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ABSTRACT

This study examines the characteristics and work environments of approved family day home providers in Alberta. Family day home agency coordinators from across Alberta completed questionnaires, as did approved providers who contracted with 12 agencies in central Alberta. Typical providers were married, had children, and had lived in their present communities for 5 years or more. The majority did not have early childhood training or a postsecondary education qualification. Most had worked in the position for less than 2 years. Providers had access to several professional development activities, many of which were sponsored or supported by the agency. Fees paid to providers were low, and most traditional job benefits were unavailable to most providers. Providers worked long hours. They expressed satisfaction with and commitment to many aspects of their work, but were dissatisfied with their pay, benefits, and level of recognition by society. Turnover rates were very high, and provider recruitment was difficult. Primary reasons for becoming a provider were the need to earn income and to care for their own children. Provider training was supported by providers and agency coordinators. Recommendations for further study are offered. (10 graphs, 33 references) (RH)

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Those Who Care

A REPORT ON APPROVED FAMILY DAY HOME PROVIDERS IN ALBERTA



August 1990

Principal Investigators
Malcolm Read
Annette LaGrange

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Malcolm Read and Annette LaGrange are the principal researchers for Child Care Matters.

They are also faculty members of the Early Childhood Development Department at

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INTRODUCTION

The study Those Who Care: Approved Family Day Home Providers in Alberta examines the characteristics and work environments of a proved family day home providers in Alberta.* The data for this section were collecte: in February and March, 1990. Family day home agency coordinators from across Alberta completed written questionnaires to provide information about their own agencies, the ways in which they worked with providers and their opinions regarding educational qualifications for family day home providers. Approved family day home providers who contracted with 12 agencies in central Alberta also completed written questionnaires and provided information on their personal and educational backgrounds, child care experiences, wages and benefits and on their levels of job satisfaction.

Background

Family day home care is increasing in popularity as a child care alternative in Canada (Health and Welfare Canada, 1989) and providers are playing an increasingly important role in the lives of young children, especially in the care of infants and toddlers. Even so, little is known about the day to day care-giving practices of providers (Bruner, 1980) or about how the personal characteristics and work environments of providers affect the care they provide for children.

The National Day Care Home Study (Stallings and Porter, 1980) reported that providers fit into two distinct groups - 33 % were mothers, 20 to 30 years of age, with preschool children living at home, 33% were between 40 and 50 years of age and did not have children living at home. Providers in Alberta did not fit into this description (Alberta Social Services, Child Care Program, 1988). Forty-three percent were between 20 and 29 years of age; 39% were between 30 and 39 years of age; and only 18% were 40 years of age or older. The Victoria Study (Pence and Goelman, 1987) reported that the average age of providers was 39 years and The Chicago Study (Clarke-Stewart, 1987) reported that the average age of providers was 36 years.

According to The National Day Care Home Study, reasons to provide care for children differed depending on age and circumstances of the provider. Mothers with young children at home stated they wanted to stay at home and to provide company for their own children, while women whose children were either in school or had left home stated they wanted an interesting activity. Schom-Moffatt (1985) reported that a majority of providers cited the need for additional income as a primary reason for providing care. In Alberta, primary reasons cited by providers were income, personal satisfaction and companionship for their own phildren (Alberta Social Services, 1988).

Conditions within which providers work have received comment in a number of studies. Deller (1988) described the impact of being classified as self-employed, a classification

This is the second part of the study, Those Who Care. The first part, Those Who Care: A Report on Child aregivers in Alberta Day Care Centres, was released in June, 1990.

common to providers across Canada: "They are therefore not covered by employment standards and relevant labour legislation which regulates hours of work, rates of pay and employee benefits, insurance and pension plan contributions and cannot claim unemployment insurance" (Deller, 1988, p. 117). In *The Victoria Study*, (Pence and Goelman, 1987) providers worked an average of 10.4 hours per day and cared for an average of 5.17 children. Schom-Moffatt (1985) reported that 68% of providers worked more than 45 hours per week, 40% worked more than 50 hours per week and only 12% worked 35 to 40 hours per week.

Income earned through family day home care is low. Schom-Moffatt reported that across Canada, "The mean gross wage is \$3.30 per hour (\$7.722 annually), and the mean net wage is \$2.26 per hour (\$5.288 annually) – lower than the minimum wage in each province" (Schom-Moffatt, 1985, p. 131). This study also indicated that many providers did not know what their income was or what expenses they incurred. Payment was based on the attendance of children and was not related to experience or education of the provider (Schom-Moffatt, 1985). The Victoria Study (Pence and Goelman, 1987) reported that only 4% of providers carned \$10.000 annually. In Alberta, 51% of providers earned less than \$500 per month and only one percent earned \$1.000 or more per month (Alberta Social Services, 1988).

Regulated or approved family day home providers are typically reported to have grade school or high school education, with a small percentage having completed a post-secondary qualification. Schom-Moffatt (1985) reported that approximately one third of providers had not completed high school, 40% had a high school diploma as their highest level of education and seven percent had post-secondary training in early childhood education. In their study of 161 caregivers in licensed family day care in Ontario, Stuart and Pepper reported that 33% had not completed high school, 12 % had some post-secondary experience and 11% had a postsecondary qualification (Stuart and Pepper, 1985). These findings are similar to those reported in The Victoria Study (Pence and Goelman, 1987). The National Day Care Home Study, based on 352 providers in the United States, found that approximately 30% of regulated providers had received some training in early childhood care (Divine-Hawkins, 1981). Clarke-Stewart found that almost half of regulated providers in The Chicago Study (Clarke-Stewart, 1987, p. 27) had at least one course in child development, "but their level of education was still significantly below that of teachers in centre programmes." Within Alberta, a survey of 245 providers showed that 34% had not completed high school, 38% had high school diplomas, 21% had some post-secondary experience and seven percent had a post-secondary qualification (Alberta Social Services, 1988).

