Start/Early Head Start
  – Child development centers
  – County First 5 organizations
  – Child care resource and referral agencies
  – Community organizations
Parents and caregivers communicate in many ways

**Reported methods**
- Text messages
- Telephone
- Internet
- Social media
- YouTube
- Email

**Recommended methods**
- Text messages
- Television advertisements
- Mailings
- Bulletin boards at community buildings
- Materials distributed through schools
Understanding caregiving and social support networks
Ecomaps depict caregiving and social support networks

• Ecomaps: Graphic representations of connections to people and institutions in social support system

• This study uses ecomaps to
  – Highlight the structure and complexity of caregiving arrangements
  – Understand existing social support networks
Caregiving arrangements are complex

• Arranging and providing informal care is a complex process

• Regularity of care depends on needs and availability
Arranging care is complicated

- **Respondent**
- **Informal caregivers**
- **Support system**

**Relationship to families receiving care**
- Grandparent
- Other family member
- Friend
- Neighbor

**Quality of support**
- Strong support
- Weak support

Note: Arrows indicate flow of support

Parent, 25
- Daughter, 17 months
- Son, 7
- Husband, 30

Caregiver 1 (cares for both children)

Caregiver 2 (cares for older child)

Husband

Doctor

7-year-old’s father

Caregiver 1

**Caregiver 2** (cares for older child)
Regularity of care depends on needs and availability

- **Respondent**: Informal caregiver, 42
- **Families receiving care**: Son, 5; Daughter, 7; Husband, 42
- **Support system**: Sister, Parents from Family 2; Parents from Family 3; Mother from Family 1; Nephew; Husband

**Relationship to families receiving care**
- Grandparent
- Other family member
- Friend
- Neighbor

**Quality of support**
- Strong support
- Weak support

Note: Arrows indicate flow of support
Some caregiving arrangements involve remuneration

• About half of informal child care involved remuneration

• Caregiving arrangements that included remuneration varied in type of remuneration, amount paid, and frequency
  – Some involved exchange of services such as child care; others involved money
  – Payments varied from irregular payments to regular monthly payments
Type of remuneration varies

- Informal caregiver, 30
  - Son, 7
  - Daughter, 6
  - Husband, 35

- Family 1
  - Boy, 5
  - Boy, 10
  - Girl, 11
  (exchanges child care)

- Family 2
  - Girl, 11
  - Boy, 16
  ($100 per wk)

- Friends in parenting program
- Friends
- Husband

Relationship to families receiving care
- Grandparent
- Other family member
- Friend
- Neighbor

Quality of support
- Strong support
- Weak support

Note: Arrows indicate flow of support
Support comes from different sources

• Friends and family most common source of support

• Few institutions present in social support network
  – Child care resource and referral agencies (most frequently BANANAS)
  – Websites (for example, Berkeley Parents Network)
  – Social service agencies (for example, WIC office)

• Parents and caregivers rely on each other

• Personal networks are strong
Personal supports are strong

**Relationship to families receiving care**
- Grandparent
- Other family member
- Friend
- Neighbor

**Quality of support**
- Strong support
- Weak support

Note: Arrows indicate flow of support
Parents and caregivers share information

• Parenting advice
  – “Be patient” when stressed
  – Exchange stories

• Children’s development
  – “Is this normal?”
  – Developmental milestones

• Information related to child care
  – Health and safety (for example, first aid, CPR)
  – Activities for kids
Recommendations for programming and outreach
Target a spectrum of caregivers

• Parent and informal caregiver roles overlap
  – Additional overlap with role of more formal care provider
  – Informal caregivers may not identify as child care providers

• Programs should include parents and other family members, friends and neighbors, and other providers in their outreach
Build on parent and caregiver strengths

• Some parents and caregivers are already providing enriching experiences for their children
  – Supportive interactions
  – Enriching programs

• *Programs should find ways to expand, enhance, and support existing and potential strengths*
Leverage informal networks for outreach

• Existing networks are mainly personal and informal
  – Unplanned interactions in community locations
  – Strong personal support networks

• Programs should leverage these informal networks and reach out to parents and caregivers in locations where they already spend time
Provide connections to the formal system when appropriate

• Participation in the formal system was low in our study
  – Informal caregivers may lack information or have concerns or misconceptions
  – The formal system may be beneficial to some

• Programs should be sensitive to concerns about involvement in the formal system, but since it can provide needed resources, should not let these concerns stand in the way of connecting parents and caregivers who could benefit
Make messaging accessible

• Parents and caregivers face language and technological barriers
  – Low levels of literacy
  – Limited Internet access

• Program should use modes of outreach that are accessible to these individuals
Wrap-up and discussion
Discussion questions

• What does the complexity of caregiving arrangements mean for the types of programs communities might offer and points of contact with informal caregivers?

• What communication and program strategies would best serve this population?

• Are there specific policies that need to be changed or created to support informal caregivers and parents who use informal care?

• What are the main research questions we need to answer about informal caregivers and the children in their care?

• What else should the field be thinking about or doing to support informal caregivers?
For more information

• Project website

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