

2023

# Los Angeles County Landscape of Family, Friend, and Neighbor Child Care



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One way of defining a landscape analysis is that it “outlines the strengths, resources, and needs of a particular community. It provides a framework for designing a service and ensuring that it is embedded directly in the needs of the community.”

First 5 Los Angeles (F5LA) is launching a new multi-year strategy to achieve greater equity for our HBCC community and support them to thrive. Because little is known about this population of providers F5LA partnered with the Child Care Alliance of Los Angeles (CCALA)<sup>1</sup> and the Child Care Resource Center (CCRC) to initiate a landscape analysis of HBCC providers in Los Angeles County. CCALA is a partnership of ten agencies that serve communities at the local level and can reach thousands of parents and child care providers across Los Angeles County. One way of defining a landscape analysis is that it “outlines the strengths, resources, and needs of a particular community. It provides a framework for designing a service and ensuring that it is embedded directly in the needs of the community.”<sup>2</sup> This landscape analysis of HBCC in Los Angeles County will help inform future strategies to support the HBCC workforce. Landscape project planning, stakeholder engagement and input, and research tool development took place in the fall of 2021. Outreach and key stakeholder engagement occurred in winter 2021-22. Between February and November of 2022 data were collected from HBCC providers, parents who use HBCC, and agencies that serve HBCC providers via surveys, focus groups, key informant interviews, and community convenings to interpret data and offer recommendations. This brief presents information gathered from and about the Family, Friend and Neighbor child care providers in Los Angeles County. For information on the background, methods and activities of the Landscape Analysis, please refer to the overall project brief or report.

<sup>1</sup> <https://www.ccala.net/>

<sup>2</sup> <https://studentsupportaccelerator.com/tutoring/program-focus/conducting-community-landscape-analysis#:~:text=What%20is%20a%20Landscape%20Analysis,the%20needs%20of%20the%20community>



## Background Characteristics of Family, Friend, and Neighbor Providers

The typical profile of the FFN participants in this landscape analysis was an unpartnered/ single woman in her late 40's, rents her home, makes less than \$35,000/ year, has a high school diploma/ GED, and speaks English at home. Over half identified as Hispanic/ Latine, 28% as Black/ African-American, and 10% White/ Caucasian. This landscape analysis showed that FFN providers are the least resourced group, sometimes even less so than the families for whom they provide child care. These findings may suggest the need for a family-centered model of support that looks distinctly different than what is offered to licensed family child care providers. What policies are needed to build a stronger, more sustainable HBCC sector for the future?

## Tenure and Experience

The FFN providers in this sample receive child care subsidies and their length of child care experience may reflect that in their survey responses (half providing child care for less than five years). The data from this landscape study as well as national studies show the more fluid nature of FFN providers compared with the more long-term nature of licensed FCC providers and should factor into the development of programs and policies aimed at the two groups of providers. Although they have fewer years providing child care on average than licensed providers, discussions in community convenings and interviews revealed the extensive experience in raising children that should be honored and recognized in programs designed to support FFN providers.

## Non-standard Hours Care

Home-based providers offer a wide range of hours of care, supporting the specific needs of families who may need child care outside of the standard 8 AM to 6 PM, Monday through Friday schedule. National surveys find that parents with lower income and single full-time working parents are most likely to need care during non-standard hours of care (Borton, Datta, & Ventura, 2021) and that home-based providers are more likely than center-based providers to offer these hours of care (NSECE, 2015). Nonstandard hours are defined as Weekday Evenings, Overnight, or During Weekends (NSECE, 2015). More FFN providers offer weekend (45%) and non-standard hours care in general (60%) compared with licensed FCCs. Additionally, 43% of parents reported using care during non-standard hours. Given the reliance of workers during non-standard hours in industries such as food, hospitality, entertainment, emergency and medical services, the HBCC workforce is a vital part of the infrastructure for these industries and should be supported and respected as such.

## BACKGROUND OF FFN PROVIDERS:

**79%**

Annual household income is \$35,000 or less per year

**51%**

Highest formal education level is High School Diploma/ GED or lower

**25%**

own their home

**49%**

have taken care of children other than their own for less than 5 years



## RACIAL DIVERSITY

**58%**

Hispanic/Latine

**28%**

Black/African-American

**10%**

White/Caucasian



## FFN PROVIDERS ARE AN EXTENSION OF THE CHILD'S FAMILY

**92%**  
are related to the  
child (54% are  
grandparents)

**69%**  
get their  
information about  
their child care  
work from family

## Reasons for Providing Care

Findings for FFNs are similar to past research. In the current study, 75% of FFN providers reported the motivation to help the children's parents, family or friends as the reason for providing child care. A needs assessment for license-exempt care in Los Angeles County conducted in 2014 yielded similar results with 52% of FFN survey respondents indicating that they chose to become a child care provider to assist a friend or family member (Harder & Company, 2014). COVID-19 may have increased values for supporting close family and friends and strengthened this already existing value. Key informant interviewees' experience also validated the survey findings. Overwhelmingly, license-exempt providers cited the desire to help family or friends work as a reason for why they started taking care of children. This theme was present in three-quarters of the interviews and surveys conducted.

