



# Family, Friend and Neighbor Caregivers

*Results of the 2004  
Minnesota statewide household  
child care survey*



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# Summary

## Study purposes and methods

This report on a statewide telephone survey describes family, friend and neighbor (FFN) caregivers and the care they provide to children ages 12 and younger. For this study, FFN caregivers include grandparents, aunts, siblings, cousins and non-relatives ages 18 or older. The report also identifies caregiving resources and information that FFN caregivers have access to, most commonly use and would find most helpful.

Funded by the Minnesota Department of Human Services, the survey was conducted from May 2004 through January 2005, along with the *Child Care Use in Minnesota 2004 Household Child Care Survey* ([www.dhs.state.mn.us/main/groups/children/documents/pub/DHS\\_id\\_008779.hcsp](http://www.dhs.state.mn.us/main/groups/children/documents/pub/DHS_id_008779.hcsp)). Interviewers spoke with one caregiver per household, who answered general questions about FFN child care and provided detailed information for one randomly selected child.

The statewide study included 400 randomly selected households providing FFN care and had a response rate of 62.5 percent. The statewide sample of 400 has a sampling error of plus or minus 4.9 percent. The results are useful for better understanding, supporting and improving FFN child care for all families in Minnesota.

## Key findings

### **Relatives, primarily grandmothers, outnumber non-relative caregivers.**

- An estimated 150,000 households in Minnesota provide child care for family, friends or neighbors.
- FFN caregivers are primarily female (86 percent), although men make up 14 percent of FFN caregivers. They range in age from 18 to 87, with an average age of 49.
- More than half (52 percent) of FFN caregivers are the child's grandparent, including 8 percent who are grandfathers. Sixteen percent are a friend of the family, 15 percent are an aunt or uncle, 6 percent are another relative, 9 percent are neighbors, and 3 percent are nannies.
- On average, FFN caregivers usually care for two children (not their own) on a regular basis.



- Seventy-eight percent of FFN care is provided primarily in the caregiver's home.
- Forty-three percent of FFN caregivers providing child care in their homes have one or more children under 12 living in the home. Most of them are also taking care of their own children all of the time (72 percent) or most of the time (11 percent) while providing FFN care.

**Most relatives provide child care for free.**

- About 24 percent of FFN caregivers earn income from the child care they provide, averaging \$117 to \$126 per week. Non-relatives are more likely than relatives to be paid for their caregiving (46 percent versus 15 percent) and, on average, earn about \$35 more per week.
- Of those paid for providing child care, most (85 percent) are paid by the child's parents, and 20 percent (or 4.8 percent of all FFN caregivers) say they are paid by a state or county agency.
- Sixty percent of FFN caregivers have a paying job in addition to child care.

**A large segment of FFN caregivers provide part time care. Some FFN caregivers, however, provide full time child care when licensed care is not readily available.**

- Over half (59 percent) of FFN caregivers provide child care for 10 hours or less per week, 10 percent provide care 11 to 19 hours per week, 8 percent provide care 20 to 29 hours per week, 8 percent provide care 30 to 39 hours per week and 15 percent provide care 40 or more hours per week. On average, FFN caregivers provide 19 hours of care in a typical week.
- Seventy-eight percent of FFN caregivers provide care during standard weekday hours (7 a.m. to 6 p.m.). Seventy-three percent provide care in the evenings (6 p.m. to 10 p.m.), and 75 percent on weekends. Thirty-nine percent provide care in the early morning (before 7 a.m.), and 51 percent provide care late at night (after 10 p.m.). Greater Minnesota FFN caregivers are more likely than metro area caregivers to provide care in the evening (78 percent versus 67 percent).
- In a typical week, on average, FFN caregivers provide care two or three days per week for six or seven hours per day. Forty percent provide care one day per week. Twenty-one percent provide care five to seven days a week; however, that is more common for children ages 6 to 12 than for younger children (26 percent versus 17 percent).

- When asked the number of times in the past three months that they were unable to provide care for any reason, 60 percent of FFN caregivers said they had not missed a day of care; 28 percent said they missed one to two days; 10 percent missed three to seven days, and 2 percent missed more than seven days.

**FFN caregivers provide child care to help out family or friends and because they have close relationships with the children in their care.**

- The most common reason for providing child care is to help a family member or friend (59 percent), followed by liking children and a belief that child care is fun (23 percent). As shown in *Child Care Use in Minnesota*, FFN care is also a positive choice for parents who prefer care by a family member or a caregiver they already know and trust.
- Nine percent of non-relative caregivers provide FFN care to earn money, compared to 2 percent of relative caregivers. For perspective, in a recent survey of FFN caregivers registered with the Child Care Assistance Program (CCAP) in five Minnesota counties, 23 percent of non-relative caregivers provide care to earn money, compared to 13 percent of relative caregivers.<sup>1</sup> Notably, those FFN caregivers registered with CCAP provide, on average, 38 hours of care in a typical week, double the average for FFN caregivers in general (19 hours).
- For those who had daily contact with the child prior to providing care, relative caregivers are more likely than non-relative caregivers to define their prior relationship with the child as “very close” (99 percent versus 39 percent).
- Most FFN caregivers “strongly agree” (49 percent) or “agree” (42 percent) that they would watch the child under their care for as long as the parent wanted them to, and “strongly agree” (49 percent) or “agree” (42 percent) that they often feel that taking care of the child is the best part of their day.
- Sixty-one percent say they frequently talk about the child’s daily activities with parents; 87 percent feel that the match between their child-rearing values and the parents’ is excellent or good; and 85 percent say that they and the parents cooperate and work together “very well” to make sure the child’s needs are met. Relative caregivers of children age 5 and younger are more likely than other caregivers to discuss daily activities with parents.

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<sup>1</sup> Chase, R., Arnold, J. and Schauben, L. 2005. *Family, Friends and Neighbors Caring for Children Through the Minnesota Child Care Assistance Program, a Survey of Caregivers and Parents*. St. Paul, MN: Minnesota Department of Human Services and Wilder Research.

**While most FFN caregivers get their caregiving information and support from informal sources, they are more than “glorified babysitters” and are better prepared to provide quality child care than many critics believe.**

- On average, FFN caregivers have provided FFN care for 11 years.
- Seventy-six percent have at least some college education.
- Seventeen percent of FFN caregivers have been employed (14 percent) or currently are employed (3 percent) as a teacher’s aide or child care teacher in a licensed child care center or program.
- In addition to providing FFN care, 12 percent of caregivers in this study are either currently licensed (3 percent) or were licensed in the past (9 percent) as family child care providers.
- More than half (56 percent) have participated in parent education, and more than one-third (38 percent) have participated in a child care training program through a church, community organization or government agency. About 45 percent have taken college classes in child development, nutrition or health and safety; and 49 percent have attended workshops on those topics.
- Most (86 percent) FFN caregivers say they are self-taught about parenting and child care through reading books or watching educational videos, and most use educational television, health care providers, fact sheets or pamphlets and the public library to learn about children and their needs.
- FFN caregivers primarily get encouragement and emotional support from family members (91 percent) and the parents of the children in their care (90 percent). Other sources of support are friends (77 percent), other people providing child care (48 percent) and their faith community (42 percent). Caregivers in the seven-county Twin Cities metropolitan area (metro) are more likely than Greater Minnesota caregivers to report that they can count on their ethnic community for encouragement and support (31 percent versus 22 percent).
- Few FFN caregivers report having serious problems when providing child care.

**FFN caregivers report that they use a wide range of activities to encourage children’s cognitive, social, emotional and physical development.**

- For children under 2, the most common development activities for FFN caregivers (daily or most days) are hugging and kissing the child (98 percent), talking or cooing,

telling stories, or singing to the child (98 percent) and playing games like peek-a-boo (96 percent).

- For children ages 2 to 5, FFN caregivers most often talk, tell stories or sing to the child (88 percent daily or most days); practice language or math with the child, such as reciting the alphabet, playing counting games or doing puzzles (76 percent daily or most days); have the child sing or read along with them or teach the child songs or stories (74 percent daily or most days); and do creative activities such as drawing (74 percent).
- Children ages 2 to 5 most often play with toys or household items that promote hand-eye coordination (91 percent daily or most days) and play “pretend” games by using toys and dolls, by dressing up or by acting out roles or stories (75 percent daily or most days).
- For children ages 6 to 12, FFN caregivers most often talk, tell stories or sing to the child (76 percent daily or most days), have the child sing or read along with them, and teach the child songs or stories (60 percent daily or most days).
- Children ages 6 to 12 most often play with other children (69 percent daily or most days) and play outdoors, running, climbing, jumping or playing sports (68 percent daily or most days).

**Overall, FFN caregivers are somewhat interested in opportunities to obtain child care supplies, materials and information, but fewer are interested in training or in being licensed. Schools, libraries, churches and recreation or community centers are the best places to provide learning opportunities for FFN caregivers.**

- FFN caregivers say that the most helpful types of child care resources would be small grants to pay for books, games and materials (rated “very helpful” by 38 percent); a program through which they could get safety equipment and supplies (rated “very helpful” by 31 percent); someone to connect them to early care and education organizations (rated “very helpful” by 30 percent); and someone to call when facing a problem with a child or with the child’s parents (rated “very helpful” by 30 percent).
- Almost 30 percent of the FFN caregivers say that they would find it “very helpful” to have access to a government subsidized food program that provided nutritious food for the children in their care at no or low cost.
- With regard to information caregivers would like to receive, how to help children learn and do well in school is rated as “very helpful” by the most respondents (58 percent), followed by information on child safety (53 percent). Overall, more non-

relative caregivers than relative caregivers rate each form of information (listed in the survey) as “very helpful.”

- Fifty-seven percent of caregivers say they would be “very likely” to use kits or packets with supplies and materials appropriate for the ages of the children; and the same percentage say they are “very likely” to use books.
- Three percent of FFN caregivers are currently licensed home family child care providers. Of those not currently licensed, 18 percent are “very interested” (7 percent) or “somewhat interested” (11 percent) in becoming licensed. In a similar survey of FFN caregivers caring for children through the Minnesota Child Care Assistance Program, about half say they are “very interested” (31 percent) or “somewhat interested” (21 percent) in becoming licensed as a child care provider. Metro area and non-relative caregivers are more likely than Greater Minnesota and relative caregivers to be “very” or “somewhat interested” in becoming a licensed child care provider.
- Neighborhood schools (64 percent), local libraries (62 percent), churches or places of worship (58 percent), recreation centers (57 percent) and local community centers (55 percent) top the list of places where caregivers who are interested in learning opportunities are likely to go to participate. Conversely, malls or shopping centers are the least likely places they visit (43 percent).

### **Quality Index**

To get an overall picture of the quality of FFN care, the researchers created an index of eight self-reported attributes of quality appropriate for an informal setting: intentionality of the caregiving; extent of caregiving training; the FFN caregiver’s connections with other caregivers for support and information; strength of the partnership between the FFN caregiver and the child’s parent; the extent of natural teaching and other activities for literacy; cognitive development; social/emotional development and physical development. Figure 1 shows the percentage of FFN caregivers with each self-reported attribute.

- On average, FFN caregivers report 5.3 of 8 attributes on the quality of care index. FFN caregivers of children under 6 tend to have higher scores than caregivers of children ages 6 to 12, and are more likely to be intentional caregivers, have strong partnerships with the child’s parents, frequently perform and encourage activities that encourage children’s cognitive and physical development, and promote literacy.
- Relatives are more likely than non-relatives to have strong partnerships with the child’s parents (64 percent versus 43 percent) and to report activities that encourage children’s literacy and cognitive development.

## 1. Quality of care index (self-reported)

Attributes of FFN quality	Age of randomly selected child		
	0-5 n=247	6-12 n=153	Total N=400
Intentional caregiver	14.9%	6.7%	11.7%
Trained caregiver	**	**	22.0%
Connected with other caregivers	**	**	84.5%
Strong caregiver-parent partnership	70.2%	39.5%	58.4%
Literacy activities	78.4%	68.0%	74.4%
Activities for cognitive development	98.4%	87.6%	94.3%
Activities for social/emotional development	**	**	97.0%
Activities for physical development	92.7%	79.1%	87.5%
Mean number of attributes	5.6	4.8	5.3

*Source:* 2004 Minnesota statewide household child care survey

\*\* Signifies no age-group differences

### *Quality of care index definitions:*

*"Intentional caregiver" uses a place to get information, resources and support or knows other caregivers who help each other; uses a place for socializing and information sharing; and uses other resources to get caregiving information. In addition, provides developmental activity every day or most days, and agrees to watch the child as long as the parent wants.*

*"Trained caregiver" is someone who is currently licensed or was licensed in the past; is or was a teacher's aide or child care teacher in a licensed facility; participated in parent education or a child care training program; has taken college classes in child development; or has attended workshops on child development.*

*"Connected" means the caregiver uses a family center or other support or place to connect with other caregivers.*

*FFN caregivers and parents with "strong partnerships" frequently share information about the child, plan for or talk about daily activities and cooperate very well.*

*"Literacy activities" include reading, reading along or practicing language and math skills daily or most days.*

*"Activities for cognitive development" include stories, singing, naming pictures, creative drawing, learning about nature and "pretending" games, daily or most days. Activities for social/emotional development include cooing, peek-a-booing, hugging and kissing, getting together or playing with other children and visiting, pretending, passing on cultural values or helping around the house, daily or most days.*

*"Activities for physical development" include playing with toys or household items, going to tot lots or playgrounds, playing outdoors or helping around the house, daily or most days.*

## **Interest in support and interaction for quality improvement**

The researchers created a variable depicting FFN caregivers' orientation to offers of support and interaction for quality improvement in their caregiving. The FFN caregivers fall into three groups: eager for support and interaction (43 percent), open to some support and interaction (38 percent) and independent, not interested in support and interaction (19 percent).

