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A RESEARCH AGENDA FOR HOME-BASED CHILD CARE

Executive Summary

OPRE Report 2021-218

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EXECUTIVE SUMMARY

Millions of families with children from birth to age 12 rely on home-based child care (HBCC)—early care and education (ECE) offered in a provider’s or child’s home. HBCC includes regulated (licensed, certified, registered) family child care (FCC) and care legally exempt from regulation (license-exempt) that is provided by family, friends, or neighbors (FFN). HBCC is the most common form of nonparental child care for infants and toddlers (National Survey of Early Care and Education [NSECE] Project Team 2016). Many HBCC providers care for and educate mixed-age groups of children from infants through school-age children, allowing family members (for example, siblings) to receive care in the same setting. HBCC is especially prevalent in underserved communities, including communities of color, communities of people from immigrant backgrounds, areas of concentrated poverty, and rural communities (Laughlin 2013; Liu 2015; Liu and Anderson 2012; NSECE Project Team 2015; Porter et al. 2010). National estimates show that regulated HBCC providers account for only a small fraction of all such providers (NSECE Project Team 2016). Providers who are not part of regulatory systems may or may not receive payment for providing child care and may have limited access to resources and supports to enhance the quality of care they offer.

Research on HBCC settings lags behind research on center-based ECE settings, Head Start, and prekindergarten (Bromer et al. 2021). Moreover, within HBCC, regulated FCC providers are more likely to be the focus of research than FFN providers (Doran et al. forthcoming). Generally, the field lacks research about how the dynamics of HBCC availability and the features of HBCC settings relate to child and family outcomes.

To build the evidence base on HBCC availability and quality, the Home-Based Child Care Supply and Quality (HBCCSQ) project, funded by the Office of Planning, Research, and Evaluation (OPRE) within the Administration for Children and Families (ACF), developed an equity-focused research—or learning—agenda. The goal of an equity-focused research agenda is to use research to help ensure everyone, especially people from historically excluded and/or marginalized communities, has fair and equitable access to resources and opportunities, and the capacity to take advantage of those resources and opportunities. An equity-focused research agenda asks questions and pursues research that helps uncover how historical or current policies and prejudice might create roadblocks, or inequities, for particular groups and what might be needed to address them and level the field of opportunity for those groups. Children and families from underserved communities are much more likely to experience these inequities than other groups. The agenda is a proposed set of research questions about how the conditions and systems that affect HBCC and how HBCC providers’ practices and experiences influence positive and equitable outcomes for children and families in these HBCC settings. This focus on equity in the research agenda accomplishes the following:

- Raises awareness of the strengths and challenges HBCC providers face; the strategies and resources they use to support positive and equitable outcomes for children and families; and the ways that race, ethnicity, culture, language, and income may shape these experiences.
Executive Summary

- Uncovers the conditions under which HBCC providers, children, and families thrive, and what is needed to honor their strengths, knowledge, and resilience, and address and support their challenges.

- Places HBCC providers at the center of inquiry, reflecting the field’s lack of deep knowledge about their experiences in providing care, including the conditions under which they operate, their interactions with ECE systems (such as licensing, subsidies, and quality rating and improvement systems), and the support they receive.

The research agenda builds on knowledge and insights provided by ACF and research and practice experts, and gleaned through foundational project tasks, including a targeted literature review of quality in HBCC, development of a conceptual framework, a review of available measures and indicators of quality, and a scan of currently available national and state data sets.

The agenda contains 10 research questions across four topic areas (Exhibit 1). The broad questions aim to fill gaps in knowledge about HBCC with a focus on HBCC availability and quality—two areas for which we have only limited or no research evidence. The questions in this chapter provide a guide for future research on HBCC. For each question, research should examine how characteristics vary both within and across HBCC settings, provider backgrounds, the children and families who use HBCC, and the communities in which HBCC is provided (see Box 1). This research should also consider how these categories of characteristics intersect or interact with one another in different ways. In addition, throughout the research agenda, we present questions that explore the ongoing challenges and pressures HBCC providers face during the COVID-19 pandemic.

**Box 1. Research questions should explore variation across the following categories, as well as the intersection of characteristics within each category:**

- **HBCC settings**, including regulatory status (particularly FFN); number and ages of children in care (particularly school-age children and mixed-age groups); previous relationships among providers and children in care; hours of care (particularly nontraditional hour care); and presence of other adults who regularly work with children

- **Providers**, including cultural, racial, ethnic, and linguistic backgrounds (particularly providers in underserved communities); immigration documentation/refugee status; financial and economic well-being; and psychological well-being

- **Children and families**, including cultural, racial, ethnic, and linguistic backgrounds (particularly children and families in underserved communities); ages and abilities of children; and socioeconomic status of families

- **Local community characteristics**, including conditions such as urbanicity (particularly rural); poverty/wealth; and demographics (particularly communities that are underresourced)