When the survey results were presented to FFN providers in the community convening, most agreed that the data reflected their lived experience and that the reasons may change over time. For example, many begin with the motivation to help friends and family and then a few decide to become licensed. In a trip to learn about child care programs implemented in New York City, the programs operating there found that 25% of FFN providers moved on to obtain a license.

These differences in motivations are key to understanding how to approach supports and services for these two distinct populations of caregivers. If motivations focus on supporting loved ones, a family support model should be considered, particularly for the FFN population. A key example of this occurs in New York City. FFN providers who receive child care subsidies are required to register with WHEDco (Women's Housing and Economic Development Corporation)<sup>3</sup>, engage in 5 hours of pre-service training and receive home/monitoring visits. Providers are offered a wide range of supportive services including training and technical assistance, enrollment and assistance with the Child and Adult Care Food Program (CACFP), and grants and supports for meeting building code requirements. This group goes beyond an "educational" model of support to ensure providers' basic needs are met, knowing they are often in great need, much like the families they serve. For example, food cards to address food insecurity, financial assistance, mental health services, and technology supports including internet and devices. This holistic approach with a family support model may be more effective in supporting what is needed by FFN providers. Work supported by the Packard Foundation's ten-year commitment to FFN providers across California that started in 2014 is another excellent example of relevant supportive services for this group. These projects uniquely address the needs of specific communities through home visitation, play and learn groups and distributions of resources (as reported by Duane Dennis). For example, digital devices and technology

<sup>3</sup> <https://whedco.org/>

supports for providers to access professional development and resources, virtual playgrounds and storytimes, virtual peer support, cash assistance for cleaning supplies and tools for child well-being, home visitation and remote support for South-East Asian, Slavic, and Arab communities, and COVID-19 supports are implemented in various forms in communities across California.

## Families Served by FFN Providers

Half of the surveyed parents placed their children with FFN providers. Of these, 92% were related to the child and 54% were the grandparent to the child. This close relationship suggests that supportive services for this population of providers should consider a family-support model. An interesting result from this landscape study that is often reflected in the subsidy landscape is the fact that the largest age group served by FFN providers includes school-age children (73% compared with 48% serving preschoolers).

Family, Friend and Neighbor providers serve a more limited range of children than licensed FCC providers. 46% of FFN providers serve children who speak Spanish, and 63% serve children who are Hispanic/ Latine and 34% serve Black/ African-American children. In contrast, FCC providers often serve children with multiple languages and racial backgrounds, likely reflecting the fact that they are a business open to multiple families whereas FFN providers typically care for a relative and at most one other family. This again speaks to the need for a family-support model for FFN providers.



## Accessing Professional Development

92% of FFN providers stated they do not engage in any formal professional development programs. The highest rate of participation was 3% in the Child Care Initiative Project (CCIP) which serves as a support for increasing capacity of unlicensed or newly licensed providers to serve infants and toddlers. This may be a program that should be leveraged and expanded in its service to these providers. When asked about informal professional development, the largest percentage (12%) of FFN providers said they enrolled in a course about working with children of different races, ethnicities and cultures.

### TOPICS OF INTEREST INCLUDE:

- Behavior management
- Special needs



**92%** of FFN providers do not participate in professional development activities

### BARRIERS TO PARTICIPATION INCLUDE:



**30%**  
No barrier



**36%**  
Lack of time



**22%**  
Time or location of professional development service



**21%**  
Cost of service

**10%**   
Transportation



**69%**  
of FFN providers  
use family members  
as their source of  
information for  
their child care  
work



#### **TOP AREAS OF INTEREST:**

- Child development
- Behavior management
- Activities to do with children
- Special needs

## **Barriers to Accessing Professional Development and Supportive Services**

When asked what prevents them from accessing services or professional development, 30% of FFN providers said nothing prevents them. These providers may be the more difficult to motivate and engage. The top substantive barriers included lack of time (36%), offerings at inconvenient time or location (22%) and cost (21%). Although only 10% cited the barrier of transportation, this was significantly higher than that reported by FCC providers. A small number (17) mentioned language as a barrier and 77% of these providers spoke Spanish. During community convenings, providers and agencies that support providers discussed lack of awareness as a barrier and the need to have a different approach to outreach than is often currently the case (email blasts). Some suggested success in the use of trusted community promotoras. Also suggested was a shift in the mental model of “imparting information” to creating a safe space to learning and network worth one another and to honor their expertise in raising children. These barriers should be considered when designing policies and programs for FFN providers to engage in professional development.

