



Immigrant families' use of early childcare: Predictors of care type[☆]

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ABSTRACT

Early care and education (ECE) settings are important developmental contexts for young children, with nearly half of all U.S. children experiencing non-parental care during infancy and toddlerhood. However, there is little research examining patterns and predictors of ECE selection among immigrant families even though children of immigrants represent the fastest growing population in the U.S. Using data from the Early Childhood Longitudinal Study, Birth Cohort ($N \approx 10,700$), including a diverse group of children with immigrant parents ($N \approx 2950$), this study aims to fill gaps in the literature by examining predictors of the type of ECE (parent, relative, home-based, or center-based) children experience during infancy and toddlerhood (children aged 7–38 months). It examines how immigrant, family, child, and contextual characteristics predict ECE selection within immigrant families and whether these correlates of ECE selection differ across native and immigrant families. Results show distinct patterns of infant and toddler ECE related to immigrant status, particularly when it came to socioeconomic advantage predicting increased relative care for children of immigrants but not native families. Furthermore, several immigrant-specific characteristics, including region of origin, English proficiency, and availability of non-English ECE options, were associated with immigrant families' ECE choices for their infants and toddlers.

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Today, nearly one in four American children has at least one parent who is an immigrant to the United States (Tienda & Haskins, 2011), and roughly 80% of these children are born in the U.S. (Capps, Fix, Ost, Reardon-Anderson, & Passel, 2005). Immigrant parents confront a myriad of difficult decisions related to the early care and education of their children during the infant and toddler years. Nonparental early care and education (ECE) settings are an increasingly salient context for all children's development in the United States (Votruba-Drzal, Coley, Koury, & Miller, 2013), but these settings may be especially salient for immigrant families to the extent that ECE arrangements facilitate parental employment, prepare children for entry into formal schooling, and help to acculturate immigrant families to U.S. norms and values related formal institutions of education. Thus, understanding

patterns of infant and toddler ECE use in immigrant families is vital.

Studies show that children of immigrants traditionally have lower rates of nonparental care than do children of native parents (Karoly & Gonzalez, 2011), but knowledge concerning what drives such differences is limited. Few studies have carefully examined whether predictors of child care, especially for infants and toddlers, operate similarly in immigrant families as in native families. Moreover, given the great heterogeneity within immigrant families in the U.S., it is essential to understand within-group forces related to families' child care decisions emanating from factors such as parental region of origin, family economic and social resources, parental preferences, or the availability of care options in immigrant communities (Brandon, 2004; Hernandez, Denton, & Macartney, 2007a; Santhiveeran, 2010a). This study aims to fill gaps in the literature by examining patterns of infant and toddler care selection among a diverse group of children of immigrants in the U.S., using data from the Early Childhood Longitudinal Study, Birth Cohort (ECLS-B). Specifically, taking a within-group approach, we examine how factors particularly salient for immigrant families (e.g., parental region of origin, citizenship status, tenure in the U.S., household language proficiency), as well as more general demographic, child, contextual, and preference factors, predict the type of ECE (none, center, relative, or non-relative home)

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their children experience. We also consider whether ECE selection processes differ in native versus immigrant families.

Conceptual framework

Our research on immigrant families' child care selection is guided by Pungello and Kurtz-Costes' (1999) theoretical model of early child care selection, which argues that families' selection into early care is driven by four sets of factors. These include (1) maternal demographic and socioeconomic characteristics (e.g., age, income, and education); (2) child characteristics (e.g., age, gender, health, temperament, and cognitive ability); (3) contextual factors, including both home contexts (e.g., work schedules, number of children and caregivers in the household) and community contexts (e.g., availability of care in the community); and (4) maternal beliefs and preferences regarding children's child care experiences. Sociocultural theories further inform our conceptualization of the Pungello and Kurtz-Costes model. These theories suggest that cultural differences within immigrant families give rise to diversity in the ECE experiences of children of immigrants (Hernandez, Denton, & Macartney, 2007b). We hypothesize that additional demographic and contextual factors not articulated in the Pungello and Kurtz-Costes model are relevant when considering child care selection among the diverse population of immigrant families living in the U.S. including, English proficiency, citizenship status, age of immigration, region of origin, availability of native language care providers, and the generosity of public benefits afforded to immigrants. For instance, immigrant families differ in terms of English language proficiency and access to non-English speaking care providers (Hernandez, Denton, & Macartney, 2011; Koury & Votruba-Drzal, 2014; National Task Force of ECE of Hispanics, 2007). This may relate to differences in children's ECE experiences if parents may prefer same-language care, which may be more accessible in informal care settings, or if limited English proficiency acts as a barrier to accessing more formal center-based settings (Espinosa et al., 2013; Fuller, Eggers-Pierola, Holloway, & Liang, 1996; Matthews & Jang, 2007; Vesely, 2013). Parental citizenship status and age of immigration may also be related to children of immigrants' ECE experiences to the extent that they are indicators of acculturation to U.S. norms regarding nonparental care (Vesely, 2013). Age of immigration may correlate with family networks and, accordingly, the availability of relatives to care for children (Buriel & Hurtado-Ortiz, 2000). Parental region of origin may also be an important characteristic of immigrant families that relates to ECE use due to cultural differences across immigrant groups in norms regarding nonparental care, child rearing beliefs, and parenting behaviors, such as differences in reading to children, beliefs regarding parents' roles in shaping development, or discipline styles (De Feyter & Winsler, 2009; Jung, Fuller, & Galindo, 2012; Koury & Votruba-Drzal, 2014). Moreover, sociocultural theories suggest that variation in language proficiency, citizenship, tenure in the U.S., and cultural norms between native and immigrant parents may cause the factors articulated in Pungello and Kurtz-Costes' model to differentially predict ECE decisions across native and immigrant families. Accordingly, this study tests whether the Pungello and Kurtz-Costes model predicts care type similarly for immigrants and native families.