From a survey of providers across Canada, Schom-Moffatt (1985) reported that many providers described their job as temporary and planned to stay only until their own children entered school. Approximately 75% had been in their present job for less than three years and only 5.4% had been in the job for more than 10 years. Stuart and Pepper (1985) reported that the average length of provider experience was 2.57 years, with a range from one month to 13 years (Stuart and Pepper, 1985). In 1990, Nelson reported a tumover rate of 37% in Vermont.



She expressed concern at high turnover among providers, especially because of the emphasis of family day home care as a preferred arrangement for children under three years of age.

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These very young children in family day care are the ones for whom the continuity of care may be especially significant. Moreover, among these young children the consequences of turnover may be more severe than among children in centre-based care; in the former case turnover will necessarily entail placing the child in an entirely new setting without even the benefits of a familiar peer group" (Nelson, 1990, p. 8).

The Alberta Survey of the Family Day Home Program (1988) reported 63% of providers had been with their programme for less than two years and 15% had been with the programme for more than three years. It also reported a 50% turnover in a 12-month period.

Several studies have looked at other characteristics of providers and family day home services (Deller, 1988; Stuart and Pepper, 1985; Eheart and Leavitt, 1989). Clarke-Stewart (1987) concluded that associations between features of a particular child care setting and the development of an individual child were complex and difficult to describe. However, she concluded that across all settings including regulated family day home care, higher levels of caregiver education were related to higher levels of children's social competence. Nelson noted that provider tumover is an important issue and that children, parents and providers are all victims of high rates of attrition (Nelson, 1990). Deller, in a review of research on the value of family day care, questioned a number of assertions regarding family day care. She questioned that there was evidence to support the hypotheses that infants, toddlers and children with special needs develop better in family day home care than in centre-based care; that family day home care is less expensive than centre-based care; and that family day home care is more flexible than centre-based care. She suggested there is evidence to support the notion that children in family day home care may receive more individual attention than children in centre-based care, although the amount of individual attention is affected by provider training and a sense of professional status (Deller, 1988).

In 1982, Belsky et al. reviewed different forms of child care and listed the advantages of family day home care:

- ➤ It affords children daily close contact with mixed-age peers.
- ➤ It provides limited isolation from the non-caring world.
- ➤ The hours are more flexible.
- The location is more convenient.
- It affords parents freedom in selecting caregivers with values similar to their own.



8 Those Who Care

They also listed the disadvantages:

- ➤ It tends to be unstable, making it unreliable across the long term.
- There is little assurance that the provider has any formal training in child care, although most are experienced parents.
- It generally lacks an education programme.

They concluded that when family day care homes, "are both licensed and supervised – by a child development council for example – quality of care can be maintained" (Belsky, Steinberg and Walker, 1982).

HIGHLIGHTS OF FINDINGS

- 1 Typically, providers were married, had children and had lived in their present community for five years or more.
- ➤ Eighty-seven percent of providers were 40 years of age or younger.

Ninety-two percent were married and 91% had children of their own at home.

- The majority of providers did not have early childhood training or a post-secondary education qualification.
- ➤ Sixty-six percent of providers had no post-secondary experience.

Six percent had a qualification in early childhood education/development.

- 3 Most providers had worked in the position for less than two years
- Forty-three percent of of respondents had been providers for less than 12 months.
- 4 PROVIDERS HAD ACCESS TO SEVERAL PRO-FESSIONAL DEVELOPMENT ACTIVITIES, MANY OF WHICH WERE SPONSORED OR SUPPORTED BY THE AGENCY.
- Ninety-seven percent of agencies assisted providers with professional development activities.

Providers were most likely to attend a first aid course, workshops or conference.

- 5 Fees paid to providers were low.
- ➤ Providers calculated that their average gross hourly income was \$3.90.

Sixty-five percent of providers had incomes less than \$4.50 per hour.

Fees paid to providers were normally based on the number of children and their



hours of attendance in care. They were unaffected by provider performance. education or experience.

MOST TRADITIONAL JOB BENEFITS WERE UNAVAILABLE TO MOST PROVIDERS.

➤ Sixty-five percent of agencies offered opportunities for providers to purchase insurance coverage through a group benefit package.

Many of the benefits offered by agencies did not fit a traditional notion of iob benefits.

- PROVIDERS WORKED LONG HOURS PRO-VIDING CARE.
- ➤ Seventy-five percent of providers worked for more than eight hours per day.

The average number of children cared for by a single provider was 3.74.

Eighty-eight percent of providers cared for children under age three years and 78% cared for children aged three to five years.

- PROVIDERS EXPRESSED SATISFACTION WITH AND COMMITMENT TO MANY ASPECTS OF THEIR WORK.
- ➤ Providers viewed their work as important, enjoyable and rewarding.

Eighty percent would recommend the job to a friend.

- PROVIDERS WERE DISSATISFIED WITH THEIR PAY, BENEFITS AND LEVEL OF RECOGNITION BY SOCIETY.
- ➤ Seventy-three percent viewed their pay as unfair.

Sixty-three percent considered the job lower in status than all other jobs.

- 10 Turnover rates were very high.
- ➤ Agency coordinators reported an annual turnover rate of 51%.

Individual caregiver arrangements between a single provider and child lasted less than two years in 97% of cases.

Providers listed low pay and their own children suffering as the primary reasons why they would leave.