## **Networking**

While FCC providers use a wide range of resources when they need information about their child care work, FFN providers predominately rely on a family member (69%). Very few reach out to agencies and some (13%) reported not having anyone to reach out to. As mentioned previously, this may reflect the need for a new model of outreach (e.g., promotoras) for this group.

## **Topics of Interest**

The top three topics of interest for all providers included child development, behavior management and guidance, and activities to do with children. Prior research found similar results for FFN providers (Harder & Company, 2014). An increase in interest is seen in the area of behavior management and special needs as brought forward in the key informant interviews and community convenings. Many commented on how the pandemic resulted in delayed development and the need to learn more about how to support these children.

Related to prior results in this report (92% not engaging in formal professional development and 30% saying nothing prevents them), 29% of FFN providers stated that none of the topics provided were of interest to them. Again, this may reflect the need for the field to change our mindset and approach to FFN support and professional development.



## Greatest Challenges Facing FFN Providers

FFN providers are the least resourced group in the child care field, and are at times even less resourced than the families they serve who qualify for subsidized child care, struggling to afford even basic necessities such as food, rent and utilities. As found with FCC providers, the top challenge cited by FFN providers was the low pay (51%). Interestingly, 34% reported no challenge in their work. The greatest costs associated with their work as a provider included food (82%) and rent/utilities/insurance (51%). When asked about their greatest challenges during the pandemic, cleaning supplies and technology rose to the top of the list, but access to food for children in their child care was significantly higher than for FCC providers (13% vs 3%). Food was a reoccurring theme across the survey, interviews and community convenings. This is logical given the permeable line between the provision of child care and the relationship with the child and family and again suggests the need for a family-support model of services for FFN providers.

**"Our salary is never going to let us buy our own house. Landlords might not permit us to care for children at their property. We aren't offered any type of health insurance. We as caregivers spend more money on extra food or gasoline. I have to pay my family out of my income to help out when we need help [caring for these children]. It seems that the system wants everyone to be poor. As I have to go out of my way to help take care of a child without a pay."**

*– Survey participant, Grandparent FFN Provider*

**"I feel like license-exempt providers are grossly underpaid. We still keep children safe and love them. We are the backbone of our communities and families. But it seems like we get the shorter end of the stick compared with larger facilities."**

*– English speaking FFN provider in community convening*

### CHALLENGES FOR FFN PROVIDERS:



**51%**  
Low Pay

### AMONG GREATEST COSTS ARE:



**82%**  
Food



**51%**  
Rent/Utilities



**"It's very difficult to see any future in child care because the current compensation rate is so low that you're constantly trying to deal with each day you can't think ahead or prepare for the future. That's why I'm going back to the health care field. Right now, it is not a livable wage. \$40 a day for 12 hours of care. It's incomprehensible that it's that low. And they are ok with that?"**

*– English speaking FFN provider in community convening*

## Recommendations for Developing New Programs and Policies

The data reveal the strengths and perseverance of child care providers and the challenges they face as a result of economic realities and systemic inequities and barriers. Continued and ongoing examination of current policies to identify opportunities for improvement and the development of relevant programs and policies is recommended to better support and sustain this essential workforce.

Ensure the Active Involvement of FFN Providers in Designing and Implementing Policies and Programs that Impact Them

Historic and systemic barriers of racism, sexism and classism have resulted in programs and policies that create harm rather than opportunity. Honoring and actively involving providers will ensure programs and policies are relevant, accessible, equitable, and impactful for providers and ultimately the families they serve. FFN providers need to be actively involved in the development, implementation and evaluation of new programs and policies that are intended for them. FFN Providers have a wealth of strengths. They are grandparents, aunts, uncles and close friends who are integral part of the family's stability and the parents' ability to work. Their unique strengths and challenges need to be specifically considered in any future program or system planning. Involving them in decision-making will ensure the relevance and impact of any new program or policy.

## Support a Mixed Delivery System and Livable Wages to Ensure the Ongoing Sustainability of the Child Care Provider Community

Given that 49% of FFN providers plan to leave the field in the next 5 years and of that group, ¼ are leaving due to low compensation, new programs and policies are needed to raise the rates of pay and provide other financial supports. FFN providers are significantly challenged by low wages and the high costs of food, particularly nutritious food. Given that few own their homes and many have an annual household income less than \$35,000, these providers often have fewer resources even than the parents who qualify for subsidized child care. Home Grown is supporting a Direct Cash Transfer pilot program in Colorado to lift providers out of poverty (Thriving Providers Project).<sup>4</sup> The results of this pilot program should be reviewed and considered for future programs that support FFN providers.

<sup>4</sup> <https://homegrownchildcare.org/thriving-providers-project-in-the-spotlight/>





## Create a Seamless, Responsive and Holistic Model of Support for Providers

Ensuring a menu of services to meet providers where they are in their journey is essential. While some expressed interest in continuing child care only while their family needed them (to then return to a prior career), others expressed interest in moving toward becoming licensed. Program and policy leaders should consider ways to engage those who may be motivated to move on to licensure, rather than lose this experienced and flexible group of providers. However, with the current state of reduced enrollment in licensed child care settings, ensuring a strong, mixed delivery system is essential to ensure their sustainability. Barriers to licensure should be addressed. For example, a subset of FFN providers plan to become licensed but expressed concerns. The providers who plan to obtain a license speak Spanish or Mandarin and discussed challenges around language barriers with programs and perceived requirements from licensing and programs for their education and home size.