Eager caregivers tend to be paid, non-relatives with the highest average self-reported quality index scores (5.8 out of 8). On average, they provide child care 24 hours per week. They would very likely attend learning opportunities in neighborhood schools (62 percent) and libraries (62 percent), followed by recreation centers (56 percent), community centers (55 percent) and places of worship or churches (54 percent).

Open caregivers tend to be a mix of unpaid relatives and non-relatives with an average self-reported quality index score of 5 out of 8. On average, they provide child care 17 hours per week. The likelihood of attending learning opportunities is low, but the best locations are schools (17 percent), churches (16 percent), libraries (14 percent), recreation centers (13 percent) and community centers (12 percent).

Independent caregivers tend to be unpaid relatives with the lowest average self-reported quality index scores (4.7 out of 8). On average, they provide child care 12 hours per week. No more than 5 percent would likely attend a workshop or learning opportunity, regardless of location.

## **Recommendations**

Based on the results of this study and discussion of the results with the researchers and study advisory committee, the Department of Human Services recommends the following actions to support and improve FFN child care for all families.

### **1. Recognize and respect the inherent strengths of FFN care in all its diversity while at the same time improving the quality of care.**

FFN care is a vital resource for families, particularly those with low incomes, those with non-standard work hours, families of color and families with children who have special needs. Policymakers should take care to avoid harming the essential voluntary and personal relationships of FFN caregiving when attempting to improve the quality of FFN care. Think of FFN care, early care and education and child care systems, not as parallel tracks or as a continuum from informal and unstructured to formal and regulated, but as intertwined strands of the same fabric for families. Funding and programs should support voluntary movement and interaction between FFN

caregivers and the formal child care system, recognizing and respecting the inherent strengths of FFN care and the important role it plays in meeting the needs of diverse children and families, while ensuring that it is of the highest quality.

**2. Support state (DHS) efforts to ensure that all child care quality improvement activities are open, inclusive and accessible to all FFN caregivers.**

Eight out of 10 FFN caregivers are open to receiving support and interacting with other caregivers, but fewer than one in 10 are interested in being licensed within the regulated child care system. Enable FFN caregivers to participate in Minnesota's professional development system, Child Care Resource & Referral system training and grant programs, food and nutrition support, tribal supports for child care and initiatives to support school readiness in child care settings. In particular, provide access to small grants for the purchase of books, games, materials and safety supplies. Consider ways to appropriately hold participating FFN caregivers accountable for their use of these grants without applying the same expectations and requirements applied to licensed providers and professional caregivers.

**3. Conduct targeted outreach that offers information and support options to FFN caregivers wherever they may be.**

DHS should continue to support targeted outreach efforts for specific groups of FFN caregivers and the families who use them, including those who are registered with the state Child Care Assistance Program; communities of color or immigrant, refugee, tribal or migrant communities; those who are English language learners; and families with children who have special needs. Each group may need its own outreach strategies.

Framing the outreach around school readiness for younger children and school success for older children may resonate with FFN caregivers, who express relatively strong interest in learning more about how to help children learn and do well in school.

FFN outreach strategies should split or differentiate the F from the FN, taking into account key differences between relatives and non-relatives. For example, compared with relatives, non-relatives are more likely to use the library and the Internet to learn about child care, to be interested in having access to information on child safety and child discipline, to be paid for their caregiving and to be interested in becoming licensed child care providers.

Relationships, central to why families, friends and neighbors provide care and why families use FFN care, may also be the key to effective FFN outreach. Use personal outreach rather than flyers or posters. Conduct outreach through unconventional



channels and culture-specific organizations and places, as well as through natural networks and community institutions and places that families typically visit and congregate (grocery stores, parks, community centers). Key partners in FFN outreach could include local businesses, public health nursing, parent associations, faith communities, cultural and ethnic community centers, mutual assistance associations in immigrant and refugee communities and community event planners.

**4. Offer learning opportunities through a neighborhood-based approach that links FFN caregivers to resources, advice, knowledge and peer support.**

While outreach should be targeted in non-traditional places, FFN caregivers seem to prefer familiar, established places for learning, such as neighborhood schools and libraries. Use resources (books, games, materials and safety supplies) as incentives for participation.

Pay attention to language, culture and literacy issues. Survey results indicate that take-away tip sheets, information packets and videos would be popular with FFN caregivers.

Also pay attention to the time of day when the learning opportunities are offered. Survey results indicate that many FFN caregivers have paying jobs in addition to providing child care. FFN caregivers interested in participating in learning opportunities cite conflict with work as a key potential barrier to attending.

Facilitate peer support, providing opportunities for caregivers to socialize and to connect with other caregivers if they choose. Early Childhood Family Education (ECFE), for example, could tailor classes for FFN participants.

# Introduction

## Survey purposes

Family, friend and neighbor (FFN) caregivers provide informal, legal unlicensed home-based child care. FFN caregivers include grandparents, aunts, siblings, cousins and non-relatives 18 or older.

This statewide household telephone survey describes:

- Characteristics of FFN caregivers, including age, race, languages spoken, household structure, household income, relation to children in care, education level, training in child care and experience in child care
- Profile of children in FFN, including number of hours and cost of care
- Self-reported indicators of quality of care, including activities offered to children
- Types of resources caregivers have access to, the ones they most commonly use and how helpful they are
- Concerns that FFN caregivers express about their caregiving role and the training and support strategies that would address their concerns

## Definitions

**Family, Friend and Neighbor (FFN) care**, for this survey, is informal home care provided to children 12 and younger by people 18 or older at least once a week in each of the two weeks prior to the survey. It includes babysitting or child care during the day, evening, or overnight for grandchildren, other relatives, younger brothers or sisters and children of friends and neighbors. It includes free care or care for a fee in the children's home or someone else's home. It includes legal, unlicensed and registered care. While licensed family child care providers were not intentionally included, some licensed caregivers who consider themselves FFN caregivers at certain times of the work day or work week (e.g., care for a relative's child after regular business hours) are part of the study sample.

**Metro** refers to the seven-county Twin Cities metropolitan region (Hennepin, Ramsey, Anoka, Scott, Carver, Dakota and Washington counties).

**Greater Minnesota** comprises the 80 counties in the state economic development regions 1 through 10.

## Instrument development

The researchers developed and pre-tested the survey instrument with the assistance of an advisory group of state, county and local child care professionals, policymakers and social service representatives (see Acknowledgments). The instrument drew many questions from Rick Brandon's 2002 study of FFN care in Washington state.<sup>2</sup>

The survey instrument was translated into Spanish, Hmong and Somali.

## Survey methods and samples

Funded by the Minnesota Department of Human Services, the survey was conducted from May 2004 through January 2005, along with the *Child Care Use in Minnesota* household child care survey.

The researchers purchased random digit samples of listed and unlisted telephone numbers from Survey Sampling, Inc. for each region in the state (based on standard development regions) and in the Twin Cities metropolitan region for each county. Trained interviewers called each telephone number (more than 29,000) to determine eligibility: a household with one or more adults over the age of 18 who provided FFN care for someone else's children 12 or younger at least once a week in each of the prior two weeks. Using computer-assisted scheduling, interviewers called each randomly selected number at least 10 different times at different times of the day and on different days of the week, including Saturday mornings and Sunday evenings. After making contact, interviewers continued calling until exhausting all reasonable leads, ultimately making nearly 136,000 calls. Initial contacts were made in English, Hmong and Spanish, and surveys were conducted in English, Hmong, Somali and Spanish.

The researchers interviewed one adult per household, who answered general questions about child care and provided detailed information for one randomly selected child cared for by the FFN caregiver.

The study has a sample of 400 randomly selected households distributed by Minnesota planning regions as follows: Regions 1-5 (northern Minnesota), Regions 6-7 (central Minnesota), Regions 8-10 (southern Minnesota), East Metro and West Metro.

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<sup>2</sup> Brandon, R. N., Maher, E. J., Joesch, J. M. and Doyle, S. 2002. *Understanding Family, Friend, and Neighbor Care in Washington State: Developing Appropriate Training and Support*. Human Services Policy Center, Evans School of Public Affairs, University of Washington.

Given the growing challenges in conducting telephone surveys, this survey has a good response rate of 62.5 percent. The statewide sample of 400 has a sampling error of plus or minus 4.9 percent. Sub-samples have higher sampling errors; for example, plus or minus 6.2 percent for the sub-sample of 247 in the 0-5 age group, 7.9 percent for the sub-sample of 153 in the 6 to 12 age group, 5.8 percent for the sub-sample of 287 relatives and 9.3 percent for the sub-sample of 112 non-relatives.

The results are useful for describing, supporting and improving FFN child care for all families in Minnesota.

## Report structure

The report describes results for all households and by age group (0-5 and 6-12 years) based on the age of the randomly selected child cared for by the FFN caregiver. In the text, results are rounded and reported as whole numbers.

Researchers tested key variables to see if results differed statistically ( $p < .05$ ) by these family and child care characteristics: type of caregiver (relative versus non-relative), selected child's age (0 to 5 versus 6 to 12) and geography (seven-county Twin Cities metropolitan area versus Greater Minnesota counties).

The statistically significant differences are indented in this format at the end of each topical section.

# Profile of family, friend and neighbor caregivers (FFNs) and their households

This study includes only households who reported providing FFN care to children ages 12 and younger by people ages 18 or older at least once a week in each of the two weeks prior to the survey. This section describes the sample of FFN caregivers and their households. There is no Census or other comparison data because this is the first FFN survey conducted with a random sample of households in Minnesota. Other studies of informal care have found that caregivers, while mostly grandmothers, vary in age and ethnicity.<sup>3</sup>

## FFN caregiver demographics

As shown in Figure 2, FFN caregivers are primarily female (86 percent), and range in age from 18 to 87, with an average age of 48 to 49. Fourteen percent are 65 or older.

Eighty-eight percent of FFN caregivers are White, 3 percent African American, 2 percent Latino/Hispanic, 2 percent Asian and 1 percent American Indian. About 4 percent identify themselves as multiracial.

Sixty-one percent of FFN caregivers are married, and 88 percent have children. Most caregivers' children are adults.

About 60 percent of FFN caregivers have a paying job in addition to providing child care.

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<sup>3</sup> Susman-Stillman, A. 2004. *Family, Friend and Neighbor Care: Promoting Quality Care and Children's Healthy Development*. Sacramento, CA: First 5 California and ETR Associates.

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## 2. FFN caregiver demographics

	<b>Total N=400</b>
<b>Gender</b>	
Male	14.3%
Female	85.8%
<b>Age</b>	
18-19	2.3%
20-29	11.8%
30-39	16.5%
40-49	16.0%
50-59	24.8%
60-64	13.8%
65-69	8.0%
70-74	2.3%
75-87	3.5%
Missing/refused	1.3%
Mean age of FFN caregivers	48.5
<b>Race</b>	
White or Caucasian	88.3%
Black or African American	2.8%
Hispanic or Latino	1.8%
American Indian	0.8%
Asian	1.5%
Multiracial or Other	4.3%
Missing/refused	0.8%
<b>Marital status</b>	
Married	60.8%
Living together in a marriage-like arrangement, but not legally married	3.0%
Separated	1.3%
Divorced	13.0%
Widowed	8.3%
Never married	13.3%
Missing/refused	0.5%

*Source:* 2004 Minnesota statewide household child care survey

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## 2. FFN caregiver demographics (continued)

	<b>Total N=400</b>
<b>Parent</b>	
Yes	87.8%
No	12.3%
<b>Number of own children</b>	
0	12.3%
1	11.3%
2	33.5%
3	24.0%
4	8.8%
5 or more	10.3%
<b>Age of own oldest child</b>	
0	0.0%
1-2	3.7%
3-5	6.6%
6-9	10.0%
10-12	6.0%
13 and older	73.8%
Mean age of oldest child	26.4
<b>Paid job or jobs, in addition to taking care of children</b>	
Yes	59.5%
No	40.5%

*Source:* 2004 Minnesota statewide household child care survey

As shown in Figure 3, most FFN caregivers were born in the United States (96 percent), and their native language is English (95 percent). For those born outside the country, all have been in the United States for three or more years. About two-thirds have been in the United States over 15 years. The average amount of time in the United States is nearly 27 years.

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### 3. FFN caregiver background and language

	<b>Total</b>
<b>Country of origin</b>	<b>N=400</b>
United States	95.8%
Another country	4.3%
Canada	1.0%
Mexico	0.8%
Laos	0.8%
Other	1.8%
<b>How long caregiver has lived in the U.S.</b>	<b>N=17</b>
0-2 years	0.0%
3-5 years	5.9%
6-9 years	11.8%
10-15 years	17.6%
Over 15 years	64.7%
Mean number years in U.S. of those not born in U.S.	26.7
<b>Native language</b>	<b>N=400</b>
English	95.0%
Spanish	1.5%
Hmong	1.0%
Other	2.5%
<b>Language caregiver usually speaks at home</b>	<b>N=400</b>
English	97.0%
Spanish	1.3%
Hmong	0.5%
Other	0.8%
Missing/refused	0.5%

Source: 2004 Minnesota statewide household child care survey



## Demographics of FFN caregiver households

As shown in Figure 4, about 15 percent of FFN caregiver households consist of one person; 56 percent consist of two to three people; 27 percent consist of four to six people; and 3 percent consist of seven or more.

Of those providing child care in their own homes, about 17 percent of FFN caregiver households have one adult; 67 percent have two adults; and 16 percent have three or more adults. About 88 percent of households where FFN care is provided have no teenagers living in the home; 9 percent have one; 3 percent have two; and about 1 percent has three or four. About 58 percent of households where FFN care is provided have no children under 12 living in the home; 15 percent have one; 23 percent have two; 4 percent have three; and 1 percent has four.

Eighty-three percent of FFN caregivers with children ages 12 and younger take care of their own children all or most of the time while providing FFN care, 2 percent do some of the time and 15 percent never do.

Seventy-nine percent of FFN caregivers are home owners.