11 PROVIDER RECRUITMENT WAS DIFFICULT.

- ➤ Ninety-seven percent of agency coordinators described provider recruitment as difficult.
- Difficulties in recruitment were attributed to a lack of suitable applicants, applicants objecting to the level of income, shift-hours, caring for infants and toddlers and government regulations.
- PRIMARY REASONS FOR BECOMING A PROVIDER WERE THE NEED FOR INCOME AND TO CARE FOR THEIR OWN CHILDREN.
- ➤ Eighty-one percent of providers chose the job so they could stay at home with their own children.
- Forty-nine percent wanted to provide company for their own children.
- Seventy-four percent needed the money but did not want to leave home.
- Provider training was supported by providers and agency coordinators.
- ➤ Eighty-six percent of providers supported training on condition they receive funding support and it did not involve leaving their present job.
- Eighty-nine percent of agencies thought that quality of care would improve if providers were trained.
- Eighty-five percent of agencies thought they should train providers.
- Forty-live percent of agencies considered that training should be transferable to a college programme.

RESEARCH DESIGN

In Alberta, regulated family day home care may be provided in approved or in licensed homes. This study deals only with approved homes, in which the providers are contracted by family day home agencies who are themselves under contract with the Department of Family and Social Services. Agency auspice is identified in this study by the terms public or private. Public agencies are non-profit and are sponsored by parent cooperatives, churches, municipalities and non-profit agencies or societies. Private agencies are for-profit and are individually owned.

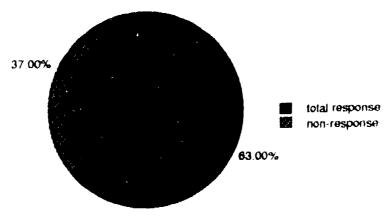


Sample

Eighty-four family day home agencies listed in Satellite Family Day Home Projects (Alberta Family and Social Services, 05/04/89) were surveyed. In addition, 283 approved family day home providers who contracted with 12 agencies in central Alberta were surveyed. In all cases providers were contacted with the assistance of the agency coordinators. In seven cases (152 providers), agency coordinators distributed the questionnaires directly. In the remaining five cases (131 providers), coordinators submitted the names and addresses of the providers with whom they had active contracts and questionnaires were then mailed. The average size of the agencies with which these providers contracted was 24 homes and ranged from one home to 70 homes.

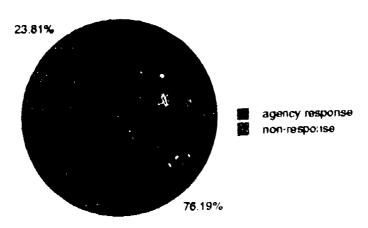
Sixty-three percent (179/283) of the approved family day home providers returned completed questionnaires.

Percentage of survey responses received: Providers



Seventy-six percent (64/84) of the family day home agencies returned completed questionnaires.

Percentage of survey responses received: Agency coordinators





MEASURES AND PROCEDURES

Agency questionnaire

A written questionnaire containing 31 questions was sent to the coordinator of each family day home agency in the province. The questions provided information about the agency – its location, auspice, size, types of care and parent fees; the support it offered to providers; the recruitment and retention of providers; attitudes towards training for family day home personnel; and the fees and benefits available to providers.

Provider questionnaire

A written questionnaire containing 49 questions was sent to 283 providers. It contained a number of questions which were the same as, or similar to, those asked in other surveys. This allowed for ease of comparison with previous studies (Pence and Goelman, 1987; Schom-Moffatt, 1985). Questionnaires were used to obtain information about the educational and personal backgrounds of providers, their work experience in child care and their provider incomes, working conditions and benefits. In addition, they included questions that were developed by Jorde-Bloom (Early Childhood Work Attitudes Survey, 1986) which assessed their levels of job satisfaction.

The agency questionnaire was pleted with the assistance of three family day home agency coordinators. The provider questionnaire was piloted with the assistance of two agency coordinators and 13 approved family day home providers.

Together with stamped-addressed envelopes, the revised questionnaires were mailed or delivered to each agency coordinator or provider with a request that they be completed and returned within 10 days. Eighty-four agency questionnaires were distributed and 64 (76%) returned. Two hundred and eighty-three provider questionnaires were distributed and 179 (63%) returned.

PURPOSE

The purpose of this study was to describe the backgrounds and working conditions of approved family day home providers. The areas examined were:

- ➤ Provider characteristics including formal education, early childhood education, experience in child care and personal background.
- ➤ Provider work environment—including income, hours worked, and number and ages of children cared for.
 - ➤ Provider attitudes including measures of job satisfaction and attitudes towards training.
 - ➤ Agency characteristics including auspice, size, support offered to providers and attitudes to recruitment and education for providers.



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APPROVED FAMILY DAY HOME CARE IN ALBERTA

Approved family day home care is regulated by the Social Care Facilities Licensing Act: Day Care Regulations, 1981. The programme standards and requirements are detailed in The Family Day Home Program Manual (revised) (Alberta Family and Social Services, 1989).

In this manual, an approved family day home is described as, "A private residence in which care, development and supervision are given to preschool children by a self-employed provider. Providers operate under a contract with a family day home agency" (Alberta Family and Social Services, 1989, DH-01-02-01).

The service is further defined: "At any one time, a family day home provider shall care for no more than six (6) children who have not reached their tenth birthday. This includes the provider's own children under that age. Of these children not more than three of the children are under three years of age and of these, not more than two are under two years of age" (Alberta Family and Social Services, 1989, DH-04-02-01).