## Develop and Implement New Models for Engaging Providers

As previously stated, FFN providers are distinctly different from licensed FCC providers. Given the results of this landscape analysis that the FFN provider is an extension of the child's family, home visitation, play and learn groups, promotoras, resource distributions or other family support models are more relevant to many FFN providers (also suggested by Shivers, Farago, & Yang, 2016), while others may benefit from programs that have career ladder support (such as the Child Care Initiative Project). Given their distinct nature from licensed Family Child Care providers, both the program model and the funding sources that support them may need to be distinctly different. Successful models exist in Arizona, California, and New York City that provide holistic services, including home visitation, resource connections for income/rent/food/utility assistance, hands-on assistance to enroll and continue using the Child and Adult Care Food Program (CACFP), and play and learn groups.

FFN providers are typically underrepresented in research and programs intended to impact the most under resourced communities. Engaging FFN providers who receive child care vouchers was feasible in this landscape analysis by partnering with CCALA agencies. However, a significant number of children are cared for by FFN providers who do not receive subsidized child care. New partnerships and additional funding will be required if this group is to be included in future programs and services. Given the large percentage of FFN providers serving school-age children, connecting with the parents through the K-12 school system may be key to reaching the unsubsidized FFN population. NSECE (2021) indicates that this is a substantial portion of the child care field (unpaid



**“We noticed promotoras are a key factor in reaching FFNs because usually promotoras are FFNs themselves. They interact directly with those FFNs that are taking children to school and they know each other. Promotoras are the most successful because they live in those communities.”**

*– CBO staff during community convening*



providers outnumber those who are paid by almost 4 times, nationally). Prior research in Arizona (Shivers, Farago, & Goubeaux, 2015) found that high participation rates and improvement in FFN quality was linked to specific program implementation methods. Specifically, hiring staff that are bilingual and bicultural and share the same cultural heritages as most of the providers, outreach based on natural connections where providers congregate (elementary schools, faith-based organizations, libraries and community centers), relationship-based supports, and flexible and customized programs that meet the holistic and specific needs of FFN providers.

## Develop Strategic Partnerships to Create Sustainable and Holistic Policies and Programs for Home-Based Child Care Providers

Government, philanthropy, CBO and provider partnerships will be key to developing sustainable programs and policies. State and local governmental partners are essential for creating structural change. Philanthropic partners have vested interest and proven programs that can fill gaps where public funding falls short. CBOs and providers have community-level expertise for implementation and guidance to ensure programs and policies are relevant, equitable and effective.

**“The conversation in which people interact and learn from one another may better fit FFNs. We should honor the expertise in the room and set up the room so they can learn from one another instead of ‘training’ them. If I don’t think of myself as a professional and I’ve been around kids a long time raising them, I don’t want to go to a training.”**

– CBO staff during community convening



# In Summary: Honor and Build on the Strengths of Family, Friend and Neighbor Providers



Family, Friend, and Neighbor providers have significant strengths that should be honored and respected in any policy or systems change. For example, FFN providers:

- *Have many years of experience raising children*
- *Are an extension of the family and often go above and beyond, revealing the permeable boundary between child care and family*
- *Serve large numbers of school-age children*
- *Offer non-traditional hour care, particularly when no other care options are available (e.g., on weekends)*
- *Serve many Spanish-speaking families*

With significant numbers of families relying on HBCC, especially those with infants and toddlers, multiple language learners, with low-income and/or working non-traditional hours, it is essential to build on these strengths to support and sustain this workforce.

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The research for this brief was conducted by the [Child Care Resource Center](#).