About 53 percent of FFN caregivers live in Greater Minnesota, including 21 percent in the northern part of the state. About 47 percent live in the Twin Cities metro area, about evenly divided between West and East Metro.

In terms of income, Figure 5 shows that about half of FFN households have annual incomes of \$40,000 and above.

As shown in Figure 6, about 24 percent of FFN caregivers have income from the child care they provide, averaging \$117 to \$126 per week.

Non-relatives are more likely than relatives to be paid for their caregiving (46 percent versus 15 percent) and, on average, earn about \$35 more per week.

Of those paid for their caregiving, most are paid by the child's parents (85 percent), and 20 percent (or 4.8 percent of all FFN caregivers) say they are paid by a state or county agency.

#### 4. Characteristics of FFN households

	<b>Total N=400</b>
<b>Number of people in household</b>	
1	14.5%
2-3	55.5%
4-6	26.5%
7 or more	2.5%
Don't know	0.8%
Missing/refused	0.3%
<b>Number of adults (18 and older) in household (care in own home only) N=313</b>	
1	16.6%
2	67.1%
3	13.1%
4	2.9%
5 or more	0.3%
<b>Number of teens (13 to 17) in household (care in own home only) N=313</b>	
0	87.9%
1	8.9%
2	2.6%
3	0.3%
4	0.3%
<b>Number of children 12 and younger in household (care in own home only) N=313</b>	
0	57.5%
1	14.7%
2	22.7%
3	4.2%
4	1.0%
<b>Frequency of taking care of own children when providing FFN care in own home (households with children age 12 and younger only) N=133</b>	
All of the time	72.2%
Most of the time	10.5%
Some of the time	2.3%
Never	15.0%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Ns vary because questions about household adults, teens and children were only asked of FFN caregivers who provide care in their own home. Rows in bold are subtotals of rows below them. Percents do not total 100 due to rounding.

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#### 4. Characteristics of FFN households (continued)

	<b>Total N=400</b>
<b>Homeownership (all FFN caregivers)</b>	<b>N=400</b>
Yes	78.8%
No	20.8%
Missing/refused	0.5%
<b>Geographic area of residence and respective Economic Development Regions</b>	
<b>Twin Cities metro area (Region 11)</b>	46.8%
West Metro (Hennepin, Anoka, Carver and Scott counties)	24.8%
East Metro (Ramsey, Washington and Dakota counties)	22.0%
<b>Greater Minnesota</b>	53.4%
Northern Minnesota (Regions 1-5)	21.3%
Central Minnesota (Regions 6-7)	14.8%
Southern Minnesota (Regions 8-10)	17.3%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Rows in bold are subtotals of rows below them. Percents do not total 100 due to rounding.

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#### 5. Household income of FFN caregivers

	<b>Total N=400</b>
<b>Household income before taxes from all sources and all members</b>	
Under \$10,000	3.8%
\$10,000 - \$19,999	9.5%
\$20,000 - \$29,999	13.0%
\$30,000 - \$39,999	14.0%
\$40,000 - \$49,999	14.5%
\$50,000 - \$99,999	27.3%
\$100,000 and above	11.0%
Missing/refused	7.0%

*Source:* 2004 Minnesota statewide household child care survey

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**6. FFN income from all child care by relationship to randomly selected child**

	Relationship to child		
	Relatives n=287	Non- relatives n=112	Total N=400
<b>Receives any payment for regular child care</b>	14.6%	46.4%	23.8%
<b>Amount of payment received per week for all regular child care provided</b>			
Mean per week (including \$0)	<b>n=42</b> \$100	<b>n=47</b> \$135	<b>N=90</b> \$117
Mean per week (excluding \$0)	n=39 \$108	n=44 \$144	N=84 \$126
<b>Sources of payment</b>			
(Child)'s parents	81.8%	88.0%	85.3%
Other relative	4.5%	2.0%	3.2%
State agency	9.1%	6.1%	7.4%
County agency	18.2%	12.2%	14.9%
City agency	0.0%	2.0%	1.1%
State or county agency (unduplicated)	22.7%	18.0%	20.0%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* "Regular child care" is at least once per week in each of the last two weeks. Amount of payment per week not reported by five respondents, and relationship type missing for one respondent. Amount of payment per week ranges from \$0 to \$800. When a CCAP family uses an FFN caregiver and the care takes place in the child's home, payment is made directly to the parent, not the caregiver, because of IRS rules regarding the employer.

## FFN caregiver's relationship to child

As shown in Figure 7, grandparents make up 52 percent of FFN caregivers, family friends make up 16 percent and aunts or uncles 15 percent. Nine percent are neighbors. Other relatives, cousins and siblings each make up 3 percent or less. Three percent are nannies.

There are no significant differences regarding the caregiver's relationship to the child based on the age of the child.

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### 7. FFN caregiver's relationship to randomly selected child

<b>FFN caregiver's relationship to child</b>	<b>Total N=400</b>
Grandmother/grandfather	51.6%
Friend of family	16.0%
Aunt/uncle	14.5%
Neighbor	9.0%
Other relative	3.0%
Nanny	3.0%
Cousin	1.5%
Sibling	1.0%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* The category "Grandmother/grandfather" includes great grandparents. Similarly, "Aunt/uncle" includes a great aunt.

# Profile of children in FFN care

This section describes the sample of children in FFN care, based on information about one randomly selected child per caregiver. The 2005 Minnesota household child care survey as well as other studies of informal care have found that FFN care is the most common type of child care, particularly for infants. These studies also found that parents choose FFN care for its flexibility and affordability and because they prefer care by a family member or by someone who shares their cultural heritage and whom they know personally and trust.<sup>4</sup>

As legal nonlicensed providers, FFN caregivers are limited to caring for relatives or children from one other family, but without a limit to the number of children being cared for at the same time. FFN caregivers who are registered with a county in order to be eligible for reimbursement through the Child Care Assistance Program are required to pass a criminal background check. Otherwise, FFN care has no restrictions.

## Demographics

Half of the randomly selected children are boys and half girls. Sixty-two percent of the selected children are under the age of 6, and 38 percent are ages 6 to 12. These gender and age distributions are similar to the gender and age distributions of all children cared for by surveyed FFN caregivers (see Figure 8).

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<sup>4</sup> Chase, R. et al. 2005. *Child Care Use in Minnesota, Report of the 2004 Statewide Household Child Care Survey*. St. Paul, MN: Wilder Research.  
Sonenstein, F. L., Gates, G., Schmidt, S. and Bolshun, N. 2002. *Primary Child Care Arrangements of Employed Parents: Findings from the 1999 National Survey of America's Families*. Assessing the New Federalism. Washington, D.C.: The Urban Institute.  
Susman-Stillman, A. 2004. *Family, Friend and Neighbor Care: Promoting Quality Care and Children's Healthy Development*. Sacramento, CA: First 5 California and ETR Associates.

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## 8. Gender and age of randomly selected children in FFN care

	Randomly selected child N=400	All children in care N=858
<b>Gender</b>		
Male	49.8%	50.5%
Female	50.0%	49.5%
Missing/refused	0.3%	0.0%
<b>Age</b>		
0-5 years	61.8%	60.8%
6-12 years	38.3%	39.2%

Source: 2004 Minnesota statewide household child care survey

About 79 percent of the children are White, 12 percent multiracial, 4 percent Black or African American, 2 percent Asian, 2 percent Hispanic or Latino and 1 percent American Indian (see Figure 9).

About 4 percent of children have families who are from an immigrant or refugee group from Africa, Asia, South or Central America.

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## 9. Race or ethnicity of randomly selected children in FFN care by child's age

	Age of child		
	0-5 n=247	6-12 n=153	Total N=400
<b>Child's race or ethnicity</b>			
White or Caucasian	80.6%	77.1%	79.3%
Black or African American	2.0%	5.9%	3.5%
Hispanic or Latino	2.4%	0.7%	1.8%
American Indian	1.2%	1.3%	1.3%
Asian	2.0%	2.0%	2.0%
Multiracial or Other	11.7%	13.1%	12.3%

Source: 2004 Minnesota statewide household child care survey

Most of the randomly selected children speak English in their home (97 percent) and also with their FFN caregiver (98 percent) (see Figure 10).

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**10. Languages spoken by children in FFN care (randomly selected child)**

	<b>Total N=400</b>
<b>Language spoken at home and language spoken with caregiver</b>	
<b>Language spoken at home</b>	
English	96.5%
Spanish	1.0%
Hmong	0.8%
Other	1.8%
<b>Language spoken with caregiver</b>	
English	98.3%
Spanish	1.0%
Hmong	0.0%
Other	0.8%

*Source:* 2004 Minnesota statewide household child care survey

## Special needs

About 16 percent of FFN caregivers say that the randomly selected child they care for has special needs (medical, physical, emotional, developmental or behavioral) that affect the way they take care of the child. These children may or may not require an Individual Education Plan (IEP).

The percentage of children with special needs is the same for both age groups (0-5 and 6-12).



# Profile of FFN care

This section describes when and where FFN care is provided, how often and at what cost. The 2001 Minnesota household child care survey, as well as other studies of informal care, found that FFN care is often used at times of the day and week when licensed care is not readily available and when the cost of licensed care is too high for lower-income families.<sup>5</sup>

Most FFN care, when paid for, is paid by parents. However, families receiving child care assistance can choose to use FFN care. To receive payment under the Child Care Assistance Program (CCAP), an FFN or legal, nonlicensed provider must be registered with a county, must limit the care to relatives or children from one other family and must pass a criminal background check. FFN providers' care is paid for on an hourly basis and is 80 percent of the maximum reimbursement available to licensed family child care providers. Parents are responsible for CCAP copayments and charges that exceed CCAP reimbursement rates.

## Number of children in FFN care

About three-quarters of FFN caregivers are taking care of one (39 percent) or two (35 percent) children ages 12 and younger on a regular basis (see Figure 11).

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<sup>5</sup> Chase, R. and Shelton, E. 2001. *Child Care Use in Minnesota, Statewide Household Child Care Survey*. St. Paul, MN: Wilder Research.  
Susman-Stillman, A. 2004. *Family, Friend and Neighbor Care: Promoting Quality Care and Children's Healthy Development*. Sacramento, CA: First 5 California and ETR Associates.

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## 11. Number of children in FFN child care

<b>Number of children that FFN caregivers usually care for on a regular basis</b>	<b>Total N=400</b>
1	38.8%
2	34.5%
3	15.0%
4	5.5%
5 or more	6.3%
<b>Mean number of children in FFN care on regular basis</b>	<b>2.18</b>

*Source:* 2004 Minnesota statewide household child care survey

*Note:* "Regular" child care involves caring for children at least once per week in each of the previous two weeks. Includes only children age 12 and younger.

## Child care schedule and location for all children in FFN care

As shown in Figure 12, over half (59 percent) of FFN caregivers provide child care for 10 or fewer hours per week. Fifteen percent provide care 40 or more hours per week. On average, FFN caregivers provide child care 19 hours per week. That average is half the average number of hours per typical week reported in a survey of FFN caregivers caring for children through the Minnesota Child Care Assistance Program (38 hours).<sup>6</sup>

In terms of schedule, 78 percent of FFN caregivers provide care during standard weekday hours (7 a.m. to 6 p.m.). Seventy-three percent provide care in the evenings (6 p.m. to 10 p.m.) and 75 percent on weekends. Thirty-nine percent provide care in the early morning (before 7 a.m.), and 51 percent provide care late at night (after 10 p.m.).

FFN caregivers in Greater Minnesota are more likely than metro area caregivers to provide care in the evening (78 percent versus 67 percent).

About three-fourths of FFN care is provided in the caregiver's home, 19 percent is provided in the children's home and 3 percent is provided "some other place."

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<sup>6</sup> Chase, R., Arnold, J. and Schauben, L. 2005. *Family, Friends and Neighbors Caring for Children Through the Minnesota Child Care Assistance Program, a Survey of Caregivers and Parents*. St. Paul, MN: Wilder Research and the Minnesota Department of Human Services.

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**12. Child care times and places (all children)**

<b>Number of hours providing FFN care in a typical week</b>	<b>Total N=398</b>
Less than 5	27.4%
5-10	31.4%
11-19	10.1%
20-29	8.3%
30-39	8.0%
40 or more	14.8%
<b>Mean hours per typical week</b>	<b>19.0</b>
<b>Times of the week available to provide FFN care (multiple responses)</b>	<b>N=400</b>
Standard weekday, any time from about 7 a.m. to 6 p.m. (includes after school)	78.0%
Early mornings before 7 a.m. (after the children wake up)	39.0%
Evenings from about 6 p.m. to 10 p.m.	72.8%
Late nights after 10 p.m.	51.0%
Weekends	74.8%
<b>Usual place of care</b>	
In FFN caregiver's home	78.4%
In the child(ren)'s home	19.0%
Some other place	2.5%

*Source: 2004 Minnesota statewide household child care survey*

## Care schedule for randomly selected child

Forty percent of the FFN caregivers provide care to the randomly selected child one day a week. Twenty-one percent provide care five or more days per week (see Figure 13).

FFN caregivers are more likely to care for children ages 6 to 12 for five or more days a week than they are to care for children under age 6 (26 percent versus 17 percent).

About half of the FFN caregivers provide care less than five hours per day in a typical week, and 38 percent provide care five to ten hours per day.

FFN caregivers are more likely to care for children under age 6 for five to 10 hours per day and for children ages 6 to 12 for less than five hours per day.

In a typical week, on average, FFN caregivers provide care to the randomly selected child two or three days per week for six or seven hours per day.

Seventy-four percent of FFN caregivers provide care to the randomly selected child during standard weekday hours (7 a.m. to 6 p.m.). About half of the FFN caregivers provide care to the randomly selected children in the evenings (between 6 p.m. and 10 p.m.) and on the weekends.

Children ages 6 to 12 are more likely to receive care from FFN caregivers on weekends (58 percent) than children under age 6 (44 percent).