Regulations regarding provider standards

The provider must:

- ➤ "be at least 18 years of age;
- ➤ hold or acquire a valid first aid certificate in child care;
- ➤. have a warm, confident manner, good communication skills and be accepting of individual differences;
- ➤ like and understand children:
- be able to give children affection;
- be energetic, flexible and creative;
- be knowledgeable of and willing to increase knowledge of early childhood development;
- > know and be capable of following approved procedures for emergencies, accidents, fire:
- be willing to accept support and direction from the family day home visitor;
- be willing to support parents; and
- ➤ be knowledgeable of good health and sanitary procedures and infection control" (Alberta Family and Social Services, 1989, DH-03-04-01).

Agency responsibilities

Agency responsibilities shall include:

➤ Administration of a family day home service in accordance with standards of performance and care as described in the Family Day Home Program Manual and in the contract with the Department.



- ➤ Recruitment, selection and approval of providers who can meet the developmental needs of children in care.
- ➤ Monitoring, support and training of providers to meet the standards of performance and care, and the terms of the provider/agency contracts.
- Establishment of fee schedules and collection of parent fees.
- ➤ Payment to providers.
- ➤ Placement of children in family day homes in consultation with parents and in accordance with parent and child needs.
- ➤ Ensuring a system of back-up care (Alberta Family and ocial Services, 1989, DH 01-05-01).

Regulations regarding training/education standards

Several references in the Famity Day Home Program Manual are made to training. With the exception o. equirement to hold a valid first aid certificate, no training levels or standards are specified.

The agency coordinator is required to have demonstrated ability and skills in: "training and knowledge in child development and family dynamics" (DH-03-02-01). Coordinators and/or home visitors, "shall have...knowledge of child development and child care," and, "demonstrated ability and skills in...training providers" (DH-03-02-01).

One of the functions of home visitors is to train providers by:

- orienting new providers;
- > ensuring providers have an approved first aid certificate;
- developing individualized training plans;
- in-home training during home visits;
- > sharing newsletters:
- providing literature and study packages;
- referring provider to courses, television shows, conferences, special presentations; and
- conducting monthly workshops (DH-03-02-02).

Other requirements

Requirements regarding other standards for the operation of a family day home programme are described in the Family Day Home Program Manual. They include programme activities, toys and equipment, food and nutrition, and health care and safety.

Funding support

Family day home agencies are able to claim administrative fees for a maximum of six children enrolled and in attendance in a family day home during the month for which the



claim is made and who have not reached their seventh birthday or who are not enrolled in a full-day school programme.

Rates are as follows:

AGES OF CHILDREN

RATE

birth to 35 months

\$103 per month

3 to 6 years

\$ 65 per month

A child care subsidy programme is available to assist low-income families. Subsidy payment is based on the size and income of the family. Maximum subsidy rates are \$280 per child per month, with parents required to pay \$40 for the first eligible child (Alberta Social Services: Child Care Programs, 1989).

An integrated day care programme is available to provide funding support and consultation services to help care for children with special needs.

SURVEY RESULTS

The survey results provide information about the backgrounds and working conditions of approved family day home providers. Information was provided from family day home providers and from agency coordinators. Quotations included with the survey results are taken from comments made by respondents.

Demographic characteristics

All of the providers in this study were female. The majority (87%) were 40 years of age or younger with the largest group (63%) between the ages of 26 and 35 years. Ninety-three percent were born in Canada. Ninety-two percent were married or living with a partner and 91% had children living at home. Seventy percent had children under age six and 67% had children between six to 18 years of age. Eighty percent had lived in their present community for more than two years, and 50% for more than five years. Only seven percent had lived in the present community for less than one year.

Educational background

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I would like to think that my experience as a mother is enough.

I took this job because I wanted to be able to use my formal training.

My primary qualification is that I've had hands-on experience for many years.

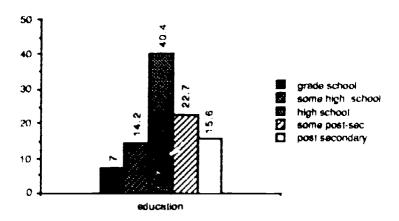


Although having formal education in early childhood development has been my greatest asset, I cannot underestimate the experience gained in being a mother of two.

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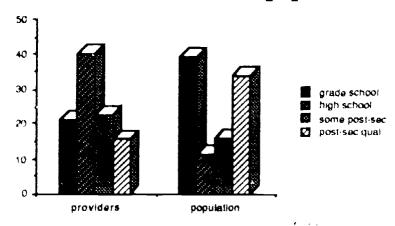
Of the 16% of providers with a post-secondary qualification, six percent had a qualification specific to early childhood care and education. Twenty-three percent had some post-secondary experience and 19% were currently working towards a qualification. Forty percent had high school as their highest level of education and 21% had not completed high school.

Highest level of education: Providers



Agency coordinators reported that seven percent of providers had a post-secondary qualification in early childhood care/education. Fifty-two percent of agencies reported rhat none of their providers had any early childhood qualification. By comparison, 67% of home visitors had an early childhood qualification and 52% of agencies reported that all their home visitors had such a qualification. Fewer private agencies reported that all of their visitors had early childhood qualifications (21% versus 68% of public agencies). Fifty-four percent of agency coordinators held a qualification in early childhood care/education and a further 16% had some early childhood course-work. Five percent of coordinators had no post-secondary experience.

Highest level of education: Providers and Alberta adult population



Population figures from Statistics Canada, 1987.



Work experience

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I haven't been a provider for very long... I'm already reconsidering being involved with an agency.

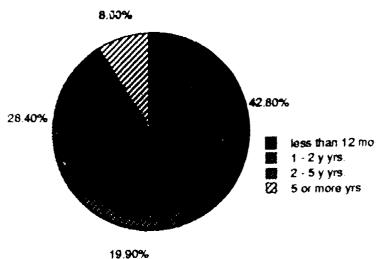
I've been a mother for 28 years, a foster parent for 15 years and now a grand, arent. I enjoy children.