ECE selection in native families

Empirical research has documented links between (1) demographic and socioeconomic characteristics, (2) child characteristics, (3) contextual factors, and (4) beliefs and preferences and native-born parents' selection of ECE for their children. Characteristics such as income, education, maternal employment, and race/ethnicity are related to the type of nonparental care

arrangements that families select. Specifically, increased income, parental education, and maternal employment are linked with increased center care attendance (Connelly & Kimmel, 2003; Early & Burchinal, 2001; Hofferth & Wissoker, 1992). With regard to race/ethnicity, African American families tend to use center care at higher rates whereas Latino families, in particular those from Mexico, use nonparental care, particularly center care, at lesser rates than other racial and ethnic groups (Early & Burchinal, 2001; Espinosa et al., 2013; Hirshberg, Huang, & Fuller, 2005; Huston, Chang, & Gennetian, 2002; Liang, Fuller, & Singer, 2000).

The other hypothesized factors driving care selection have received less attention in the literature. With respect to child characteristics, consistent links between child age and increased use of nonparental care, particularly center-based care, have been established (Early & Burchinal, 2001; Fuller, Holloway, & Liang, 1996; Huston et al., 2002). On the other hand, there is little empirical evidence of associations between gender or temperament and child care. A recent study by Jaffee, Van Hulle, and Rodgers (2011), however, showed that children with more difficult temperaments were less likely to experience non-maternal care at ages 0–3, with no significant effects of child gender. Household structure, an important contextual characteristic, predicts nonparental care type. Specifically, more children and married parents are generally associated with greater use of parent care and less reliance on center care though studies are not entirely consistent (Huston et al., 2002; Leibowitz, Waite, & Witsberger, 1988; Liang et al., 2000). The availability of child care in local communities is another important hypothesized contextual factor influencing the type of ECE settings that parents select (Hirshberg et al., 2005), but little research has assessed the role of availability due in large part to limited data. Lastly, the role of parental preferences for certain attributes of ECE in influencing the type of settings parents select for their children has been the focus of some research. Parents report choosing care based on three general categories: quality concerns, practicality concerns, and specific preferences for a certain type of care (Peyton, Jacobs, O'Brien, & Roy, 2001). In Peyton et al. (2001), parents citing quality as the most important factor in selecting child care were more likely to enroll their three-year old children in center-based and home-based care rather than relative care. There was no evidence of differential selection into care type for the parents whose chief concern was finding practical care. There is contrary evidence that parents who rank practicality as the most important factor select into home-based care, whereas parents ranking quality as paramount choose center-based programs (Kim & Fram, 2009). Research also suggests that parents who prefer cultural consistency across home and ECE settings tend to select informal home-based care rather than center-based care (Lowe & Weisner, 2004), though recent work shows that at least some immigrant mothers are able to find formal ECE that reinforce their cultural values (Vesely, 2013).

ECE selection in immigrant families

Little research has tested whether the above sociodemographic, child, and contextual characteristics and maternal preferences operate similarly to predict immigrant families' patterns of care selection. The exception is a 2010 study by Kahn and Greenberg using National Household Education Survey (NHES) data that examined whether certain child and parental factors predicted infant and toddler care type differently for children with foreign-born mothers compared to children with native mothers. Results showed that race/ethnicity, income, education, maternal employment, household structure, and child age predicted care type similarly for infants/toddlers of native and immigrant mothers, with only two significant differences emerging (married immigrant mothers were less likely to use relative versus parent care, and immigrant mothers working full time were more likely

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