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2023

# Los Angeles County Landscape of Family Child Care



Supported by



**CHILD CARE  
ALLIANCE  
LOS ANGELES**



# Los Angeles County Landscape of Family Child Care



Most working parents use some form of child care in order to work and remain employed. Despite the fact that significant numbers of families, particularly under-resourced families use home-based child care (HBCC), little is known about the needs, resources, and quality of these providers and about the families served by these providers. First 5 LA (F5LA ) is launching a new multi-year strategy to achieve greater equity for our HBCC community and support them to thrive. Because little is known about this population of providers First 5 LA partnered with the Child Care Alliance of Los Angeles (CCALA)<sup>1</sup> to initiate a landscape analysis of HBCC providers in Los Angeles County. CCALA is a partnership of ten agencies that serve communities at the local level and can reach thousands of parents and child care providers across Los Angeles County. CCALA partnered with the Child Care Resource Center (CCRC) research department to conduct the landscape analysis. One way of defining a landscape analysis is that it “outlines the strengths, resources, and needs of a particular community. It provides a framework for designing a service and ensuring that it is embedded directly in the needs of the community.”<sup>2</sup> This landscape analysis of HBCC in Los Angeles County will help inform future strategies to support this workforce. Landscape project planning, stakeholder engagement and input, and research tool development took place in the fall of 2021. Outreach and key stakeholder engagement occurred in winter 2021-22. Between February and November of 2022 data were collected from HBCC providers, parents who use HBCC, and agencies that serve HBCC providers via surveys, focus groups, key informant interviews, and community convenings to interpret data and offer recommendations. This brief presents information gathered from and about the licensed Family Child Care (FCC) providers in Los Angeles County. For information on the background, methods and activities of the Landscape Analysis, please refer to the overall project brief or report.

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<sup>2</sup> <https://studentsupportaccelerator.com/tutoring/program-focus/conducting-community-landscape-analysis#:~:text=What%20is%20a%20Landscape%20Analysis,the%20needs%20of%20the%20community>



## Background Characteristics of Family Child Care Providers

The typical profile of the FCC participants in this landscape analysis is a partnered/married woman in her 50's, owns her home, has some college education, and is equally likely to speak English or Spanish at home. Over half identify as Hispanic/Latina, 15% as Black/African American, 13% White/Caucasian, 9% Asian/Asian American. Although only 26% of FCCs have an annual income of \$35,000 or less, this differs by license size with 43% of FCCs with small licenses and 19% of FCCs with large licenses in this income bracket. Similarly, FCCs with large licenses are more likely to have a BA degree or higher while FCCs with small licenses are more likely to have Some College as their highest level of education. Additionally, FCC providers with large licenses are more likely to have assistance with their child care work (this is a requirement for those with a large license). This affords the opportunity to earn more income and attend professional development activities. Given the differential results in resource levels (income, education and assistance in their work), programs and policies that target FCC providers should approach these two groups differently. FCC providers with small licenses may be more vulnerable to economic fluctuations and require nuanced supports. Research has found that FCCs with small licenses were more likely to go out of business following the great recession and the trend persisted (NCECSQ, 2020).

HIGHEST LEVEL OF FORMAL EDUCATION	FCCs WITH SMALL LICENSE	FCCs WITH LARGE LICENSE
Some College or Less	69%	55%
BA Degree or Higher	16%	27%



### RACIAL DIVERSITY

**57%**  
Hispanic/Latina

**15%**  
Black/African American

**13%**  
White/Caucasian

**9%**  
Asian American



**Annual Household Income Less Than \$35,000**

**43%**  
FCCs with Small License

**19%**  
FCCs with Large License



## STRENGTHS OF FCC PROVIDERS IN THIS LANDSCAPE

**89%**

Serve multiple age groups

**79%**

Have been caring for children for more than 10 years

**77%**

Serve Dual Language Learning (DLL) children

**72%**

Serve children with child care subsidies

**56%**

Serve multiple language groups

**49%**

See their work as a personal calling/career

**47%**

Provide non-standard hours care

**39%**

Serve children with special needs



## Tenure and Experience

Home-based providers have a wealth of experience in caring for young children (79% of FCCs report over 10 years). FCC owners begin with small licenses and then some make the decision to take on greater complexity and apply for a larger license. As a result, those who have large licenses have a greater number of years of experience and have had their license longer than those with smaller licenses. Those with large licenses have the capacity to care for more children, serving as a hub for more families in the community. As such, they spend more time in activities such as providing care, planning lessons, doing paperwork and other business practices than those with small licenses. In order to increase the child care capacity in our communities and ensure their sustainability, supports may be needed for small FCC businesses to obtain large licenses.

TENURE AND EXPERIENCE	FCCs WITH SMALL LICENSE	FCCs WITH LARGE LICENSE
Average Number of Years Licensed	11.6 years	16.0 years
Average Number of Years Working with Children	16.0 years	21.2 years
Average Number of Weekly Hours Worked	44.4 hours	52.3 hours

## Non-Standard Hours Care

Home-based providers offer a wide range of hours of care, supporting families who may need child care outside of the standard 8 AM to 6 PM, Monday through Friday work schedule. National surveys find that parents with lower income and single, full-time working parents are most likely to need care during non-standard (often referred to as non-traditional) hours of care (Borton, Datta, & Ventura, 2021) and that home-based providers are more likely than center-based providers to offer these hours of care (NSECE, 2015). Non-standard hours are defined as weekday, evenings, overnight, or during weekends (NSECE, 2015) and 47% of FCCs in this study provide these hours of care. Additionally, 43% of parents reported using care during non-standard hours. Given the reliance of workers during non-standard hours in industries such as food, hospitality, entertainment, emergency and medical services, the HBCC workforce is a vital part of the infrastructure for these industries and should be supported and respected as such.