I have spent nine years in the programme. I have enjoyed it but if I could start over I would get a better education and a better paying job.

•

Forty-three percent had worked as approved family day home providers for less than 12 months, and a further 20% for less than two years. Only nine percent had worked as providers for five or more years.

Years of experience as a provider



When asked about their experience in the child care field, many a oviders included babysitting and raising their own children. Including these experiences and their present experience as a provider, the majority had worked with children for approximately five years.

Professional involvement

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There are provider workshops, but most of them are on a personal level and do not deal with looking after children.



The agency gives assistance with correspondence courses.

The agency holds regular workshops with various professionals who provide up-to-date information on child related issues.

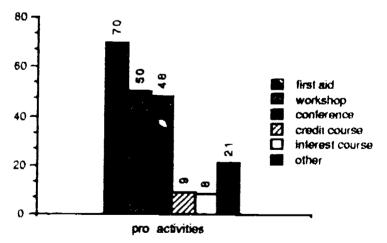
I have received endless support and encouragement from the agency.

I feel it is very well organized for supplies and education.

99

Providers were involved in various forms of in-service training or professional development activities, many of which were supported by the agency with which they contracted. The most common in-service training was the completion of a first aid course (70%). Fifty percent of providers reported attending at least one workshop, 48% had been a delegate at a conference, nine percent had enrolled in a credit course and eight percent enrolled in a non-credit course. Twenty-one percent reported participating in other professional development activities, varying from attending agency meetings to accepting reading materials.

Professional development activities: Providers



A majority of providers (73%) received support from their agencies in many of these activities. Providers indicated that this support was mostly in the form of reading materials (56%), in-service training (50%), and assistance with registration fees (32%). Eight percent received agency assistance with travel and accommodation for professional development purposes.

Ninety-seven percent of agencies reported that they assisted providers with professional development activities. Ninety-five percent provided in-service training opportunities, 90% made reading materials available, 76% assisted with conference and workshop registration fees and 25% paid trave! and accommodation for professional development activities.



In the past 12 months agencies had assisted providers in the following:

CONFERENCE ATTENDANCE - 63% WORKSHOP ATTENDANCE - 83 % NON-CREDIT COURSE - 16% CREDIT COURSE FROM A POST-SECONDARY INSTITUTION - 16 % FIRST AID COURSE - 82% OTHER IN-SERVICE OPPORTUNITIES - 55 %

Income

I can get better money if I babysit privately.

I enjoy being able to care for my own children and also earn an income.

Salary is my main concern. It's hard to buy groceries and pay bills with \$350 a month. I'm a miracle worker and I'm tired of it.

We are worth a lot more than we are paid.

The \$13 a day includes two snacks and a lunch.

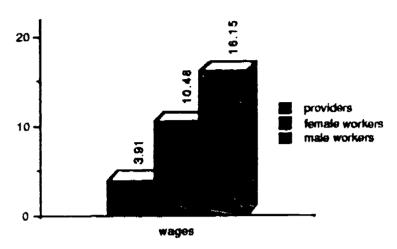
Payments made to providers depended on a number of variables and it was difficult to describe an average or typical income.

Providers were paid on monthly, daily or hourly rates, and these were based on the fees charged to parents, the number of children being cared for by the provider, their ages and their hours of attendance.

When asked to calculate their gross income, providers reported an average hourly pay rate of \$3.91 per hour (\$8 133 annually), with a range from \$1.40 per hour to \$11.40 per hour Sixty-five percent indicated incomes of less than \$4.50 per hour.



Fees paid to providers and wages earned by men and women in the Alberta labour force



Providers earned less than 40% of the average hourly wage paid to women employed full-time in the Alberta labour force and less than 25% of the average hourly wage paid to men employed full-time in the Alberta labour force (Statistics Canada, 1987).

Agencies reported that the average fee paid to providers was \$14.74 per child per day for those who contracted on a daily rate, and \$2.22 per child per hour for those who contracted on an hourly rate. The range of payment on a daily rate was from \$12 to \$20 per child, and on an hourly rate from \$1.70 to \$3 per child.

Sixty percent of agencies reported that they paid providers the same amount the parent paid for the child care services. Forty percent of agencies reported they collected child care fees from the parents and made some deductions before paying the provider. As a result the average fee paid by parents for child care in family day homes is higher than the amount paid to the provider by the agency. The average child care fee paid by parents was \$15.56 per child per day or \$2.26 per child per hour. One agency reported that it did not collect parent fees or pay providers. Fees were paid directly to the providers by the parents.

Providers reported that their pay was based on the number of children in care (89%) and/or on the number of hours the provider cared for children (67%). Financial incentives beyond numbers of children and hours of care were rare. Twelve percent stated that on-the-job experience or level of education affected their earnings. One percent said job performance affected their earnings, while a further six percent received regular cost-of-living increases. Seven percent did not know how the amount of money they received was determined.

The fees paid to providers were also intended to cover the costs of food for the children in care and, in some cases, costs of supplies and materials for the children.

Twelve percent of provioers were the sole income earners in their household. Three percent had no other dependents but nine percent had an average of three dependents (including themselves).

Of the 88% who were not the sole income earners, the average household income was



\$25 000 to \$35 000 annually. Eighteen percent had total household incomes less than \$20 000 per year, and 26% had total household incomes of \$40,000 or more per year. Eighty-one percent contributed less than 25% to the total household income and only four percent contributed 75% or more.

Eighteen percent of providers augmented their provider incomes by working at another job for an average of eight hours per week.