The usual place of care for the randomly selected child is the same as for all children, primarily in the FFN caregiver's home (78 percent).

### 13. Profile of FFN care by age of randomly selected child

	Age of child		Total
	0-5 n=247	6-12 n=153	N=400
<b>In a typical week, number of <i>days</i> care is usually provided for selected child</b>			
1	42.9%	35.9%	40.3%
2	19.4%	22.9%	20.8%
3	13.8%	8.5%	11.8%
4	6.5%	6.5%	6.5%
5	14.2%	20.9%	16.8%
6	0.4%	1.3%	0.8%
7	2.4%	3.9%	3.0%
<b>Mean days per typical week</b>	<b>2.4</b>	<b>2.7</b>	<b>2.5</b>
<b>In a typical week, number of <i>hours</i> per day care is usually provided</b>			
Less than 5	42.5%	57.5%	48.3%
5-10	45.3%	26.1%	38.0%
11-19	6.9%	8.5%	7.5%
20-24	4.9%	7.8%	6.0%
<b>In a typical week, average hours per day care is usually provided</b>	<b>6.77</b>	<b>6.16</b>	<b>6.54</b>
<b>Times of the week care is usually provided</b>			
	<b>n=247</b>	<b>n=153</b>	<b>N=400</b>
Standard weekday, any time from 7:00 a.m. to 6:00 p.m. (includes after school)	75.3%	71.2%	73.8%
Early mornings before 7:00 a.m. (after the children wake up)	17.8%	21.6%	19.3%
Evenings from 6:00 p.m. to 10:00 p.m.	45.7%	51.6%	48.0%
Late nights after 10:00 p.m.	21.5%	27.5%	23.8%
Weekends	43.9%	58.2%	49.4%

Source: 2004 Minnesota statewide household child care survey

## Child care payment

About 24 percent of FFN caregivers receive payment for taking care of the randomly selected child, reporting, on average, \$63 per week. The amounts range from \$4 to \$800 per week. (The highest amounts are paid to nannies by higher income households.)

Non-relative caregivers are more likely than relative caregivers to receive payment for the randomly selected child (46 percent versus 15 percent), and, on average, report receiving \$8 more per week than relative caregivers.

Of those paid for caregiving, most (83 percent) are paid by the child's parents, and 18 percent say they are paid by a state or county agency.

Caregivers were also asked about other types of non-monetary payments. Twenty percent trade off caregiving with the other family; 18 percent receive meals; 10 percent get the use of a car; and 2 percent get free or reduced living space. Other types of in-kind payments include gifts, help with yard work or house cleaning, pet-sitting and trips or vacations.

Trading-off — taking care of each other's children — as payment is more common among non-relatives than relatives (42 percent versus 12 percent). Providing meals is more common among relatives (20 percent versus 12 percent).

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#### 14. Child care payment for randomly selected child by relationship to caregiver

	Relationship to child		
	Relatives	Non-relatives	Total
<b>Amount of payment received</b>	<b>n=39</b>	<b>n=47</b>	<b>N=86</b>
Mean per week (excludes \$0)	\$59	\$67	\$63
<b>Sources of payment</b>	<b>n=42</b>	<b>n=52</b>	<b>N=95</b>
Child's parents	83.3%	82.7%	83.2%
Other relative	0.0%	3.8%	2.1%
County agency	14.3%	9.6%	11.6%
State agency	11.9%	3.9%	7.4%
City agency	0.0%	1.9%	1.1%
Someone or someplace else	2.4%	1.9%	2.1%
State or county agency (unduplicated)	23.8%	13.5%	17.9%
<b>Any other kind of payment that is <i>not</i> money (room and board, trade, etc.)</b>	<b>n=287</b>	<b>n=112</b>	<b>N=400</b>
Taking care of provider's child(ren) at times	11.8%	42.0%	20.3%
Giving free or reduced-cost living space	3.1%	0.0%	2.3%
Providing meals	19.9%	11.6%	17.5%
Providing transportation or use of a car	10.1%	8.9%	9.8%
Some other kind of trade or payment	16.4%	7.1%	13.8%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Respondents reported amount of payment received for child care as hourly, daily, weekly, bi-monthly, monthly or yearly; they were converted to weekly amounts, using a standard work week of 40 hours. When a CCAP family uses an FFN caregiver and the care takes place in the child's home, payment is made directly to the parent, not the caregiver, because of IRS rules regarding the employer.

# Quality of FFN care

This section describes the quality of FFN care from the caregivers' perspective. It includes measures of caregiver formal training and education; caregiver informal education, such as what caregivers have learned from their own experience and what knowledge about child development has been passed down from generation to generation; reliability of care; closeness of the relationship between caregivers and parents and between caregivers and children; and the extent of activities while providing child care that promote or inhibit child development.

The Minnesota Department of Human Services, early childhood care and education professionals and advocates for school readiness are concerned about the quality of FFN care, particularly care paid for with public child care subsidies. Most of the research suggests that children in informal settings, compared with licensed settings, are less likely to engage in activities or to use materials that promote literacy and learning, are less safe and are more likely to watch television.<sup>7</sup> FFN care is often considered deficient compared with licensed care. This study, however, does not start with that premise. Rather, this study was designed to explore both the inherent strengths and the shortcomings of FFN care.

## Experience and training of FFN caregivers

In terms of highest level of education, almost all FFN caregivers have completed high school or the equivalent, including 39 percent with some college education and 37 percent with college degrees or higher (see Figure 15).

Of the 5 percent of FFN caregivers who say that English is not their first language, three-quarters say they have "excellent" or "good" English speaking, reading and writing skills.

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<sup>7</sup> Whitebook, M., Phillips, D., Yong Jo, J., Crowell, N., Brooks, S. and Gerber, E. 2004. *Two Years in Early Care and Education*. Berkeley, CA: Center for the Study of Child Care Employment, p. 8.



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## 15. FFN caregiver education

<b>Highest level of education completed</b>	<b>Total N=400</b>
Eighth grade or lower	0.5%
Some high school	1.5%
High school graduate or GED	22.0%
Some college (includes two-year degree/technical college)	38.5%
College graduate (BA, BS)	24.3%
Post-graduate work or professional school	12.8%
Missing/refused	0.5%

Source: 2004 Minnesota statewide household child care survey

### Experience of FFN caregivers

As shown in Figure 16, 7 percent of FFN caregivers have been providing FFN child care for less than a year, 18 percent for one or two years, 14 percent for three or four years, 13 percent for five to seven years, 11 percent for eight to 10 years and 37 percent for 11 or more years. On average, FFN caregivers have been providing FFN child care for 11 years.

Metro and Greater Minnesota FFN caregivers are similar with regard to the number of years providing FFN care.

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## 16. Number of years providing FFN child care

<b>Number of years caring for children of family, friends and neighbors</b>	<b>Total N=399</b>
0	7.0%
1-2	18.0%
3-4	14.0%
5-7	12.8%
8-10	11.3%
11 or more	36.8%
<b>Mean number of years caring for children of family, friends and neighbors</b>	<b>11.0</b>

Source: 2004 Minnesota statewide household child care survey

As shown in Figure 17, 17 percent of FFN caregivers have been employed (14 percent) or currently are employed (3 percent) as a teacher’s aide or child care teacher in a licensed child care center or program.

Twelve percent of FFN caregivers are either currently licensed (3 percent) or were licensed in the past (9 percent) as family child care providers.

Relative and non-relative FFN caregivers are similar with regard to professional child care experience.

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### 17. FFN caregivers’ professional child care experience

	<b>Total N=399</b>
<b>Have ever been employed as a teacher’s aide or child care teacher in a licensed child care center or program</b>	
Yes, currently	3.0%
Yes, in the past	14.3%
No	82.7%
<b>Have ever been a licensed family child care provider</b>	
Yes, currently	2.8%
Yes, in the past	9.3%
No	88.0%

*Source:* 2004 Minnesota statewide household child care survey

### Motivation for caregiving

FFN caregivers were asked the main reasons they choose to provide FFN care. Their numerous responses, grouped into categories, are in Figure 18. The most common reason is to help a family member or friend (59 percent), followed by the respondent liking children and believing that child care is fun (23 percent).

Relative caregivers are more likely than non-relative caregivers to report that their main reason for providing FFN child care is to help a family member or friend (61 percent versus 53 percent), to provide less expensive care (12 percent versus 5 percent) or to provide safe, quality care (10 percent versus 3 percent).

Non-relative caregivers are more likely than relative caregivers to report that their main reason for providing FFN child care is that they like children and believe it is fun (30 percent versus 20 percent). However, 13 percent of relatives say they provide FFN care to spend time with their grandchildren.

Nine percent of non-relative caregivers provide care to earn money, compared to 2 percent of relative caregivers.

**18. FFN caregiver motivation by relationship of caregiver to randomly selected child**

Main reasons caregivers provide child care	Relationship to child		
	Relatives n=287	Non- relatives n=112	Total N=400
To help a family member or friend	61.0%	52.7%	59.0%
I like children and it's fun	20.2%	29.5%	22.8%
To provide less expensive care	11.8%	5.4%	10.0%
To spend time with my grandchildren	12.5%	0.0%	9.0%
To provide safe, quality care	9.8%	2.7%	7.8%
To earn money	2.1%	8.9%	4.0%
To be home with my children	2.4%	6.3%	3.5%
I just happened to be available at the time	3.5%	2.7%	3.3%
Limited options were available for parent	3.1%	3.6%	3.3%
To provide special needs care	3.1%	0.9%	2.5%
Other individual reasons	2.1%	6.3%	3.3%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Categories derived from open-ended question. Multiple responses allowed, grouped into categories. Sub-columns do not add up to 400 due to missing/refused.

**FFN caregiver training and education**

In terms of formal education and training, 56 percent of FFN caregivers have participated in parent education (see Figure 19); and 38 percent have participated in a child care training program through a church, community organization or government agency. Forty-five percent have taken college classes in child development, nutrition or health and safety; and about half (49 percent) have gone to workshops on those topics.

Most FFN caregivers report that they learned about children from their own experience (100 percent), learned from what was passed on from parents or extended family (93 percent), and are self-taught about parenting and child care through reading books or watching educational videos on those subjects (86 percent).

Relative and non-relative caregivers are similar in this regard.

## Informal resources for FFN caregivers

From a list read to them, FFN caregivers most commonly reported using the following informal resources to learn about child care: educational television (78 percent), a doctor or clinic (70 percent), fact sheets or pamphlets (68 percent) and the public library (68 percent).

Non-relative caregivers are more likely than relative caregivers to use the public library (78 percent versus 65 percent) and the Internet (64 percent versus 40 percent) to learn about child care.

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### 19. FFN parenting and child care training and education

	Total
<b>Formal classes</b>	<b>N=400</b>
Have ever participated in parent education, either Early Childhood Family Education or another program	56.3%
Have ever participated in a child care training program through a church, community organization or government agency	38.3%
Have ever taken any college classes in child development, nutrition or health and safety	44.8%
Have ever attended workshops on those topics	48.7%
<b>Informal learning</b>	
Learned about children from own experience	100.0%
Learned from what was passed on from parents or extended family	93.3%
Self-taught by reading books or watching educational videos	85.8%
<b>Resources caregiver has used to get information about children and their needs</b>	
Educational TV	77.5%
A doctor or clinic	70.0%
Fact sheets or pamphlets	68.0%
A public library	68.0%
Child care or teacher magazines	49.5%
The Internet	46.8%
Health fairs	28.3%
A college or university library	23.0%
A bookmobile	12.5%
A child care outreach program	12.0%
An 800 number for caregivers	4.0%

Source: 2004 Minnesota statewide household child care survey

## Reliability (randomly selected child's FFN caregiver)

As shown in Figure 20, 86 percent of FFN caregivers are able to provide child care overnight for several continuous days, and 81 percent are able to provide child care when the child is sick.

Relative caregivers are more likely than non-relative caregivers to be able to provide child care overnight for continuous days (90 percent versus 74 percent), and provide care when the child is sick (88 percent versus 64 percent).

FFN caregivers caring for children under age 6 are more likely than those caring for children ages 6 to 12 to say they are able to provide care when the child is sick (84 percent versus 76 percent).

FFN caregivers were asked the number of times in the past three months that they were unable to provide care for any reason. Overall, 60 percent say they had not missed a day of care; 28 percent missed one to two days; 10 percent missed three to seven days; and 2 percent missed more than seven days.

About 60 percent of caregivers have someone other than the child's parents who they could count on to provide child care if they are unable to do it (see Figure 21). About a third say that it is the parent's responsibility to find a substitute.

Ninety-one percent of FFN caregivers either "strongly agree" (49 percent) or "agree" (42 percent) that they would watch the child for as long as the parent wanted.

Relative caregivers are more likely than non-relatives to "strongly agree" they would watch the child for as long as the parent wanted (70 percent versus 44 percent).

**20. Indicators of FFN caregiver reliability (as reported by the FFN caregiver) by relationship to randomly selected child and age of child**

<b>Available to provide ongoing care for child overnight or when child is sick</b>	<b>Relationship to child</b>		
	<b>Relatives n=287</b>	<b>Non- relatives n=112</b>	<b>Total N=400</b>
Overnight for several consecutive days	89.9%	74.1%	85.5%
When child is sick	87.5%	64.3%	80.8%

  

<b>Number of times in the past three months unable to provide care for any reason</b>	<b>Age of child</b>		
	<b>0-5 n=194</b>	<b>6-12 n=132</b>	<b>Total N=326</b>
0	57.7%	62.9%	59.8%
1-2	32.5%	22.0%	28.2%
3-7	8.8%	12.1%	10.1%
Greater than 7	1.0%	3.0%	1.8%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Sub-columns do not add up to 400 due to missing/refused.