## Reasons for Providing Care

Although many FCC providers began taking care of children as a means to earn income while staying home with their own children, the work grew into a personal calling or career. This motivation may play a role in how FCC providers view their work and engage in professional development and quality improvement initiatives. FCC providers were also asked why they decided to get a license. The desire to have their own business, the possibility of earning more income, and legitimizing their business surfaced as the three most frequently cited reasons for becoming licensed. These results illustrate the career and business mindset of the FCC provider population. This mindset, particularly with those who have a large license may play a role in the types of services, professional development and quality improvement services that would be relevant for this population.

*"I got licensed because it's a business and to be taken serious as a professional, you have to be licensed. And to be able to be paid what you want to be paid, it's best to be licensed."  
– English-speaking FCC provider*

*"I got my license because I think that's one of the qualities that parents look for versus just looking for a babysitter. I think sometimes parents want, you know, the background checks and stuff like that and the regulations that come with home daycares."  
– English-speaking FCC provider*

## Families Served by FCC Providers

Most (89%) FCC providers serve more than one age group and were more likely than Family, Friend, and Neighbor (FFN) providers to serve children under age 5. They were also more likely to serve children with special needs, Dual Language Learners, and children whose care is subsidized. Additionally, they were more likely to serve multiple language (56%) and racial groups (62%) as compared with FFN providers. This may be a reflection of the fact that they are a business that serves multiple families in the community whereas FFN providers typically serve relatives and at most one additional family.





**FCC PROVIDERS  
WITH LARGE  
LICENSES  
PARTICIPATE IN  
PROGRAMS MORE  
THAN THOSE  
WITH SMALL  
LICENSES:**

Family Child Care  
Home Education  
Network (FCCHEN)

ECE Workforce  
Registry

Emergency Child  
Care Bridge

Quality Start Los  
Angeles (QSLA)

Early Head  
Start-Child Care  
Partnerships

Workforce  
Pathways Stipend

Gateways for Early  
Educators

Quality Start Dual  
Language Learner  
(DLL) Initiative

Training

Coaching

Home Visiting



**Accessing Professional Development**

FCC providers were more likely to access professional development programs (e.g., Family Child Care Home Education Networks, Quality Start Los Angeles, Emergency Child Care Bridge, Quality Start Dual Language Learner, Gateways, etc.) as compared with FFN providers and those with large licenses were more likely to access these programs than FCCs with small licenses. Providers with large licenses were also more likely to engage in general professional development (workshops and coaching). The one program where participation did not differ by license size was CCIP (Child Care Initiative Project). However, participation in this program was low (9% for FCC and 3% for FFN). Given the program’s strength in supporting FFN and newly licensed providers, this may be a program that needs more resources. This landscape analysis has shown the vulnerable state of FFN and FCC providers with small licenses and the CCIP program targets these groups. Additional consideration regarding the constraints of FCCs with small licenses may need to occur to ensure they are engaged and supported.

“At [the R&R]. Where I live they cover the area I live in, they also give trainings with being a better provider, personal for the provider, child development, how to implement more activities with the child. To have children be interested with activities. Personal care and also with children. It’s the only agency I’ve worked with, when I went to [the local community college], they also teach you how to care of children, what activities to do with kids, questions with nutrition for children.”

– Spanish-speaking FCC provider

## Barriers to Accessing Professional Development and Supportive Services

FCC providers cite lack of time, inconvenient time/location, and cost as the top barriers to accessing professional development. Compared to FCCs with large licenses, those with small licenses were more likely to cite cost and lack of benefits to participation. These results continue to confirm the unique nature and constraints faced by FCC providers with small licenses. If they feel they cannot afford (this may mean hiring an assistant they normally do not have so they can participate) or they do not see how the benefits outweigh the challenges, they will not participate in professional development. FCC providers with large licenses were more likely to cite a lack of time as a barrier. Given the fact that they also cite greater challenges with paperwork, this may indicate the need for support in “backend” services such as paperwork, accounting, subsidy enrollment and tracking, etc. for this group. A subset of FCC providers (100) mentioned language as a barrier to accessing professional development and supportive services. Sixty-nine percent of these providers spoke Spanish and 21% spoke Chinese. Even one barrier can prevent providers from accessing programs and services. New programs and policies should consider these constraints and develop a menu of options to address them. In terms of communication, most providers want to hear about these opportunities via email. FCC providers were more likely than FFN providers to want information about these opportunities from the Resource and Referral (R&R) agencies and at workshops and conferences.

*“Sometimes it’s just the time. Having the time to do it, especially for those that are, like, 24 hours and, you know, I’m 24 hours, five days a week, but that takes up the whole week, you know? So a lot of times the meetings are in the evenings or whatnot, and you can’t do it.”*

*– English-speaking FCC provider*

## Networking

When asked who they reach out to when they need information related to their child care work, FCC providers reach out to a wide variety of connections. The largest group was other child care providers (58%), followed by family member (46%), coach/specialist/agency staff (34%) or friend (32%). Some FCC providers were already well-connected and networked and this strength could be leveraged for future programming.