Ninety-six percent of providers reported they were able to claim a variety of workrelated expenses on their annual income tax return. These expenses ranged from household utilities to costs incurred in providing meals and snacks for the children. However, a number of providers indicated uncertainty about their ability to benefit from these exemptions since they did not earn enough money to pay any income tax.

Work benefits

I am receiving no benefits now, but the agency is very good about supplies.

If holiday pay and medical and dental plans were available, it would be great.

When you work anywhere else for four years, holiday pay is included. That's what I miss most.

I lose my children for four months this summer. Is it possible to pay into UIC so there is something to fall back on?

Approved family day home providers are classified as self-employed for income tax purposes and are contracted rather than employed by agencies. One result of this relationship is that few traditional benefits are available to providers. They fall outside the legislation which typically provides members of the labour force with a pension plan, unemployment insurance, paid vacation or vacation pay or workers compensation insurance.

However, 65% of agencies reported that they provided opportunities for providers to purchase various forms of insurance coverage through a group insurance plan. The types of benefits listed by the agencies varied and some did fit the traditional expectation of job benefits - professional development funds, disability insurance, liability insurance, dental plans, extended health care insurance and worker's compensation. The majority, listed by approximately 50% of agencies, consisted of supplying equipment and toys, annual appreciation evenings, picnics, occasional free zoo or theatre tickets, back-up care and in-service education. Three agencies reported that they had attempted to provide benefits but found there was insufficient interest by the providers or that the benefits were prohibitively expensive



Working conditions

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The agency is great. They provide lots of toys and supplies and the providers get together at least once a month.

It's a very stressful job. Wear and tear on my home and toys, high cost of food (with no financial assistance), intrusion on my time (long days and extra kids), stress on the relationship with my husband, planning and implementing play or crafts which are not among my high interests.

I need more support from the agency. Somehow the parents seem to be the main concern and I feel it should be the children.

I feel the demands placed on me by the government are too high considering I make so little.

I've had up to seven children during sub-care situations.

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Eighty percent of providers worked year round, 12% worked for approximately 10 months and eight percent worked less than eight months. All had written contracts with an agency and 46% felt they had significant input into the scheduling of their work hours.

Providers worked long days caring for other people's children. Sixty-five percent normally worked for more than eight hours per day, and a further 10% worked more than 10 hours. The majority of children arrived early in the day (20% before 7:00 AM and 63% before 8:00 AM) and left either late in the afternoon or early evening (46% left between 5 and 6 PM and 20% between 6:00 and 20:00 PM).

Providers reported caring for groups of children ranging in size from one child to eight children. The average number of children cared for in providers' homes, excluding their own children, was 3.74. The average maximum group size, including the providers' own children, was five.

Although providers typically cared for children of various ages, they were more likely to care for children under three years old. Eighty-eight percent of providers cared for an average of 2.1 children under age three (56% for children up to 18 months and 66% for children 19 to 35 months), 78% cared for an average of 1.8 children between three and five years old (47% for three-year-olds, 38% for four-year-olds and 34% for five-year-olds) and 23% cared for an average of 1.6 school-aged children.

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Percentage of providers caring for children: By age of children in care



The majority of providers offered care full-time (83%) and part-time (63%) during the day. However, 23 % provided evening or shift-hour care, 16 % offered weekend care, 12 % cared for children with special needs and 11% provided overnight care.

Professional contact providers had with each other or with agency personnel were varied. Ninety-four percent were visited at least once a month, and these visits lasted an average of 46 minutes, with a range from 10 to 120 minutes. These contacts were confirmed by agency coordinators. Ninety-seven percent reported visiting provider's homes at least monthly. These visits lasted an average of 61 minutes, and ranged in length from 20 to 120 minutes.

Ninety-seven percent of agencies also arranged for providers to have contact with each other. Most formal contact arrangements occurred monthly (70%), three or four times a year (25%) or weekly (5%). They took the form of workshops (92%), newsletters (61%), or meetings (47%). Sixty-nine percent of agencies made telephone numbers available to enable providers to initiate other, less formal contact.

Providers' patterns of contacts with each other differed from those provided by the agencies. Sixteen percent had contact with other providers daily, 28% once per week, 37% monthly and 13% three or four times during the year.

What providers recommended

When asked what they thought would be helpful in improving working conditions and encouraging people to stay in the job, providers listed:

PROMOTING MORE RESPECT FOR PROVIDERS IN TODAY'S SOCIETY - 77% BETTER SALARY - 74 % IMPROVING BENEFITS - 73 % ESTABLISHING A CAREER LADDER - 64% FEELING MORE APPRECIATED BY THE PARENTS - 62 % ONGOING OR CONTINUING EDUCATION - 48 % 11.1 PROVIDING BETTER SUPPLIES - 31%



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Providers with post-secondary qualifications and with specific early childhood training were more likely to recommend better salaries (98% of providers with early childhood and 85% with other post-secondary qualifications versus 68% of providers without post-secondary education), improving benefits (82% with early childhood, 80% with other post-secondary and 61% without post-secondary education) and ongoing education (78% with early childhood, 73% with other post-secondary qualifications and 37% without post-secondary education).

Providers who were younger were more likely to recommend establishing a career ladder (75% under age 35 years versus 36% who were 35 years or older) and feeling more appreciated by parents (75% under age 35 versus 47% who were 35 years or older).

What agencies recommended

Agency coordinators were asked what they thought would be helpful in improving working conditions for providers and encouraging them to stay in the field. They listed the following:

PROMOTING MORE RESPECT FOR PROVIDERS IN TODAY'S SOCIETY -95% FEELING MORE APPRECIATED BY THE PARENTS -92% BETTER SALARY -80% IMPROVING BENEFITS -66% ESTABLISHING A CAREER LADDER -39% PROVIDING BETTER SUPPLIES -36% ONGOING OR CONTINUING EDUCATION -23%

Job satisfaction

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It's very rewarding to know that you make a difference in children's lives. People need to put more emphasis on the importance of providing quality child care.