**21. Other indicators of caregiver reliability**

<b>Caregiver has someone, other than child's parent, who they can usually count on to help care for child if they are unable</b>	<b>Total N=399</b>
Yes, there is someone to count on	59.4%
No, there is no one to count on	4.5%
It is parents' responsibility	36.1%
<b>Will watch child as long as parents want</b>	
Strongly agree	48.6%
Agree	42.4%
Disagree	8.5%
Strongly disagree	0.5%
<b>Often feels that they want to stop taking care of child</b>	
Strongly agree	0.8%
Agree	3.5%
Disagree	34.8%
Strongly disagree	60.9%

*Source:* 2004 Minnesota statewide household child care survey

## Caregiver relationship with child and parents

### Relationship between caregiver and child

FFN caregivers were asked about the length of time they have been providing care for the randomly selected child (see Figure 22). About one-third of FFN caregivers have provided care for less than a year; 14 percent for one to two years; 14 percent for two to three years; 10 percent for three to four years; and 28 percent for four or more years.

Non-relative caregivers are more likely than relative caregivers to have provided care for the child for less than one year (51 percent versus 27 percent). Conversely, relative caregivers are more likely than non-relative caregivers to have provided child care for four years or more (37 percent versus 7 percent).

About a third of FFN caregivers saw the child they care for daily or almost every day, and about a third saw the child a few times a week, before they started to provide child care. Seven percent of FFN caregivers did not have any contact with the child before they started providing care.

While nearly all FFN caregivers who saw the child daily or almost every day define their relationship with the child prior to providing child care as “very close” (82 percent) or “close” (17 percent), relatives are more likely than non-relatives to define their relationship as “very close” (99 percent versus 39 percent).

While 91 percent of FFN caregivers “strongly agree” (49 percent) or “agree” (42 percent) that they often feel that taking care of the child is the best part of their day, relatives are more likely than non-relatives to “strongly agree” (60 percent versus 20 percent), and non-relatives are more likely to “disagree” (22 percent versus 3 percent).

FFN caregivers of children under age 6 are more likely than those caring for children ages 6 to 12 to “strongly agree” that they often feel that taking care of the child is the best part of their day (54 percent versus 41 percent).

Relative and non-relative caregivers are equally likely to have seen the child daily or almost every day before providing child care; however, relatives are more likely to have seen the child a few times a week (39 percent versus 23 percent) and non-relative caregivers are more likely than relative caregivers to have had no contact with the child before providing care (16 percent versus 4 percent).

**22. Relationship between FFN caregiver and randomly selected child by relationship to child**

	Relationship to child		
	Relatives n=281	Non- relatives n=111	Total N=392
<b>Number of years caregiver has cared for child on a regular (at least once a week ) basis</b>			
Less than 1 year	27.4%	51.4%	34.2%
1- 2 years	12.1%	17.1%	13.5%
2-3 years	14.2%	14.4%	14.3%
3-4 years	9.6%	9.9%	9.7%
4 or more	36.7%	7.2%	28.3%
<b>Frequency of contact with child before becoming child's caregiver</b>			
Daily or almost every day	32.2%	32.1%	32.2%
A few times a week	39.2%	23.2%	34.7%
A few times a month or monthly	20.8%	17.9%	20.0%
Every few months; a few times a year	4.2%	10.7%	6.1%
Not at all	3.5%	16.1%	7.1%
<b>Closeness of relationship to child before becoming child's caregiver (only those who had daily contact with child previous to care arrangement)</b>			
	<b>n=91</b>	<b>n=36</b>	<b>N=127</b>
Very close	98.9%	38.9%	81.9%
Somewhat close	1.1%	55.6%	16.5%
Not very close	0.0%	5.6%	1.6%
Not close at all	0.0%	0.0%	0.0%
<b>Often feels that taking care of child is the best part of caregiver's day</b>			
	<b>n=286</b>	<b>n=112</b>	<b>N=398</b>
Strongly agree	60.1%	19.6%	48.7%
Agree	36.7%	56.3%	42.2%
Disagree	3.1%	22.3%	8.5%
Strongly disagree	0.0%	1.8%	0.5%

Source: 2004 Minnesota statewide household child care survey



## Relationship between FFN caregiver and parents

As shown in Figures 23 and 24, 82 percent of FFN caregivers say they frequently share information with parents regarding the child. Sixty-one percent say they frequently talk about the child's daily activities with parents; 51 percent say they frequently discuss the child's health and physical well-being; and 43 percent say they frequently discuss particular problems about the child. Thirty-seven percent of FFN caregivers say they frequently plan activities with parents for the child.

Relative caregivers are more likely than non-relatives, and caregivers of children under age 6 are more likely than those caring for children ages 6 to 12 to frequently share information, plan and discuss daily activities and discuss the child's well-being.

As shown in Figure 25, 87 percent of FFN caregivers feel that the match between their child-rearing values and the parents' is "excellent" (47 percent) or "good" (40 percent). A little less than half of FFN caregivers say they "never disagree" with parents about schedules, discipline or what the child eats; an additional 35 percent say they "seldom" do.

Relative caregivers are more likely than non-relative caregivers to report "occasional" or "frequent" disagreements with parents (23 percent versus 12 percent).

Most FFN caregivers (85 percent) report that they and the parents cooperate and work together "very well" to make sure the child's needs are met.

No significant differences exist based on the relationship of the caregiver to the child or the age of the child.

Most FFN caregivers "strongly disagree" (62 percent) or "disagree" (30 percent) that they feel taken advantage of by the child's parents.

Caregivers of children under age 6 are more likely than those caring for children ages 6 to 12 to strongly disagree that they feel taken advantage of by the child's parents (68 percent versus 53 percent).

**23. Interaction between FFN caregivers and parents by relationship to randomly selected child**

In the past month, how often did caregiver and the parents...	Relationship to child		
	Relatives n=286	Non-relatives n=112	Total N=398
<b>Share information about child</b>			
Frequently	86.4%	71.4%	82.2%
Occasionally	11.2%	21.4%	14.1%
Seldom	1.7%	3.6%	2.3%
Never	0.7%	3.6%	1.5%
<b>Plan activities for child</b>			
Frequently	43.0%	20.5%	36.7%
Occasionally	30.4%	25.9%	29.1%
Seldom	16.8%	25.9%	19.3%
Never	9.8%	27.7%	14.8%
<b>Discuss particular problems about child</b>			
Frequently	46.0%	36.6%	43.3%
Occasionally	28.1%	26.8%	27.7%
Seldom	16.5%	21.4%	17.9%
Never	9.5%	15.2%	11.1%
<b>Talk about child's daily activities, such as what he/she does every morning or afternoon</b>			
Frequently	65.0%	49.1%	60.6%
Occasionally	20.6%	25.9%	22.1%
Seldom	11.2%	14.3%	12.1%
Never	3.1%	10.7%	5.3%
<b>Discuss child's health and physical well-being</b>			
Frequently	57.7%	34.8%	51.3%
Occasionally	27.6%	36.6%	30.2%
Seldom	10.1%	17.9%	12.3%
Never	4.5%	10.7%	6.3%

Source: 2004 Minnesota statewide household child care survey

**24. Interaction between FFN caregivers and parents by age of randomly selected child**

In the past month, how often did caregiver and the parents...	Age of child		
	0-5 n=246	6-12 n=153	Total N=399
<b>Share information about child</b>			
Frequently	89.0%	71.2%	82.2%
Occasionally	10.2%	20.3%	14.0%
Seldom	0.8%	4.6%	2.3%
Never	0.0%	3.9%	1.5%
<b>Plan activities for child</b>			
Frequently	40.7%	30.1%	36.6%
Occasionally	29.7%	28.8%	29.3%
Seldom	18.7%	20.3%	19.3%
Never	11.0%	20.9%	14.8%
<b>Discuss particular problems about child</b>			
Frequently	50.8%	30.9%	43.2%
Occasionally	27.6%	28.3%	27.9%
Seldom	15.0%	22.4%	17.8%
Never	6.5%	18.4%	11.1%
<b>Talk about child's daily activities, such as what he/she does every morning or afternoon</b>			
Frequently	71.1%	43.8%	60.7%
Occasionally	19.5%	26.1%	22.1%
Seldom	7.3%	19.6%	12.0%
Never	2.0%	10.5%	5.3%
<b>Discuss child's health and physical well-being</b>			
Frequently	60.2%	36.6%	51.1%
Occasionally	27.2%	34.6%	30.1%
Seldom	8.5%	18.3%	12.3%
Never	4.1%	10.5%	6.5%

Source: 2004 Minnesota statewide household child care survey

**25. Relationship between FFN caregiver and parents by caregiver's relationship to randomly selected child**

	Relationship to child		
	Relatives n=286	Non- relatives n=112	Total N=398
<b>Match between caregiver's and parents' child-rearing values</b>			
Excellent	48.4%	43.2%	47.0%
Good	40.4%	37.8%	39.6%
Fair	7.4%	14.4%	9.3%
Poor	3.9%	4.5%	4.0%
<b>How often caregiver and parents disagree about schedules, discipline or what child eats</b>			
Frequently	5.3%	1.8%	4.3%
Occasionally	17.3%	9.8%	15.2%
Seldom	39.8%	21.4%	34.6%
Never	37.7%	67.0%	46.0%
<b>How well caregiver and parents cooperate and work together in making sure child's needs are met</b>			
Very well	86.3%	80.2%	84.6%
Somewhat well	11.6%	14.4%	12.4%
Somewhat poorly	1.1%	5.4%	2.3%
Very poorly	1.1%	0.0%	0.8%
<b>Caregiver feels that child's parents take advantage</b>			
Strongly agree	0.7%	1.8%	1.0%
Agree	6.7%	8.9%	7.3%
Disagree	28.4%	32.1%	29.5%
Strongly disagree	64.2%	57.1%	62.2%

Source: 2004 Minnesota statewide household child care survey

## Activities for children’s cognitive, social, emotional and physical development

This section includes only survey results for caregivers who provide more than one hour of care per day during standard hours, after school and weekends — times when developmental activities might be expected. Caregivers were read a list of activities appropriate for the age of the selected child and for the informal setting. The list includes activities for learning words and numbers as well as for fostering curiosity, imagination and healthy relationships.

These are not intended to represent all the selected child’s developmental activities. It is also important to consider that caregivers may not have to offer each of the activities; for example, a caregiver might not read to the child or have the child play with others if those needs are being met at home, at other activities or through other child care arrangements.

FFN caregivers report performing and encouraging a wide range of activities to encourage children’s cognitive, social, emotional and physical development (see Figure 26). Cognitive development activities include reading, singing, playing games, doing creative activities, practicing language and math skills, doing puzzles and teaching about nature and science. Activities that promote social and emotional development include hugging and kissing the child, arranging for the child to play with other children, passing on family or cultural values and traditions, encouraging games that require pretending and imagination and allowing the child to help the caregiver around the house. Physical development activities include having the child go on outings to a tot area, park or playground; playing with toys or household items that can help them learn eye-hand coordination; playing outdoors, running, climbing, jumping or playing sports; and participating in physical activities or lessons through a local business or organization.

For children under age 2, the most common development activities (daily or most days) are hugging and kissing the child (98 percent), talking or cooing, telling stories or singing to the child (98 percent) and playing games like peek-a-boo (96 percent).

For children age 2 to 5, FFN caregivers most often talk, tell stories or sing to the child (88 percent daily or most days); practice language or math with the child, such as reciting the alphabet, playing counting games or doing puzzles (76 percent daily or most days); have the child sing or read along with them or teach the child songs or stories (74 percent daily or most days); and do creative activities such as drawing (74 percent).

Children ages 2 to 5 most often play with toys or household items that promote hand-eye coordination (91 percent daily or most days) and play “pretend” games by using toys and dolls, by dressing up or by acting out roles or stories (75 percent daily or most days).

For children ages 6 to 12, FFN caregivers most often talk, tell stories or sing to the child (76 percent daily or most days), have the child sing or read along with them, and teach the child songs or stories (60 percent daily or most days).

Children ages 6 to 12 most often play with other children (69 percent daily or most days) and play outdoors, running, climbing, jumping or playing sports (68 percent daily or most days).

## 26. Children's developmental activities by age of randomly selected child

### Children ages 0 to 1

On days that caregiver cares for child, how often does caregiver... (N=81)	Every day	Most days	Some days	Not very often
Hug and kiss	93.8%	3.7%	1.2%	1.2%
Talk or coo, tell stories or sing to child	88.9%	8.6%	0.0%	2.5%
Play games such as peek-a-boo or games with child's fingers and toes	77.8%	18.5%	2.5%	1.2%
Point to pictures or things and say what they are	71.6%	11.1%	4.9%	12.3%
Read to child	41.8%	17.7%	19.0%	21.5%
Get together with other children	13.6%	6.2%	29.6%	50.6%
Go on trips or outings (e.g., tot area, park or playground)	8.6%	6.2%	35.8%	49.4%
Take child along when visiting with other adult friends/relatives	13.6%	8.6%	42.0%	35.8%
Give child baby toys or household items such as plastic bowls or cups	72.8%	11.1%	4.9%	11.1%

### Children ages 2 to 5

On days that caregiver cares for child, how often does caregiver... (N=163)	Every day	Most days	Some days	Not very often
Talk, tell stories, or sing to child	69.9%	18.4%	8.6%	3.1%
Practice language or math with child, such as reciting alphabet, playing counting games or doing puzzles	50.3%	25.2%	16.6%	8.0%
Have child sing or read along, or help child learn the songs or stories	50.3%	23.3%	15.3%	11.0%
Read to child	48.5%	23.3%	16.6%	11.7%
Do creative activities with child such as drawing, painting or making something with household items	45.1%	28.4%	19.1%	7.4%
Help child learn something about nature, such as watching bugs, looking at leaves or gardening	31.3%	24.5%	29.4%	14.7%
Pass on family or cultural values and traditions through stories, songs, dances or history	22.2%	20.4%	28.4%	29.0%

Source: 2004 Minnesota statewide household child care survey

Note: Includes care for more than one hour per day only. Does not include early morning or late night care.