The research agenda is designed to inform research investments at the national, state, and local levels. To this end, it describes potential research activities and study design elements that could be used to address the research questions and shape future research endeavors.
### Exhibit 1. Research questions by topic area

**A. Availability of HBCC, the providers who offer it, and the families that use it**

<table>
<thead>
<tr>
<th>A1</th>
<th>What is the availability of HBCC, and who offers it?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A2</td>
<td>What are provider experiences in offering HBCC, and how do these experiences relate to its availability? What opportunities and challenges do providers face with respect to caring for and educating children, and supporting families?</td>
</tr>
<tr>
<td>A3</td>
<td>Who uses HBCC? Why do they use it?</td>
</tr>
<tr>
<td>A4</td>
<td>What are children’s and families’ experiences in using HBCC?</td>
</tr>
</tbody>
</table>

**B. HBCC provider experiences in caring for children and families, and the relationship between quality features and child and family outcomes in HBCC settings**

<table>
<thead>
<tr>
<th>B1</th>
<th>How do HBCC providers define and implement quality for children and families? What is the relationship between these practices and equitable child and family outcomes?</th>
</tr>
</thead>
<tbody>
<tr>
<td>B2</td>
<td>How do HBCC providers across settings; communities; and cultural, racial, ethnic, and linguistic groups enact quality, given the pressures of ECE policies and regulations? How do policies and regulations shape the ways that providers offer care to children and families?</td>
</tr>
<tr>
<td>B3</td>
<td>How do families perceive quality in HBCC?</td>
</tr>
</tbody>
</table>

**C. Policy contexts in which HBCC operates, including ECE policies and regulations as well as other policies that govern HBCC providers, and the opportunities and challenges associated with these policies and regulations**

| C1 | How do ECE policies and regulations reflect and affect the experiences of HBCC providers? How do ECE policies and regulations dismantle or perpetuate inequities across HBCC providers and the families and children in these settings? In what ways do ECE policies and regulations exclude or include providers? |

**D. ECE and community-oriented strategies that contribute to HBCC providers’ engagement in quality improvement, the challenges and opportunities associated with delivering support for quality improvement, and the experiences of ECE staff who support HBCC providers**

<table>
<thead>
<tr>
<th>D1</th>
<th>What types of strategies are used with HBCC providers? How are ECE and community-oriented strategies implemented? What are the experiences of ECE agency staff(^a) who work directly with HBCC providers? What are the experiences of HBCC providers with agency staff?</th>
</tr>
</thead>
<tbody>
<tr>
<td>D2</td>
<td>What ECE and community-oriented strategies contribute to HBCC providers’ experiences in improving quality and sustainability? What strategies are effective in reducing inequities in outcomes for HBCC providers and the children and families in HBCC settings?</td>
</tr>
</tbody>
</table>

\(^a\) ECE agency staff include those who work directly with HBCC providers through visits, coaching, mentoring, monitoring, or training. Agencies include professional development or quality improvement initiatives, networks, child care resource and referral agencies, and Head Start/Early Head Start programs, as well as licensing, child care subsidies, quality rating and improvement systems, and the Child and Adult Care Food Program (CACFP).
It also presents recommendations for four research activities that can help fill gaps, which is critical for advancing knowledge of HBCC availability and quality, and could be carried out through the HBCCSQ project. These recommendations include the following:

1. Analysis of data from the 2012 and 2019 NSECE, which are primary sources of nationally representative information about HBCC providers.

2. A multisite mixed-methods study of HBCC, with a particular focus on FFN in underserved communities, which has received less attention in prior research.

3. Case studies of state and local ECE systems, and community-oriented strategies (such as FCC networks and play and learn groups) designed to support HBCC.

4. Measures development focused on quality features that are implemented differently or are more likely to occur in HBCC than in other ECE settings, but where there is little or no research.

Together, these research activities will fill significant knowledge gaps related to the following:

- Who offers HBCC and changes in the availability and use of HBCC over time.
- The strengths, resources, and strategies HBCC providers across settings use to support equitable outcomes for children and families, and how these experiences intersect with culture, race, ethnicity, language, and income.
- How ECE systems and community-oriented strategies align with HBCC provider experiences, and corresponding opportunities and challenges.
- Measures of quality in HBCC that shed light on the provision of care and education in HBCC that may contribute to equitable and positive child and family outcomes, and how best to support the strengths and enhance the quality of HBCC settings.

Knowledge about the strengths and resources that HBCC providers bring to their work and their experiences, in particular among different cultural groups and communities, could expand the field’s definitions of quality and indicate what is needed to serve children in different communities and contexts. Stakeholders could then use this knowledge to offer, or help HBCC providers access, resources and opportunities that honor the strengths and resources they bring to this work. In addition, the proposed research can inform how ECE policies and regulations could improve the experiences of HBCC providers and increase equitable access to high-quality care and education for all children and families that use HBCC. Furthermore, lessons learned about HBCC based on the HBCCSQ research agenda might identify potential gaps in knowledge about serving children and families in other types of ECE settings.
REFERENCES