'Oh, you just babysit,' is a common response when I'm asked if I work. It's hard to keep up self-esteem sometimes.

I require a wage that my child and I can live on.

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Fifty-one percent of providers considered their work as a long-term career, the remainder viewed it as temporary or short-term. Forty-two percent anticipated staying as providers for only one more year and 22% thought they would continue for five years. Providers with two or



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more years of experience were more likely to describe their job as a long-term career than were less experienced providers (71% with two or more years of experience versus 41% with less than two years). Fifty-eight percent of providers with less than one year of experience described the job as temporary.

Providers described their jobs positively. On a scale of 1 to 7 (where 7 perfectly described the job and 1 did not, providers rated their jobs as follows:

IMPORTANT - 6.3 ENJOYABLE - 5.7 DEMANDING - 5.6 **REWARDING - 5.6** PLEASANT - 5.5 SATISFYING -- 5.4 INTERESTING - 5.2 SAFE - 5.1LOW-PAYING - 4.7 EXHAUSTING - 4.7

Eighty-six percent would choose to work as a provider if they could do it all again and 80 % would recommend working as a provider to a friend.

However, they were generally dissatisfied with their pay and promotion opportunities. Seventy-three percent viewed their pay as unfair considering the responsibilities of the job. Eighty-seven percent of providers with a post-secondary qualification versus 63 % of providers without post-secondary education viewed the pay as unfair considering the job responsibilities.

Sixty-two percent thought they were paid less than they deserved. Eighty-seven percent of those with a post-secondary qualification and 64% of those without post-secondary education believed they were paid less than they deserved.

Only 28% thought their pay was fair considering their skills and backgrounds. Seventyeight percent with a post-secondary qualification and 64% without post-secondary education believed the pay to be unfair considering their background and skills.

Sixty-seven percent described their opportunities for advancement as limited, and 30% described their jobs as dead end.

The majority of providers perceived their work as having low social status. Fifty-six percent thought that being a provider was lower in status than other jobs for which they were qualified. Sixty-three percent considered being a provider as lower in status than all other jobs. Provide:s with more formal education were more likely to describe the status as low (77% with post-secondary education) than were providers with a school education (57% of providers without post-secondary experience).



Retention

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I will leave this profession when my own children are adults, out on their own.

I no longer wish to be tied down to routine hours. I've enjoyed the job and might do it again.

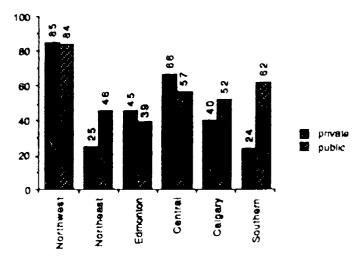
I wanted to stay home with my own children before they went to school.

I started in February and will finish at the end of April.

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Provider turnover rates were high. Across all participating agencies, coordinators reported a turnover rate of 51% within the previous 12 months. Only to 3 percent of agencies reported no turnover in the previous 12 months. By contrast, 13% of agencies reported turnover of at least 100%. The range in turnover rates was zero percent to 150%.

Turnover rates as reported by coordinators: By region and auspice of programme



While reported turnover rates were higher in the N , thwest region, no patterns based on location or auspice were apparent.

Coordinators also reported that individual care-giving arrangements between a single provider and a child typically last less than 12 months in 47% of cases and less than two years in 97% of cases. Only three percent of child/provider relationships last beyond two years.

While there were many reasons for these changes in arrangements, provider turnover was a major contributing factor. Agency coordinators reported that 72% of providers leave an agency within two years. Only 1.7% were reported as staying for five years.

These patterns of attrition, as described by coordinators, were affirmed by statements of

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intent by providers. Forty-nine percent described providing care only as a temporary job and 42% inticipated continuing to provide care for only one year more. Providers with a specific early childhood qualification were twice as likely to state the intention of staying in the field for at least five years than were providers without early childhood (53% with early childhood versus 27% without early childhood).

When asked what factors would be important if they chose to leave their present job, providers rated inadequate pay (77%), their own children suffering (75%), lack of benefits (52%) and lack of job security (48%) as the most important factors.

By comparison, coordinators reported that when providers decided to leave they cited family move (89%), inadequate pay (85%), the birth of a child (75%), job too stressful (69%) and lack of recognition (62%) as primary reasons.

Recruitment

Many lose interest after the initial interview and home study. They decide the programme is not for them.

Very few quality caregivers are willing to stay at home and accept other children into their home.

It is difficult finding providers who will care for infants and toddlers.

Ninety percent of coordinators described recruitment of providers as very difficult (36%), difficult (42%), or somewhat difficult (12%). Only three percent described recruiting providers as easy.

When asked to give reasons for the difficulty in recruitment, agencies cited: applicants did not like the government/agency regulations (28%), poor income (18%), lack of suitable applicants (17%), applicants did not want to care for infants or toddlers (14%), shortage of applicants because the public was unaware of the service (10%), applicants did not want evening or weekend work (seven percent) and other reasons (six percent).