## 26. Children's developmental activities by age of randomly selected child (continued)

### Children ages 2 to 5

On days that caregiver cares for child, how often does child ... (N=163)	Every day	Most days	Some days	Not very often
Play "pretend" games by using toys, dolls, dressing up or using imagination to act out roles or stories	53.1%	22.2%	14.2%	10.5%
Play with toys or household items that can help children learn hand-eye coordination	65.6%	25.8%	4.9%	3.7%
Play with other children	40.7%	16.0%	14.2%	29.0%
Play outdoors, running, climbing, jumping or playing sports	28.2%	35.6%	28.8%	7.4%
Help around the house	35.0%	18.4%	20.9%	25.8%
Accompany caregiver when visiting other adult friends/relatives	16.0%	11.1%	29.0%	43.8%
Go on trips or outings (e.g., a library, park or playground)	9.3%	21.6%	45.1%	24.1%

### Children ages 6 to 12

On days that caregiver cares for child, how often does caregiver... (N=148)	Every day	Most days	Some days	Not very often
Talk, tell stories, or sing to child	60.1%	16.2%	12.2%	11.5%
Have child sing or read along, or help child learn the songs or stories	33.8%	25.7%	17.6%	23.0%
Practice language or math with child, or help with homework	21.6%	12.2%	23.0%	43.2%
Read to or with child	22.3%	16.2%	20.9%	40.5%
Do creative activities with child such as drawing, painting or building something	29.1%	23.0%	28.4%	19.6%
Pass on family or cultural values and traditions through stories, songs, dances or history	15.5%	21.6%	33.8%	29.1%
Help child learn about nature or science	14.9%	19.6%	35.8%	29.7%

### On days that caregiver cares for child, how often does child... (N=148)

Play with other children	52.0%	16.9%	14.2%	16.9%
Play outdoors, running, climbing, jumping or playing sports	39.2%	28.4%	25.0%	7.4%
Do homework	20.3%	12.8%	20.9%	45.9%
Help around the house	19.6%	19.6%	33.1%	27.7%
Accompany caregiver when visiting other adult friends/relatives	6.1%	15.5%	39.9%	38.5%
Go on trips or outings (e.g., a library, park or playground)	5.4%	21.6%	47.3%	25.7%
Participate in activities or lessons at a recreation center, library, church, camp, gym or sports facility	4.7%	5.4%	36.5%	53.4%

Source: 2004 Minnesota statewide household child care survey

Note: Includes care for more than one hour per day only. Does not include early morning or late night care.

## Children's choices and social skills

FFN caregivers were asked what type of choices they give children and what specific things they do to increase children's social skills. Their responses are grouped into the categories shown in Figure 27. Most commonly mentioned for both age groups, about three-quarters of the caregivers let the child choose what activity to do, and 61 percent let the child choose what to eat or wear. Forty-one percent of FFN caregivers talk about values, and 35 percent say they teach children how to respect and interact with others.

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### 27. FFN activities for children's social and emotional development

	<b>Total N=354</b>
<b>Kinds of choices FFN caregivers offer children</b>	
Which activity to do	76.3%
What to eat or wear	61.0%
When or where to do an activity	5.1%
Most things	4.2%
When or where to go	3.7%
When and how to help with tasks	1.1%
Whether they need/want to help	0.3%
Respondent did not answer the question	6.8%
<b>Kinds of things FFN caregivers do to help children learn social skills</b>	
Talk about and teach values (respect, culture, elders)	41.0%
Teach child how to respect and interact with others	35.0%
Emphasize good behavior/manners	15.5%
Take child places (events, library, church, etc.)	11.9%
Talk and teach (general)	8.2%
Teach child to be responsible and help with chores	5.4%
Talk and teach with stories/games/shows	4.5%
Teach child good communication	3.4%
Teach child to do things for him/herself	0.8%
Get child involved in activities	0.8%
Respondent did not answer the question	9.0%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Categories derived from open-ended question. Multiple responses allowed, grouped into categories. Includes care for more than one hour per day only. Does not include early morning or late night care.



## Television and videos

On average, FFN caregivers report that a television or video is on two hours per day (see Figure 28). About 45 percent report that the children watch shows or videos designed *for children* every day (28 percent) or most days (16 percent); while about 7 percent say that every day or most days the children watch shows or videos that are designed *for all ages* such as talk shows, soap operas or movies.

Children ages 6 to 12 are more likely than younger children to watch shows or videos for people of all ages at least some days (28 percent versus 8 percent).

### 28. Television and videos on a typical day by age of randomly selected child

Number of estimated hours that a TV or video is on	Age of child		
	0-5 n=247	6-12 n=153	Total N=400
0	23.9%	24.2%	24.0%
1-2	51.4%	52.3%	51.8%
3-5	18.6%	17.0%	18.0%
6 or more	5.3%	6.5%	5.8%
<b>Mean number hours that TV or video is on in a day</b>	<b>1.9</b>	<b>2.0</b>	<b>1.9</b>
<b>How often child watches shows or videos primarily for children, such as cartoons or educational</b>			
Every day	28.3%	28.1%	28.3%
Most days	15.4%	17.6%	16.3%
Some days	15.0%	20.3%	17.0%
Not very often	16.2%	9.8%	13.8%
Never	23.9%	24.2%	24.0%
<b>How often child watches shows or videos that are for all ages, such as talk shows, soap operas, or movies</b>			
Every day	2.4%	2.6%	2.5%
Most days	2.0%	7.2%	4.0%
Some days	3.2%	18.3%	9.0%
Not very often	67.2%	47.7%	59.8%
Never	23.9%	24.2%	24.0%

Source: 2004 Minnesota statewide household child care survey

Note: Percents do not add up to 100 due to missing/don't know.

## Ways of dealing with misbehavior

As shown in Figure 29, when asked about how they deal with serious misbehavior, FFN caregivers report numerous techniques. The most common is removing the child or putting the child in “time out” (44 percent), followed by talking to or warning the child about the misbehavior (29 percent).

Children ages 6 to 12 are more likely than younger children to be warned or talked to (36 percent versus 24 percent), while younger children are more likely to be distracted or ignored (13 percent versus 2 percent).

In dealing with less serious misbehavior, FFN caregivers most commonly talk to the child about the misbehavior and give warnings (57 percent). About 17 percent distract the child or ignore the bad behavior, and 9 percent remove or put the child in time out.

FFN caregivers are more likely to use distraction or ignore bad behavior of younger children (22 percent) than of those ages 6 to 12 (8 percent).

### 29. Ways of dealing with misbehavior by age of randomly selected child

Main methods of dealing with behavior when child is <i>seriously</i> misbehaving	Age of child		
	0-5 n=243	6-12 n=147	Total N=390
Remove child, put in "time out"	44.4%	43.5%	44.1%
Talk to child about behavior, give warnings	24.3%	36.1%	28.7%
Distract child or ignore the bad behavior	12.8%	2.0%	8.7%
Give affection, hold child	6.2%	0.7%	4.1%
Yell or scold	2.1%	2.7%	2.3%
Tell parents	0.8%	3.4%	1.8%
Withhold activity	1.2%	2.7%	1.8%
Spank	0.8%	0.7%	0.8%
Give child other choices	0.4%	0.7%	0.5%
Send child home	0.4%	0.7%	0.5%
Withhold food	0.4%	0.0%	0.3%
Did not answer the question	6.2%	6.8%	6.4%

**29. Ways of dealing with misbehavior by age of randomly selected child (continued)**

Main methods of dealing with behavior when child is misbehaving in a <i>less serious</i> way	Age of child		
	0-5 n=247	6-12 n=153	Total N=400
Talk to child about behavior, give warnings	51.0%	66.7%	57.0%
Distract child or ignore the bad behavior	22.3%	7.8%	16.8%
Remove child, put in "time out"	9.3%	7.8%	8.8%
Yell or scold	2.4%	2.6%	2.5%
Give affection, hold child	3.2%	0.0%	2.0%
Tell parents	0.0%	3.9%	1.5%
Withhold activity	0.8%	2.6%	1.5%
Withhold food	0.4%	0.7%	0.5%
Give child other choices	0.4%	0.7%	0.5%
Other	0.0%	0.7%	0.3%
Did not answer the question	10.1%	5.9%	8.6%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Categories derived from open-ended question. Multiple responses allowed, grouped into categories. Responses that "did not answer the question" of how caregiver deals with serious misbehavior include "not needed; child never misbehaves" and "not needed; child is too young." One case of "refused" was not included in table.

# FFN caregiver needs and supports

## Sources of ideas and information

FFN caregivers were asked from where they usually get ideas and information when a problem comes up while taking care of a child (see Figure 30). Respondents were asked to answer “yes” or “no” to each source of information or ideas. Over half of FFN caregivers say that they get ideas from the child’s parent or guardian (55 percent), followed by family members (24 percent), through their own experience or resources (15 percent), books or handouts (12 percent) and from friends or neighbors (10 percent).

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### 30. FFN caregivers’ usual sources of help

<b>When a problem comes up while taking care of a child, caregiver usually gets ideas or information from...</b>	<b>Percent reporting “Yes” N=400</b>
Child’s parent or guardian	55.3%
Family member	24.3%
Work it out; rely on experience	15.3%
Books or handouts	11.5%
Friend or neighbor	10.0%
The Internet	5.8%
Doctor, hospital, clinic or nurse	4.5%
Teacher	3.5%
Another child care provider	2.3%
Library	0.8%
Business community	0.8%
Child	0.3%
Did not answer the question/don’t know	11.1%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Questions were answered as Yes/No. Multiple responses allowed, so percents do not total 100.

## Sources of encouragement and support

FFN caregivers were asked whom they can count on for encouragement and emotional support (see Figure 31). Respondents were asked to answer “yes” or “no” to each source of support. Ninety-one percent of FFN caregivers say that they get support from family members, and 90 percent from the parents of children in their care. Other main sources of support are friends (77 percent), other people providing child care (48 percent) and their church or faith community (42 percent).

For encouragement and emotional support, metro caregivers are more likely than Greater Minnesota caregivers to report they can count on their ethnic community (31 percent versus 22 percent).

### 31. FFN caregivers’ sources of encouragement and emotional support

<b>When caregiver needs encouragement and emotional support for taking care of children, can he or she count on help from any of these sources?</b>	<b>Percent reporting “Yes” N=400</b>
Family members	91.3%
The parents	90.0%
Friends	77.0%
Other people providing child care	47.5%
Church or faith community	42.0%
Early childhood education programs	28.0%
Members of ethnic community	26.0%
Adults at a children’s play group	18.5%
A neighborhood resource center	13.3%
Child care network or resource center	12.8%
Professional helpers	1.8%
Co-workers	1.8%
Internet and Internet-based discussion boards	.8%
Someone who knows the child well	.5%
Don’t know/none of the above	1.5%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Questions were answered as Yes/No for each item. Multiple responses were allowed, so the total percentage is not 100.

## Problems in providing care

As shown in Figure 32, few FFN caregivers report having big problems when providing child care. The most commonly reported problems (combining big and small problems) include “not having enough time for him or herself” (30 percent), “being comfortable with disciplining other people’s children” (23 percent), “having to constantly change plans or routines” (21 percent) and “long or irregular hours” (18.5 percent).

Caregivers of children ages 6 to 12 are more likely than caregivers of younger children to report big or small problems with meeting the special needs of a child in their care (16 percent versus 6 percent).

### 32. Usual problems FFN caregivers encounter

Things people sometimes mention as problems when providing child care. For caregiver is this...(N=399)	A big problem	A small problem	Not a problem at all
Problems with housing, food, or utilities that make providing child care difficult	2.0%	8.0%	90.0%
Not having enough time alone	5.8%	24.0%	70.3%
Disagreements with parents about paying for child care	1.5%	5.3%	93.2%
Not having enough first aid supplies	0.8%	5.3%	94.0%
Long or irregular work hours	5.0%	13.5%	81.5%
Not having enough toys or things to do	2.3%	12.0%	85.8%
Having to constantly change plans and routines	3.3%	17.8%	79.0%
Feeling isolated or disconnected from friends or activities	2.3%	10.3%	87.5%
Being comfortable with disciplining other people’s children	3.5%	19.3%	77.3%
Meeting the special needs of a child	1.0%	8.6%	90.4%

Source: 2004 Minnesota statewide household child care survey

# FFN caregiving resources, information and interest in licensing

An extensive literature review for First 5 California Family, Friend and Neighbor Child Caregiver Support Project found that FFN caregivers are interested in improving the quality of the care they provide.<sup>8</sup> Their requests for information and support fall into four categories: health/safety/nutrition, child development, business and financial issues, and community resources and activities. Most of this information comes from qualitative and focus group studies, however, and not from surveys such as this.

The Minnesota Department of Human Services, Ready 4 K (a school readiness advocacy organization in Minnesota) and Families and Work Institute's Sparking Connections are in the process of designing outreach and recruitment strategies to support FFN caregivers in order to improve the quality of care.<sup>9</sup> This section, intended to inform the development and enhance the effectiveness of these strategies, describes the types of resources FFN caregivers already have access to, the ones they most commonly use, and how helpful various resources are. When caregivers lacked access to any resources, they were asked how helpful it would be to have access and where they would prefer to obtain the information and support.

This section also documents the extent of FFN caregivers' interest in becoming officially licensed as family child care providers and their reasons for and against it.

## Access to caregiving resources and information

### Resources for FFN caregivers

As shown in Figure 33, FFN caregivers say that the most helpful types of child care resources would be small grants to pay for books, games and materials (rated "very helpful" by 38 percent); a program through which they could get safety equipment and supplies (rated "very helpful" by 31 percent); someone to call when they are facing a problem with a child or with the child's parents (rated "very helpful" by 30 percent); and someone to connect them to early care and education organizations (rated "very helpful"

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<sup>8</sup> Susman-Stillman, A. 2004. *Family, Friend and Neighbor Care: Promoting Quality Care and Children's Healthy Development*. Sacramento, CA: First 5 California and ETR Associates.