### BARRIERS TO ACCESSING PROFESSIONAL DEVELOPMENT AND SUPPORTIVE SERVICES



Lack of time



Inconvenient time or location of service



Cost



## SOURCES OF INFORMATION FOR THEIR CHILD CARE WORK

**58%**

Other providers

**46%**

Family

**34%**

Coach or  
Agency Staff



## TOP AREAS OF INTEREST

- Child  
Sevelopment
- Behavior  
Management
- Curriculum
- Special Needs

## Topics of Interest

The top three topics of interest for FCC providers included child development, behavior management and guidance, and curriculum. Prior research found similar results (California Child Care Research Partnership Team, 2016). An increase in interest is seen in the area of behavior management and special needs as brought forward in the focus groups, interviews and community convenings. Many commented on how the pandemic resulted in delayed development and the need to learn more about how to support these children. This may reflect the fact that FCC providers are more likely to see their work as a career and therefore are motivated to learn more about multiple topics to improve their business of caring for children.

## Greatest Challenges Facing FCC Providers

One-fifth (1/5) of providers plan to leave the field within the next 5 years, exacerbating the existing child care desert problem. The top area of concern and challenge for providers included low pay (52%). FCC providers were also concerned about COVID-19 (46%), a lack of benefits (39%), managing COVID-related situations in the program (32%), mental health challenges (18%), and burnout (14%). Programs and policies that are intended to benefit providers should encompass a holistic approach that would connect providers to income, health and mental health supports.

Many providers (54%) experienced a decline in enrollment during the pandemic and have never recovered. Concerns were discussed regarding free programs and increases in parents working from home (trying to provide a quality environment for their own children while working). Ensuring the existence of a solid mixed delivery system is essential for parents who desire home-based care for cultural, linguistic, ratio, nonstandard hours care, or other reasons. Regulations require that FCC providers with large licenses employ an assistant. However, providers relayed increasing concerns over the ability to attract and retain qualified staff. There is a well-documented staffing crisis in the child care sector. FCC sustainability will depend upon their ability to attract and retain qualified assistants.

**"Finding qualified staff. And being able to pay the staff, because it's difficult to be able to compete with Target, and Del Taco when they pay in \$18 an hour and you don't need a high school diploma or whatever. And they're offering benefits. It's hard for us to compete."**

*– Spanish-speaking FCC Provider*

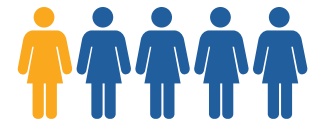


## Recommendations for Developing New Programs and Policies

The data reveal the strengths and perseverance of child care providers and the challenges they face as a result of economic realities and systemic inequities and barriers. Continued and ongoing examination of current policies to identify opportunities for improvement and the development of relevant programs and policies is recommended to better support and sustain this essential workforce.

## Ensure the Active Involvement of FCC Providers in Designing and Implementing Policies and Programs That Impact Them

Historic and systemic barriers of racism, sexism and classism have resulted in programs and policies that create harm rather than opportunity. Honoring and actively involving providers will ensure programs and policies are relevant, accessible, equitable, and impactful for providers and ultimately the families they serve. First 5 LA has convened a Provider Advisory Group of licensed FCC providers as an important step in this direction. Family child care providers need to be actively involved in the development, implementation and evaluation of new programs and policies that are intended for them. Their unique strengths and challenges need to be considered in any future program or system planning. Involving them in decision-making will ensure that any new program or policy is relevant, fiscally-sound and impactful.



**1/5 of FCC Providers Plan to Leave the Field Within 5 Years**



### CHALLENGES FACED BY FCC PROVIDERS

- Low pay
- Declining enrollment
- Inability to attract and retain qualified staff
- COVID-19
- Lack of benefits
- Mental health
- Burnout





## Support a Mixed Delivery System and Livable Wages to Ensure the Ongoing Sustainability of the Child Care Provider Community

One in five FCC providers plan to leave the field in the next 5 years and of that group, 19% are leaving due to low compensation. Additionally, 52% report their top challenge is low compensation and many (54%) experienced declines in enrollment during the pandemic and have never recovered. In addition, almost half have been late or delayed paying basic bills such as rent and utilities and/or have had to apply for government assistance programs. Providers also expressed concern over increased challenges in finding and retaining qualified staff because they cannot offer the comparable pay and benefits as other programs and agencies. It is critically important to compensate the FCC workforce appropriately. It is an economic justice issue for these providers and is essential for ensuring a wide diversity of programs so parents can work. Parents who need non-standard hours care, special needs care, infant care or other options offered by FCC providers need this workforce to maintain employment. The sustainability of the FCC workforce is therefore also a broader workforce issue. As the Center for the Study of Child Care Employment states, "As a system that relies primarily on a market-based structure, by definition it disadvantages those with the least means to purchase services. As services are tied to buying power, the wages of early educators, primarily women, are directly tied to the ability of families to pay."<sup>3</sup> New systems and policies, including cost-based models are required to fully address the needs of FCC providers, to ensure their sustainability as well as their ability to attract and retain qualified staff. A great deal of work has already begun through the California Rate and Quality Workgroup in assessing a cost-based model in place of a market-based model for reimbursement. Continued advocacy for this model is recommended.

