



Grandmothers as Child Care Providers for Rural, Low-Income Mothers

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The most frequent choice of child care arrangement for low-income women is within the family system.

- Parents as sole caregivers

In a recent national survey, 38% of children under 3 and 23% of preschoolers in low-income families were cared for by their parents. Strategies that mothers use to keep care within the home are:

- “tag teaming” care between parents by working different shifts
- working at home
- relying on spouse’s/partner’s income only until children are in school
- once children are in school, working part-time during school hours

- Relatives as caregivers

In 1999, 7.5 million children under 13, and nearly 1/3 of children birth to five, were being cared for exclusively by a relative while parents were working.

- Grandmothers as caregivers

By far the most frequent choice among relatives is the mother’s mother.

A number of factors help predict mothers’ use of relatives as child care providers.

- Mothers are more likely to choose a relative for child care if they:
 - are living in poverty
 - live in a rural area
 - are single
 - have more than one child

- have young children
- work non-traditional and/or variable hours
- don’t receive child care subsidy assistance
- are Hispanic or African-American

Personal preference and perceived relational benefits influence low-income, rural mothers’ choice of their own mothers as child care providers.

- “Because she’s my mom and I trust her:” trust emerges as a key motivation for mothers’ choice. Conversely, mothers also express a mistrust of group care or care by “strangers.”
- Mothers express the perception of grandmothers as safe, reliable, loving, and always available.
- For some mothers, especially those without partners, grandmothers are seen as co-parents.
- Mothers view the caregiving arrangement as a way of strengthening the bond between grandmother and grandchild and, for some women, as strengthening their own relationship with their mother.

Practical benefits also influence mothers’ choice of grandmother care.

- Grandmothers’ flexibility in providing care at nearly all times, in all circumstances, is highly valued and appreciated by mothers.
- Grandmothers’ willingness to provide care during non-traditional hours, on short notice, and when children are ill reflects a degree of flexibility that no formal, regulated care would.

- Most grandmothers are not paid for providing care, are paid by an exchange of services, or are willing to take whatever mothers can pay, whenever they can pay it. Again, this is a benefit of grandmother child care that formal, regulated child care can not offer low-income mothers.
- Grandmothers are also convenient. For many mothers living in rural areas, grandmothers as well as other extended family are nearby. In addition, many single mothers live with their mothers as a means of financial, instrumental, and emotional support. In contrast, in many rural areas formal care, especially center-based care, is not conveniently located, primarily because rural communities don't have the numbers of young children to sustain it as a business.

Child care arrangements within a family system can pose unique difficulties.

- When grandmothers provide regular child care, the boundary between caregiving and parenting can get blurred, causing tension and conflict between mother and grandmother. This is even more likely when they live in the same household. At times, mothers appreciate help with parenting, but at other times they express that their parental authority is usurped by grandmothers.
- Family loyalty, financial need, and the mother-daughter bond can all contribute to maintaining the child care arrangement even when isn't primarily beneficial because:
 - the grandmother's health limits her ability to provide adequate care, particularly for very young children;
 - frequent conflict arises over parenting and caregiving practices strains the mother-grandmother relationship; or
 - the grandmother's caregiving does not provide children with experiences that support children's development and learning.

Family education and support programs must understand the unique features of child care embedded in an adult daughter – older mother relationship in order to be effective in reaching and providing relevant assistance to this unique population.

- Program staff should have a firm grounding in family theory and understanding of family dynamics and communication.
- Programs should build upon the strong family bonds within the arrangement and appeal to grandmothers' long-term desire that grandchildren do well when the focus of the program is on enhancing children's development and learning.
- Programs should include both mothers and grandmothers and provide mutual support for navigating through areas of conflict that result from shared caring for children.
- Programs should include a component focused on grandmothers' physical, social and emotional needs from a life-span development perspective.
- Programs should help families connect with other community services and supports that could improve their well-being while still acknowledging the value of support within the family system.

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Acknowledgements:

This research was supported in part by USDA/CSREES/NRICGP Grants 2001-35401-10215, 2002-35401-11591, and 2004-35401-14938. Data were collected in conjunction with the cooperative multi state research project NC-223/NC-1011 Rural Low-income families: Tracking Their Well-being and Functioning in the Context of Welfare Reform. Cooperating states are California, Colorado, Indiana, Iowa, Kentucky, Louisiana, Massachusetts, Maryland, Michigan, Minnesota, Nebraska, New Hampshire, New York, Ohio, Oregon, South Dakota, West Virginia, and Wyoming.

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