<sup>9</sup> Sparking Connections is a national initiative to demonstrate and evaluate strategies to support FFN caregivers through partnerships with retailers and other non-traditional partners. Resources for Child Caring in St. Paul is the Minnesota participant with funding from the McKnight Foundation.

by 30 percent). Resources perceived to be the least helpful by caregivers include having trained individuals come to their homes to help them (rated “not helpful” by 62 percent); help with arranging transportation (rated “not helpful” by 65 percent); and drop-in or respite care for children so caregivers can have some time for themselves (rated “not helpful” by 71 percent).

Almost 30 percent of the FFN caregivers say that they would find it “very helpful” to have access to a government subsidized food program to get nutritious food for the children in their care at no cost or low cost (see Figure 33).

FFN caregivers in Greater Minnesota and the metro area give similar ratings on the helpfulness of these resources.

Non-relative caregivers are more likely than relative caregivers to rate having someone to call when they are facing a problem with a child or with the child’s parents as “very helpful” (39 percent versus 26 percent).

Caregivers who provide 30 or more hours of child care per typical week are more likely than those providing 29 or fewer hours to rate drop-in or respite care as “very helpful” (22 percent versus 15 percent).

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### 33. Resources that FFN caregivers would find helpful

<b>How helpful it would be to have...</b>	<b>Total N=400</b>
<b>Small grants that would pay for books, educational toys and games and other materials needed to teach children the skills they need for school</b>	
Very helpful	38.0%
Somewhat helpful	18.8%
Not helpful	42.8%
<b>An organization or program that would help get safety equipment or supplies, so that the home will be safer for children</b>	
Very helpful	31.0%
Somewhat helpful	25.5%
Not helpful	43.3%
<b>Someone to call when facing a problem with a child or with the child’s parents</b>	
Very helpful	29.8%
Somewhat helpful	30.5%
Not helpful	39.0%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* N varies slightly due to missing/refused.



### 33. Resources that FFN caregivers would find helpful (continued)

How helpful it would be to have...	Total N=400
<b>Someone who would connect caregiver to organizations that help parents and others who take care of young children to learn more about how to help children do well in school, while someone else is watching the children. Some examples are Early Childhood and Family Education, Head Start, schools and community organizations.</b>	
Very helpful	29.5%
Somewhat helpful	23.8%
Not helpful	45.8%
<b>Adult community education workshops or other learning opportunities about caring for children</b>	
Very helpful	27.5%
Somewhat helpful	32.5%
Not helpful	39.8%
<b>Trained individuals who would come to the house and provide a break from caregiving, read to the child(ren) or work with caregiver and the child(ren) to help them learn and do well in school</b>	
Very helpful	18.5%
Somewhat helpful	19.3%
Not helpful	61.8%
<b>Help with arranging or providing transportation for caregiver and the child(ren) to activities, events or learning opportunities in the community</b>	
Very helpful	16.3%
Somewhat helpful	18.8%
Not helpful	64.8%
<b>Drop-in or respite care for children so caregivers can have some time for themselves</b>	
Very helpful	16.3%
Somewhat helpful	13.0%
Not helpful	70.5%
<b>Access to a government subsidized food program, where, in exchange for regular required paperwork to fill out, caregiver could get nutritious food for children at no cost or low cost?</b>	
Very helpful	30.0%
Somewhat helpful	13.0%
Not very helpful	11.0%
Not at all helpful	45.0%

Source: 2004 Minnesota statewide household child care survey

## Information for FFN caregivers

FFN caregivers were asked what information on child care they would find helpful (see Figure 34). Specifically, respondents rated various types of information as “very helpful,” “helpful,” “not very helpful” or “not at all helpful.” Overall, caregivers are receptive to receiving information on a wide range of child development and health and safety topics. How to help children learn and do well in school is rated as “very helpful” by the most caregivers (58 percent), followed by information on child safety (53 percent).

Overall, metro area and Greater Minnesota are similar regarding to the kinds of information they rate as “very helpful.”

More non-relative caregivers than relative caregivers rate each form of information as “very” or “somewhat” helpful.

### 34. Information on child care that FFN caregivers would find helpful, by caregiver’s relationship to randomly selected child

How helpful it would be to have access to information on each of these topics	Relationship to child		
	Relatives n=286	Non- relatives n=112	Total N=398
<b>How to help children learn and do well in school</b>			
Very helpful	56.8%	62.5%	58.4%
Somewhat helpful	23.3%	29.5%	25.1%
Not very helpful	7.0%	6.3%	6.8%
Not at all helpful	12.9%	1.8%	9.8%
<b>Child safety</b>			
Very helpful	49.8%	59.8%	52.6%
Somewhat helpful	32.8%	31.3%	32.3%
Not very helpful	7.7%	4.5%	6.8%
Not at all helpful	9.8%	4.5%	8.3%
<b>Dealing with behavioral problems and how to discipline children</b>			
Very helpful	44.3%	61.6%	49.1%
Somewhat helpful	33.8%	31.3%	33.1%
Not very helpful	8.0%	2.7%	6.5%
Not at all helpful	13.9%	4.5%	11.3%
<b>Children’s health</b>			
Very helpful	47.6%	51.8%	48.7%
Somewhat helpful	34.3%	41.1%	36.2%
Not very helpful	6.3%	4.5%	5.8%
Not at all helpful	11.9%	2.7%	9.3%

Source: 2004 Minnesota statewide household child care survey

**34. Information on child care that FFN caregivers would find helpful by caregiver's relationship to randomly selected child (continued)**

<b>How helpful it would be to have access to information on each of these topics</b>	<b>Relationship to child</b>		
	<b>Relatives n=286</b>	<b>Non- relatives n=112</b>	<b>Total N=398</b>
<b>Ideas about activities for children of different ages</b>			
Very helpful	42.2%	54.5%	45.6%
Somewhat helpful	35.9%	38.4%	36.6%
Not very helpful	7.3%	2.7%	6.0%
Not at all helpful	14.6%	4.5%	11.8%
<b>Children's nutrition</b>			
Very helpful	44.3%	47.3%	45.1%
Somewhat helpful	30.7%	37.5%	32.6%
Not very helpful	10.5%	10.7%	10.5%
Not at all helpful	14.6%	4.5%	11.8%
<b>Child development, or what children should know and be able to do at different ages</b>			
Very helpful	41.8%	51.8%	44.6%
Somewhat helpful	34.5%	34.8%	34.6%
Not very helpful	12.9%	9.8%	12.0%
Not at all helpful	10.8%	3.6%	8.8%
<b>Challenges like speech problems or learning disabilities</b>			
Very helpful	40.9%	52.7%	44.2%
Somewhat helpful	27.6%	24.1%	26.6%
Not very helpful	11.2%	17.0%	12.8%
Not at all helpful	20.3%	6.3%	16.3%
<b>Information about community events for children and caregivers</b>			
Very helpful	43.6%	42.9%	43.4%
Somewhat helpful	34.8%	44.6%	37.6%
Not very helpful	8.7%	8.0%	8.5%
Not at all helpful	12.9%	4.5%	10.5%

Source: 2004 Minnesota statewide household child care survey

## Likelihood of using information in various formats

FFN caregivers were asked to rate how likely they would be to use the information they needed if it was presented in various formats (see Figure 35). Fifty-seven percent say they would be “very likely” to use kits or packets with supplies and materials that fit the ages of the children; and 58 percent say they would be “very likely” to use books. Fewer than half of the FFN caregivers say they would be “very likely” to use any of the other formats.

In terms of language, 8 percent of FFN caregiver respondents feel it is “very important” to get written materials in a language other than English, either for themselves or the children in their care (see Figure 36). Similarly, 8 percent say it is “very important” to get educational videos, DVDs or CDs in a language other than English for themselves or for the children.

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### 35. Likelihood of using various formats for accessing helpful topics

If information on the topic(s) caregiver listed as helpful were available, how likely would caregiver be to use it in the following formats? (N=387)	Very likely	Somewhat likely	Somewhat unlikely	Very unlikely
Kits or packets with supplies and materials that fit the ages of the children	57.4%	28.4%	4.9%	9.3%
Books	57.8%	32.1%	5.2%	4.9%
Videos or DVDs	34.6%	39.5%	12.7%	13.2%
Brochures or small booklets	47.5%	32.8%	8.5%	11.1%
Newsletters or magazines	47.8%	35.1%	9.0%	8.0%
Personal discussions or interactions with someone trained in this or these topics	26.2%	31.1%	17.9%	24.9%
CD-ROMs	17.1%	29.2%	14.7%	39.0%

Source: 2004 Minnesota statewide household child care survey

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### 36. Importance of getting materials in a language other than English

(N=400)	Very important	Somewhat important	Not important
How important is it to be able to get written educational materials for caregiver, or for the children, in a language other than English?	8.3%	13.5%	78.3%
How important is it to get educational videos, DVDs or CDs for caregiver, or for the children, in a language other than English?	8.0%	17.0%	75.0%

Source: 2004 Minnesota statewide household child care survey

## Likelihood of using various locations for learning opportunities

Respondents were also asked the likelihood of their using various locations if they were very or somewhat likely to attend child care learning opportunities. According to these self-reports, as shown in Figure 37, about 64 percent of respondents are very likely to attend if the learning opportunity occurs in a neighborhood school; 62 percent if it occurs in a local library; 58 percent if it occurs in a church or place of worship, 57 percent in a recreation center and 55 percent in a local community center.

Forty-three percent of FFN caregivers say they are not likely to attend if the learning opportunity takes place in a mall or shopping center, and about 22 percent are unlikely to attend if it takes place in a social service agency or in another caregiver's home.

- Metro area FFN caregivers are more likely to attend than Greater Minnesota caregivers if the learning opportunity takes place in a neighborhood school (72 percent versus 58 percent), a local library (67 percent versus 59 percent), in a local community or cultural center (64 percent versus 48 percent), or in a recreation center (65 percent versus 50 percent).
- Relative and non-relative FFN caregivers are similar regarding where they say they would very likely attend learning opportunities.

FFN caregivers were also asked to name the most likely place they would attend learning opportunities or workshops; the researchers grouped their responses into categories, allowing for multiple responses. Four places stand out: neighborhood schools (47 percent), local churches or places of worship (27 percent), local community or cultural centers (17 percent) and local libraries (14 percent).

As shown in Figure 38, 16 percent of those interested in attending say that it would make a big difference to them if they had to pay a small fee to cover the cost of a workshop or informal training. About half say it would not make much difference, and another 31 percent say it would make no difference. Conversely, when asked the likelihood of attending educational workshops and trainings if child care, a meal and educational supplies were provided free of charge, 47 percent say "very likely," 41 percent say "somewhat likely" and 13 percent say "not likely."

When asked what would keep them from attending these workshops or informal trainings, 27 percent of FFN caregivers say "nothing" would keep them from attending. About 29 percent say that conflicts with work or other activities would be a barrier for them. About 13 percent say one of the following would be a barrier: time of day, transportation, weather, distance or lack of child care.

For the most part, metro and Greater Minnesota FFN caregivers cite similar potential barriers to attending workshops or trainings. Lack of child care tends to be reported as a potential barrier more by metro area caregivers than Greater Minnesota caregivers (16 percent versus 10 percent).

### 37. Likelihood of FFN caregivers using various types of locations for learning opportunities

If community education workshops or learning opportunities were available, likelihood that caregiver would attend in various places	Location of caregiver		
	Metro n=99	Greater MN n=111	Total N=210
<b>A neighborhood school</b>			
Very likely	71.7%	57.7%	64.3%
Somewhat likely	26.3%	41.4%	34.3%
Not likely	2.0%	0.9%	1.4%
<b>A local library</b>			
Very likely	66.7%	58.6%	62.4%
Somewhat likely	32.3%	39.6%	36.2%
Not likely	1.0%	1.8%	1.4%
<b>A local church or place of worship</b>			
Very likely	61.6%	55.0%	58.1%
Somewhat likely	33.3%	36.0%	34.8%
Not likely	5.1%	9.0%	7.1%
<b>A recreation center</b>			
Very likely	64.6%	49.5%	56.7%
Somewhat likely	30.3%	44.1%	37.6%
Not likely	5.1%	6.3%	5.7%
<b>A local community or cultural center</b>			
Very likely	63.6%	47.7%	55.2%
Somewhat likely	28.3%	44.1%	36.7%
Not likely	8.1%	8.1%	8.1%
<b>A senior citizens center</b>			
Very likely	43.4%	42.3%	42.9%
Somewhat likely	42.4%	36.0%	39.0%
Not likely	14.1%	21.6%	18.1%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Question was asked only of caregiver respondents who report being "very" or "somewhat likely" to attend community education workshops or learning opportunities.

**37. Likelihood of FFN caregivers using various types of locations for learning opportunities (continued)**

If community education workshops or learning opportunities were available, likelihood that caregiver would attend in various places	Location of caregiver		
	Metro n=99	Greater MN n=111	Total N=210
<b>A local community college</b>			
Very likely	35.7%	36.9%	36.4%
Somewhat likely	48.0%	46.8%	47.4%
Not likely	16.3%	16.2%	16.3%
<b>A social service agency</b>			
Very likely	36.4%	34.5%	35.4%
Somewhat likely	40.4%	43.6%	42.1%
Not likely	23.2%	21.8%	22.5%
<b>Another caregiver's home</b>			
Very likely	28.3%	36.0%	32.4%
Somewhat likely	51.5%	40.5%	45.7%
Not likely	20.2%	23.4%	21.9%
<b>A mall or shopping center</b>			
Very likely	27.3%	24.3%	25.7%
Somewhat likely	30.3%	32.4%	31.4%
Not likely	42.4%	43.2%	42.9%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Question was only asked of caregiver respondents who report being "very" or "somewhat likely" to attend community education workshops or learning opportunities.