<sup>1</sup> <https://cscce.berkeley.edu/blog/ece-is-in-crisis-biden-can-intervene/>



“Most of my friends are not okay and can’t retire. I have a husband and am fortunate to be able to retire. I can hand my business over to my children. It’s sad for my peers who spend their whole lives in this field and leave with nothing.”

– English-speaking FCC provider

“So if you cannot find or pay someone, you know, good amount or if you cannot find good help or assistant, it is really major issue. And then you get burnout too. Because all day working with kids, you know, sometimes we have problems too. We have other issues too. So yeah, it’s really hard then to manage with the kids. We have good days bad days, you know, so we all are humans.”

– English-speaking FCC provider

The increase in free preschool options for parents is an incredible opportunity to relieve one of the major expenses faced by families. The state intends for school districts to partner with community-based child care in the expansion of Transitional Kindergarten (TK). Given the fact that Los Angeles Unified School District is the second largest district in the nation (second only to New York City) this will require tremendous resources to involve the community-based provider voice in the roll-out and implementation of TK. As part of this landscape analysis, a team travelled to New York City to learn from experts about developing a supportive and inclusive mixed-delivery system. A key lesson learned from those in New York was that directing Universal Preschool funds solely to center-based programs resulted in many community-based child care programs closing because they couldn’t enroll enough families. When New York City began development of a universal program for 3-year-old children, they learned from their prior challenge and actively and intentionally included HBCC providers in their universal system. Including HBCC providers in the design and implementation of TK will ensure their sustainability and availability to parents who need this type of care.







## Create a Seamless, Responsive and Holistic Model of Support for Providers

It is important to recognize that licensed FCC providers are not one monolithic group and therefore need a menu of services to meet each one where they are in their career pathway. Family child care providers with small licenses have lower household incomes, less formal education, are less likely to engage in professional development programs and are less likely to have an assistant as compared to those with large licenses. They will need supports (compensation, assistants, etc.) to engage in professional development or quality improvement. Along with FFN providers these providers may benefit from home visitation models of support. Given that a provider with a small license is likely to be the sole adult providing child care, any program that conducts a home visit will need to bring two staff – one to provide care and supervision and one to work with the child care provider.

## Develop and Implement New Models for Reaching and Engaging Providers

The landscape analysis found that reaching and engaging providers requires a significant amount of staff resources at agencies and this needs to be well funded. To reach those who are typically under-represented, outreach needs to occur through multiple modalities (email, phone, social media, etc.), occur on multiple occasions, in multiple languages and through a diverse range of partners who have trusted relationships in the community. Some communities may have been under-represented (e.g., those in SPA 8, Armenian or Chinese-speaking providers, and those not connected to technology). Ensuring partners in SPA 8 are involved as well as finding trusted members of the community to help outreach to language groups may need to be funded to increase representation in these groups. Community-based organizations (CBOs) operate on very thin financial margins. In order to be effective, outreach efforts by staff at these agencies will need to be adequately funded and this funding will likely require new staff rather than adding onto the existing workload.

Once providers are reached, effective engagement and retention in programs is key. Staffed support networks for FCC providers have a well-known research base for success (Bromer & Porter, 2017). As stated previously, FCC providers with small licenses may also benefit from home visitation program models. Leveraging the networks that already exist in the provider community and ensuring a full range of community partners are involved will be key in reaching and serving those who may typically be under-represented.

## Develop Strategic Partnerships to Create Sustainable and Holistic Policies and Programs for Home-Based Child Care Providers

Government, philanthropy, CBOs and provider partnerships will be key to developing sustainable programs and policies. State and local governmental partners are essential for creating structural change. Philanthropic partners have vested interest and proven programs that can fill gaps where public funding falls short. CBOs and providers have community-level expertise for implementation and guidance to ensure programs and policies are relevant, equitable and effective.





# In Summary: Honor and Build on the Strengths of Family Child Care Providers



Family child care providers have significant strengths that should be honored and respected in any policy or systems change. For example, FCC providers:

- *Have many years of child care experience*
- *Have extensive existing networks*
- *Serve children with special needs, DLLs, and those who receive subsidized child care*
- *Serve multiple age groups*
- *Serve a wide diversity of language and racial groups*
- *Offer non-traditional hour care*

With significant numbers of families relying on HBCC, especially those with infants and toddlers, multiple language learners, with low-income and/or working non-traditional hours, it is essential to build on these strengths to support and sustain this workforce.

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