

## Chapter One: Child Care Use among Refugees

As confirmed by BRYCS' outreach, many refugees have little or no familiarity with a formal, regulated child care system. The concept of planning and organizing child care arrangements is often new to individuals who previously could rely on a larger network of informal community support. United States' laws regulating child supervision requirements can be drastically different from common practice in many refugees' countries of origin. Refugees and the resettlement staff who assist them may likewise be unaware of financial assistance programs available to help them subsidize the costs of child care.

Prior to entering the United States, refugees receive basic information about child care through overseas cultural orientation programs. One example is the child care module published by the U.S. Committee for Refugees and Immigrants' in their *Journey of Hope* curriculum. This module helps parents determine whether or not they need child care; the advantages and disadvantages of different types of care for both the parent and child, and how to manage the process of enrolling children into child care services and preparing emotionally for this transition. **Due to the overwhelming amount of material and information that refugees receive prior to entering the United States, as well as an adjustment to a new culture, it is likely that refugee clients will need to revisit these concepts after their arrival.**

One consideration in discussing child care usage with refugee clients is the cultural appropriateness of the concept. As with non-refugees, they may have biases and misinformation about child care in the U.S. Many people working with refugees note that families do not want to use mainstream services and would prefer that a parent stay at home and provide care. However, this may not be economically realistic for many refugees. It is important to ensure that refugee clients are given accurate information about the safety and quality of all child care options. Given the skepticism that some clients may have towards mainstream child care, receiving this information from multiple sources can help lend credibility to what they are learning.

In addition, refugees may need assistance in broadening the concept of child care to include programs and services for school age children, such as after-school programs and youth development programs. Refugees may need specific guidance regarding applicable laws about child supervision, particularly any statutes that designate the minimum age that children can be home without adult supervision. To learn the specific guidelines for your state, contact your local police department or child protective services agency.

### ***Patterns in Accessing Care***

A variety of child care options exist for refugees. One major distinction between the types of care available is whether or not it is regulated and licensed, or whether the care is provided informally.

The most common forms of child care are:

- licensed family child care providers who provide child care within their own homes
- child care centers, including programs like Head Start
- informal kith and kin care provided by relatives

- informal care provided by non-relatives or neighbors
- preschool.

Each type of care has its own advantages and disadvantages for both the parent and child. **Service providers working with refugees should assess the level of knowledge their clients possess about the range of options available to them.**

There is little research specifically focused on trends in refugees' use of child care services. However, there are resources that examine child care usage among immigrants as a whole. Broadly, this research indicates that children of immigrants are less likely than children of non-immigrants to use center-based care, though the reasons for this difference are not entirely understood. Researchers note that a low rate of participation in center based care options may impact future school readiness for some children. Additional research highlights are summarized below.

According to a 2006 study carried out by the Center for Law and Social Policy (CLASP)<sup>1</sup>:

- Young children of immigrants are less likely to participate in every type of non-parental care arrangement than children of U.S.-born citizens and are more likely to be in the care of a parent. Even when both parents work at least part time, young children of immigrants are more likely to remain in parental care or without a regular child care arrangement. When immigrant families use non-parental care, infants and toddlers are more likely to be in relative care and 3-to-5-year-olds are more likely to be in center-based care, as are children of U.S.-born citizens. Children of immigrants are less likely to attend preschool compared to children of U.S.-born citizens.
- Factors that contribute to the lower participation of immigrant families in early education include:
  - Poverty
  - Low rates of maternal employment
  - Nature of immigrant employment
  - Less formal education of parents
  - Limited English proficiency of parents
  - Comfort level in accessing services among mixed-status families.
- High quality, early education is critical to prepare children to succeed in kindergarten and beyond. Research shows that high-quality early education programs can particularly benefit low-income children and those most at risk of school failure by supporting their healthy development across a range of measures.

According to a 2005 study conducted by The Urban Institute<sup>2</sup>:

- Young children of immigrants are significantly less likely to be in child care than young children of natives--especially center-based care--even when controlling for age, parental work, and income.

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<sup>1</sup> Matthews, H., Ewen D. (2006). *Reaching All Children: Understanding Early Care and Education Participation Among Immigrant Families*; CLASP.

<sup>2</sup> Capps, R., Fix, M., Ost, J., Reardon-Anderson, J., & Passel, J. (2005). *The Health and Well-Being of Young Children of Immigrants*; The Urban Institute.

- Center-based care is lowest in immigrant families with less than the equivalent of an eighth grade education.
- There are advantages to choosing center-based care:
  - There is evidence that high-quality child care centers enhance school readiness, especially among children age's three to four (NICHD Early Child Care Research Network, 2000). However, high-quality care may be achievable in other settings such as the homes of immigrants or other families.
  - Beyond providing child care, many centers could deliver other public benefits and social services (referrals for housing, health care, job training, etc.).

### ***Factors in Choosing Child Care***

Feedback from those in the field reveals that **refugees choose informal child care most often. Yet we cannot assume that this is the ideal preference for all refugees.** Other factors may influence refugees' opting for one type of care over another. Possibilities include:

- Cultural views and beliefs about child care
- Availability of relatives willing and able to provide child care
- Cost of care
- Familiarity with specific types of care in home country
- Location of child care
- Availability of transportation to child care
- Hours of care available and match with work schedule
- Comfort level and cultural fit with child care provider
- Ability to communicate with child care provider
- Cohesiveness and unity of ethnic group
- Capacity of ethnic communities, including residential proximity between community members and size of community.

A 2001 study examining the use of kith and kin care among the general population by the National Center for Children in Poverty<sup>3</sup>, notes that the use of informal care is related to factors such as the educational level of parents, household income, employment status, work schedule, receipt of public assistance, household composition, and ethnicity. **The study also reports that the reasons families cite for choosing informal care include: parental values, parent's view of quality, child age, special needs of children, constraints of parental choice** (availability in area, work schedule, transportation), **and cost of care** (i.e. families who receive subsidies may be more likely to use regulated care).

**As advocates for refugees, we must ensure that refugees are familiar with all types of care available.** This includes highlighting educational advantages of certain types of care over others and the availability of financial assistance to obtain all types of desired care, including kith and kin care.

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<sup>3</sup> Brown-Lyons, M., Robertson, A., Layzer, J. (2001). *Kith and Kin—Informal Child Care: Highlights from Recent Research*; National Center for Children in Poverty.