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**38. FFN caregivers' barriers to attendance of learning opportunities**

	<b>Total N=210</b>
<b>Would it make any difference if those workshops or informal trainings charged a small fee to cover costs?</b>	
A big difference	15.7%
Not much difference	52.9%
No difference	31.4%
<b>Is there anything that would keep caregiver from attending those workshops or informal trainings if they were available?</b>	
Conflict with work or other activities	28.6%
Nothing; caregiver usually attends	27.1%
Transportation, weather or distance	13.3%
Time of day	12.9%
Not having child care	12.9%
Money (if it costs too much)	10.5%
Poor health (caregiver's or child's at time of event)	5.2%
If topic and trainer are not interesting	4.8%
Other	1.0%
Did not answer the question	0.5%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Questions were only asked of caregiver respondents who report being "very" or "somewhat likely" to attend community education workshops or learning opportunities. The second question about barriers was open-ended with multiple responses allowed. Responses were grouped into categories.



## Interest in licensing

Three percent of FFN caregivers are currently licensed family child care providers. Of those not currently licensed, 18 percent are “very interested” (7 percent) or “somewhat interested” (11 percent) in becoming licensed as a child care provider (see Figure 39). In a similar survey of FFN caregivers caring for children through the Minnesota Child Care Assistance Program, about half say they are “very interested” (31 percent) or “somewhat interested” (21 percent) in becoming licensed as a child care provider.<sup>10</sup>

Metro area caregivers are more likely than Greater Minnesota caregivers to be “very” or “somewhat interested” in becoming a licensed child care provider (22 percent versus 14 percent).

Non-relative caregivers are more likely than relative caregivers to be “very” or “somewhat interested” in becoming a licensed child care provider (25 percent versus 15 percent) as shown in Figure 39. Conversely, relative caregivers are more likely to be “not at all interested” (74 percent versus 59 percent).

FFN caregivers were asked their reasons for and against becoming licensed providers. Their numerous responses, grouped into categories, are shown in Figure 40. Half of those who are interested in becoming licensed describe reasons related to caregiving for children that are similar to their reasons for providing FFN care, such as “liking children” and “to be at home with their children.” “To make their child care more legitimate” (22 percent) is the next most common reason.

Among those interested in becoming licensed, FFN caregivers in the metro area are more likely than those in Greater Minnesota to say they are interested in becoming licensed to “gain more legitimacy” (33 percent versus 7 percent). Those in Greater Minnesota are more likely than metro area caregivers to say “to make more money” (17 percent versus 5 percent).

FFN caregivers say they are not interested in becoming licensed providers mainly because they “just take care of family members” (21 percent), “are too old” (19 percent) and “have another job” (18 percent).

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<sup>10</sup> Chase, R., Arnold, J. and Schauben, L. 2005. *Family, Friends and Neighbors Caring for Children Through the Minnesota Child Care Assistance Program, a Survey of Caregivers and Parents*. St. Paul, MN: Wilder Research and the Minnesota Department of Human Services.

Relative caregivers are more likely than non-relative caregivers to say they are not interested in becoming licensed because they “just take care of family members” (26 percent versus 6 percent) and because they are “too old” (24 percent versus 4 percent). Non-relative caregivers are more likely to say they are “just not interested” (20 percent versus 8 percent) and because it is “too much responsibility” (17 percent versus 5 percent).

**39. FFN caregivers’ interest in becoming licensed as a child care provider by location and by FFN caregiver’s relationship to randomly selected child**

How interested is the caregiver in becoming a licensed child care provider?	Location of FFN caregiver		
	Metro n=183	Greater MN n=204	Total N=387
Very interested	7.1%	5.9%	6.5%
Somewhat interested	14.8%	8.3%	11.4%
Not very interested	8.7%	16.2%	12.7%
Not at all interested	69.4%	69.6%	69.5%

How interested is the caregiver in becoming a licensed child care provider?	Relationship to child		
	Relatives n=273	Non- relatives n=113	Total N=386
Very interested	5.4%	9.4%	6.5%
Somewhat interested	9.6%	16.0%	11.4%
Not very interested	11.4%	16.0%	12.7%
Not at all interested	73.6%	58.5%	69.4%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Does not include the 3 percent of FFN caregivers who are currently licensed home family child care providers.

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**40. FFN caregivers' main reason for interest or lack of interest in becoming licensed**

	<b>Total</b>
<b>Main reason caregiver would be interested in becoming licensed</b>	<b>N=69</b>
Reasons related to caregiving for children in general	49.3%
To make it more legitimate	21.7%
To care for more children/make more money	10.1%
To further caregiver's education about children	8.7%
To help families	7.2%
To provide food program services	4.3%
To care for children outside family	2.9%
Caregiver has been doing this so long he or she may as well continue	2.9%
To qualify for more programs	1.4%
<b>Main reason for lack of interest in becoming licensed</b>	<b>N=318</b>
Just take care of family members	21.1%
Too old/retired	18.9%
Have another job	17.9%
Just not interested	11.3%
Too busy	8.2%
Too much work/responsibility	7.5%
There is too much regulation	2.8%
Would rather have a job outside	2.2%
Couldn't manage it physically	2.2%
It's not worth the time	1.6%
Wouldn't want it in own home	1.6%
The pay is too little	1.6%
Stopping this care	1.6%
The hours are too long	0.6%

*Source:* 2004 Minnesota statewide household child care survey

*Note:* Categories derived from open-ended question with multiple responses allowed. Each respective question was only asked if caregivers said they are "very" or "somewhat" interested or "not very" or "not at all" interested in becoming licensed.

## Interest in support and interaction for quality improvement

The researchers created a variable depicting FFN caregivers' orientation to offers of support and interaction for quality improvement in their caregiving. The FFN caregivers fall into three groups based on their responses to survey items: eager for support and interaction (43 percent); open to some support and interaction (38 percent); and independent, uninterested in support and interaction (19 percent).

### FFN caregivers "eager" for support and interaction

The eager caregivers include 7 percent oriented towards the formal child care system and 36 percent oriented towards self-improvement and personal development as a caregiver (Figure 41).

The group with the system orientation is (1) currently licensed or very interested in being licensed; (2) already uses or would find having access to a family center or a place to connect with other caregivers very helpful; (3) would find information on one or more child-caring topics very helpful; and (4) would find it very helpful to have someone to call, to have a trained home visitor, to be connected with an early childhood organization or to have adult community education workshops or learning opportunities about caring for children.

The FFN caregivers with the self-improvement orientation are similar to the eager caregivers, except they were licensed in the past or have never been licensed and are not very interested in being licensed now. They are also similar regarding their relationship to the child, the age of the children they care for, whether they are in the metro area or Greater Minnesota and their self-reported quality index.

The "eager" caregivers who are now, or who want to be, licensed are more likely than the ones not interested in being licensed to be paid caregivers (59 percent versus 30 percent) and to be very likely to attend learning opportunities at a community college (59 percent versus 35 percent).

### FFN caregivers "open" to some support and interaction

The open group includes 30 percent "trained" caregivers and 8 percent "untrained" caregivers (those without formal training).

Trained caregivers (1) have been licensed in the past but are not very interested in being licensed now, or have been or are now teacher aides or child care teachers in a licensed facility; (2) already use a family center or other caregiver support or a place to connect with other caregivers; and (3) have participated in the past in parent education, a child

care training program, college classes in child development or workshops on child development.

Caregivers without formal training (1) have never been licensed and are not very interested in being licensed; (2) have never been a child care aide or teacher; (3) do not use and are not interested in using a family center or other caregiver support or a place to connect with other caregivers; and (4) have never participated in parent education, a child care training program, college classes in child development or workshops on child development.

Of the trained caregivers, 26 percent would find it very helpful to have someone to call, to have a trained home visitor, to be connected with an early childhood organization or to have adult community education workshops or learning opportunities about caring for children; but would not find information on one or more child care topics very helpful. The other 4 percent are just the opposite. They would find more information very helpful, but not the learning opportunities. These two groups are similar regarding their relationship to the child, the age of the children they care for, whether they are in the metro area or Greater Minnesota, whether they are paid or unpaid and their self-reported quality index.

Of the caregivers without formal training, 7 percent would find the learning opportunities very helpful but not the information, and 1 percent say the opposite.

“Independent” FFN caregivers, uninterested in support or interaction

The independent group includes 12 percent trained caregivers and 7 percent untrained caregivers. Regardless of their prior training, they would not find more information on child development topics very helpful and would not find it very helpful to have someone to call, to have a trained home visitor, to be connected with an early childhood organization, to have adult community education workshops or to have learning opportunities about caring for children.

The independent trained and untrained caregivers are similar regarding their relationship to the child, the age of the children they care for, whether they are in the metro area or Greater Minnesota, whether they are paid or unpaid and their self-reported quality index.

Comparing the “eager,” “open” and “independent” FFN caregivers “Eager” caregivers tend to be paid non-relatives with the highest average self-reported quality index scores (5.8 out of 8). On average, they provide child care 24 hours per week. They would very likely attend learning opportunities in neighborhood schools (62 percent) and libraries (62 percent), followed by recreation centers (56 percent), community centers (55 percent) and places of worship or churches (54 percent).

“Open” caregivers tend to be a mix of unpaid relatives and non-relatives with an average self-reported quality index score of 5 out of 8. On average, they provide child care 17 hours per week. The likelihood of attending learning opportunities is low but the best bets are at schools (17 percent), churches (16 percent), libraries (14 percent), recreation centers (13 percent) and community centers (12 percent).

“Independent” caregivers tend to be unpaid relatives with the lowest average self-reported quality index scores (4.7 out of 8). On average, they provide child care 12 hours per week. No more than 5 percent would very likely attend a workshop or learning opportunity anywhere.

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**41. FFN potential interest in offers of support and interaction for quality improvement**

	<b>N=391</b>
<b>Eager for support and interaction</b>	<b>43%</b>
System orientation	7%
Personal development	36%
<b>Open to some support and interaction</b>	<b>38%</b>
Trained	30%
No formal training	8%
<b>Independent, uninterested in support or interaction</b>	<b>19%</b>
Trained	12%
No formal training	7%

# Conclusion

The results of this survey of 400 randomly selected FFN caregivers are useful for better understanding, supporting and improving FFN child care for all families in Minnesota. Following a discussion of the results with the researchers and study advisory committee, the Department of Human Services makes the following recommendations:

**1. Recognize and respect the inherent strengths of FFN care in all its diversity while at the same time improving the quality of care.**

FFN care is a vital resource to families — particularly families with low incomes, those with non-standard work hours, families of color and those who have children with special needs. Policymakers should take care not to harm the essential voluntary and personal relationships of FFN caregiving when attempting to improve the quality of FFN care. Think of FFN care and the early care and education and child care systems not as on parallel tracks or as a continuum from informal and unstructured to formal and regulated, but as intertwined strands of the same fabric for families. Funding and programs should support voluntary movement and interaction between FFN caregivers and the formal child care system, recognizing and respecting the inherent strengths of FFN care and the important role of FFN caregiving in meeting the needs of diverse families while at the same time ensuring that it is of the highest possible quality.

**2. Support state (DHS) efforts to ensure that all child care quality improvement activities are open, inclusive and accessible to all FFN caregivers.**

Eight out of 10 FFN caregivers are open to receiving support and interacting with other caregivers, but fewer than one in 10 are very interested in being licensed within the regulated child care system. Enable FFN caregivers to participate in Minnesota's professional development system, child care resource and referral system training and grant programs, food and nutrition support, tribal supports for child care and initiatives to support school readiness in child care settings. In particular, provide access to small grants for books, games, materials and safety supplies. Consider ways to appropriately hold participating FFN caregivers accountable for their use of these grants without applying the same expectations and requirements applied to licensed providers and professional caregivers.

**3. Conduct targeted outreach that offers information and support options to FFN caregivers wherever they may be.**

DHS should continue to support targeted outreach efforts for specific groups of FFN caregivers and the families who use them, including those who are registered with the state Child Care Assistance Program; communities of color or immigrant, refugee, tribal or migrant communities; those who are English language learners; and families who have children with special needs. Each group may need its own outreach strategies.

Framing the outreach around school readiness for younger children and school success for older children may resonate with FFN caregivers, who express relatively strong interest in learning more about how to help children learn and do well in school.

FFN outreach strategies should split or differentiate the F from the FN, taking into account key differences between relatives and non-relatives. For example, compared with relatives, non-relatives are more likely to use the library and the Internet to learn about child care, to be interested in having access to information on child safety and child discipline, to be paid for their caregiving and to be interested in becoming licensed child care providers.

Relationships, central to why families, friends and neighbors provide care and why families use FFN care, may also be the key to effective FFN outreach. Use personal outreach rather than flyers or posters. Conduct outreach through unconventional channels and culture-specific organizations and places, as well as through natural networks and community institutions and places that families naturally and universally visit and congregate (grocery stores, parks, community centers). Key partners in FFN outreach could include local businesses, public health nursing, parent associations, faith communities, cultural and ethnic community centers, mutual assistance associations in immigrant and refugee communities and community event planners.

**4. Offer learning opportunities through a neighborhood-based approach that links FFN caregivers to resources, advice, knowledge and peer support.**

While outreach should be targeted in non-traditional places, FFN caregivers seem to prefer familiar, established places for learning, such as neighborhood schools and libraries. Use resources (books, games, materials and safety supplies) as incentives for participation.



Pay attention to language, culture and literacy issues. Survey results indicate that take-away tip sheets, packets and videos would be popular with FFN caregivers.

Also pay attention to the time of day that the learning opportunities are offered. Survey results indicate that many FFN caregivers have paying jobs in addition to providing child care. FFN caregivers interested in participating in learning opportunities cite conflict with work as a key potential barrier to attending.

Facilitate peer support, providing opportunities for caregivers to socialize and to connect with other caregivers. Early Childhood Family Education (ECFE), for example, could tailor classes for FFN participants.