CHILDREN IN NON-PARENTAL CARE

Typically, one or two parents and a child—along with any siblings—comprise a family, and the parents’ interactions with the child are a primary driver of the child’s development. Yet, nearly 3 million children (3.9 percent of all children) live in homes with no parent present (U.S. Census Bureau, 2011). The majority such children live with a relative; over half live with a grandparent. A minority of all children in non-parental care are in foster care, with fewer than 300,000 in foster care.1

Evidence that children living with two parents fare better than children who live with only one parent (for a review, see Dunifon, 2009) raises the concern that children living with no parent may be at particular risk. Another reason for concern is that children living with non-parental caregivers experience at least one family transition, and evidence indicates that family instability can negatively affect children (for a review, see Fomby and Cherlin, 2007). Additionally, some of the circumstances resulting in non-parental care themselves may negatively affect children.2

Most research related to children in nonparental care focuses on children living with relatives, children in foster care, and—to a lesser extent—children of incarcerated parents. Many children of incarcerated parents, children formally in foster care, and children who would be in foster care were it not for an arrangement made outside of the child welfare system, are living with relatives. Studies involving interviews with parents who voluntarily arrange for children

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1 Overall, more than 400,000 children were in foster care at the end of 2010, but not all were living in a foster family home (U.S. Department of Health and Human Services, 2011).
2 In their respective papers, Aquilino (1996) and Fomby and Cherlin (2007) weigh whether poorer child well-being more directly results from family instability per se, or from the negative circumstances or parent factors necessitating the non-parental care.
to live with relatives mostly cite reasons pertaining to parenting capacity (Gleeson & Seryak, 2010).

Much of the existing research on non-parental care focuses on specific segments of the population, most commonly on relative caregivers and on grandparents in particular. Relative caregivers tend to be older than other caregivers (U.S. General Accounting Office, 1999), and they frequently experience socio-economic disadvantages (Ehrle & Geen, 2002). Despite their potential challenges in providing care for children, informal relative caregivers are frequently not eligible for the supports received by non-relative foster caregivers (Ehrle & Geen, 2002; Malm & Geen, 2003) and may face difficulty enrolling the child in school or obtaining medical services if the caregiver lacks legal custody (Ehrle & Geen, 2002; Testa et al., 2004). However, studies comparing the well-being of children living with relatives versus those living with non-relatives—often focused on children involved in the child welfare system—frequently find few differences between the two groups (Sun, 2003; Conway & Li, 2011).

Only a few studies focus on the caregiver-parent relationship, but some evidence suggests positive relationships may be beneficial to the child. For instance, they may promote parent-child contact, and are associated with more stable placements (Poehlmann et al., 2008; Gerring et al., 2008). Placement of siblings together in the same living arrangement can be beneficial for the children (for reviews, see U.S. General Accounting Office, 1999; Washington, 2007), yet research suggests that sibling separations are common across subgroups (Hynes & Dunifon, 2007; Poehlmann et al., 2008; McCormick, 2010). Sibling separations tend to occur less frequently for children in relative foster care than among those cared for by non-relative foster parents (U.S. GAO, 1999; Washington, 2007).

Compared to the general population, poorer health outcomes have been observed among children living with grandparents (Bramlett & Blumberg, 2007) and children in foster care (Vandivere et al., 2003). Additionally, there is some evidence that, compared to children living with two married parents, children living with no parents present have more behavioral problems (Conway & Li, 2011) and are more likely to be suspended, repeat a grade in school, and have lower school engagement (Bavier, 2011; Conway & Li, 2011). Only one study examined child well-being across the population of children in non-parental care (Sun, 2003). There is very little information about the household dynamics of children in non-parental care arrangements, including the quality of the relationship of the child to the caregiver and to other members of the household. Children in non-parental care frequently live with non-related children (Hynes & Dunifon, 2007); it is unclear whether and how the interactions among these children might affect children’s well-being. Some research has examined sibling separation (particularly for children of incarcerated parents and those in foster care), as well as the share of children who live with siblings, but very little is known about the quality of sibling relationships or about sibling contact when siblings are separated.

There are many gaps in the current knowledge base about children in non-parental care. Little is known about the reasons for entry into non-parental care and how these reasons may affect child well-being and the quality of children’s non-parental care arrangements. Further, there is no population-wide information on the access to and need for services and supports among children in non-parental care (though relatively more is known about receipt of financial supports and health insurance coverage).
Some sub-populations of children in non-parental care are largely absent from the extant literature. For example, there are no currently tabulated data on foster parents, and the data collected on foster parents through the Adoption and Foster Care Reporting System (AFCARS) are limited to a few demographic characteristics. No current data exist on the population of children for whom parents arrange to live with relatives to avoid involvement with child protective services and the child being in state custody. Additionally, we found virtually no information on the immigration status and nativity of parents and children in non-parental care, and whether and how these characteristics might be related to non-parental care.

Another gap pertains to the effect of continued parent involvement with children in non-parental care. Questions remain about whether and how effects vary depending on the type, quality, and frequency of involvement, as well as whether and how they are moderated by the context of the involvement or parent characteristics. With the exception of children in foster care and children with incarcerated parents, research on the effect of parent-child involvement is generally based on children with only one non-resident parent. (In addition, most of the existing information regarding reasons for non-parental care pertains to only one of the child’s parents, not both of the parents.) It is not clear the degree to which findings from the population of children with one resident parent can be generalized to the population with no resident parents.

Recent years have seen great advances in the national data available on children and their well-being. However, because children living in non-parental care arrangements represent a small percentage of the overall population few national data are available regarding them. Additional research is needed on the entire population of children in non-parental care in order to capture the range of situations under which non-parental households form, the similarities and differences across subgroups, and to assess whether available services and supports are reaching the intended target populations. Further research on the duration and episodic nature of non-parental arrangements will be important for program developers and funders. Current efforts to develop a National Survey of Children in Non-Parental Care (NSCNC), planned as a follow-on survey to the 2011 National Survey of Children’s Health, will be a valuable resource for researchers to move the field forward.

REFERENCES