Coordinators rated factors which they considered when recruiting providers. On a scale of 1 to 5, where 1 is unimportant and 5 is very important, they rated these factors as follows:

SAFE ENVIRONMENT - 5.0 LOVE OF CHILDREN - 4.9 CARING PERSONALITY - 4.9 WILLINGNESS TO LEARN NEW SKILLS - 4.8 COMMON SENSE - 4.7 GOOD RAPPORT WITH OTHER ADULTS - 4.4



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CLEAN HOME ENVIRONMENT - 4.4

ACCEPTANCE OF VARYING LIFE-STYLES - 4.3

PREVIOUS EXPERIENCE WITH CHILDREN - 4.2

FLEXIBILITY OF HOURS - 3.8

ADEQUATE EQUIPMENT - 3.6

LOCATION OF PROVIDER'S HOME - 3.4

TRAINING IN CHILD CARE - 3.3

AVAILABILITY OF TRANSPORTATION - 2.7

PREVIOUS EMPLOYMENT OUTSIDE THE HOME - 2.3

Providers' reasons for entering the field mostly concerned their own children and wanting to stay at home. Eighty-one percent wanted to stay at home and look after their own children and 74% needed the money but did not want to leave their home in order to work. Forty-nine percent became providers to provide company for their own preschool children and 26% said there was no other job they wanted to do more. Fourteen percent took the job because they wanted to earn money and their spouse/partner did not want them to work outside the home. Four percent wanted to work outside the home but had been unable to find child care for their own children.

Attitude toward training

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I would consider going back to school if my own children did not need outside care.

Experience and in-service training should also be considered as credible.

I would be annoyed if a training standard was introduced. My experience should be enough.

I have thought about taking the two-year ECS course...but the job's pay is so low it wouldn't be worth it.

I would not take training if it took up much of my time.

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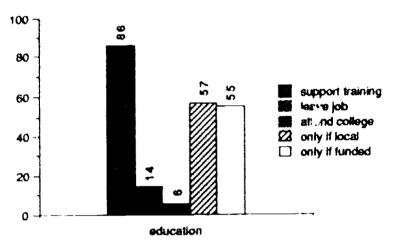
The majority of providers viewed their experience as parents to be their primary qualification for the job (73%). Fifty-seven percent of providers with early childhood training considered parenting to be their primary qualification compared with 83% of providers without an early childhood qualification. A further 18% considered caring for other people's children in



the past as their major qualification. Nine percent considered formal training or education as their primary qualification.

Providers indicated support for training. While six percent would be prepared to leave their present job in order to complete training at a college or university, only 14% would leave their job rather than complete training requirements. Eighty-six percent of providers would complete training on condition it was available locally and did not involve leaving their present job (57%), and/or if they received funding support (55%).

Providers' attitudes toward training



Coordinators also expressed strong support for training. Ninety-eight percent supported training for coordinators, 96 % supported training for home visitors and 85 % supported training for providers.

Ninety-two percent considered that the quality of care for children would be improved if family day home visitors were trained, and 89% thought that provider training would improve the quality of care.

In describing possible types of education, coordinators selected from a number of alternatives:

- > 15% thought that training for providers should be credit courses from a post secondary institution.
- ➤ 85% thought provider training should be offered by the agencies.
- ➤ 55% thought provider training should be specifically in early childhood development.
- ➤ 82% thought provider training should be available in the provider's community.
- ➤ 45% thought provider training should be transferable to a college.
- 61% thought agencies should share the cost of provider training.
- 16% thought agencies should pay the cost of provider training.
- 57% believed training would increase fees.



In contrast, coordinators described the following alternatives desirable for home visitors:

- ➤ 65% thought that training for home visitors should be credit courses from a post secondary institution.
- ➤ 42% thought home visitor training should be offered by the agencies.
- ➤ 53% thought home visitor training should be specifically in early childhood development.
- ➤ 47% thought home visitor training should be available in the provider's community.
- ➤ 66% thought home visitor training should be transferable to a College.
- > 55% thought agencies should share the cost of home visitor training.
- ➤ 26% thought agencies should pay the cost of home visitor training.
- > 57% believed training would increase fees.

Coordinators expressed a number of ideas regarding the content of provider training. Fifteen percent considered training unnecessary and 10 % thought training should be voluntary. Of those who supported training, the most frequent suggestions for content were:

FIRST AID – 57%

CHILD DEVELOPMENT – 55%

CHILD MANAGEMENT – 51%

PROGRAMMING FOR CHILDREN – 48%

NUTRITION – 44%

COMMUNICATION COURSES – 40%

CREATIVE PLAY – 37%

PERSONAL ASSERTIVENESS – 32%

PUBLIC RELATIONS – 15%

Ideas for the form of training varied. Five percent believed that early childhood development certificate or diploma programmes were most desirable. The majority (62%) suggested workshops, seminars or short courses, and 25% thought training should be on-the-job, in the provider's home.



RECOMMENDATIONS FOR FURTHER STUDY

Six major recommendations emerged from the findings of this survey of approved family day home providers. They are limited to ideas for additional studies.

- AN EXAMINATION OF THE PHENOMENON OF FREQUENT CHANGES IN PROVIDER/CHILD ARRANGEMENTS, WITH A FOCUS ON HOW THESE CHANGES AFFECT THE CHILDREN IN CARE, PARTICULARLY THOSE UNDER THREE YEARS OF AGE.
- ➤ This study identified turnover rates in excess of 50 % per year, and caregiver/ child relationships lasting for a maximum of two years. It revealed that the majority of care was provided for children under three years of age and that agencies experienced difficulty in recruiting suitable providers who were willing to care for such young children. Given the increased emphasis on family day home as an appropriate child care option for very young children and their need for consistent and stable care, this area is in need of further study.
- 7 An examination of the relationships AMONG THE PROVIDERS' OWN CHILDREN AND THE CHILDREN IN CARE IN THE PROVIDER'S HOME, WITH PARTICULAR FOCUS ON HOW THESE ARRANGEMENTS AFFECT THE CHIL-DREN IN CARE.
- ➤ This study found that almost all providers have children of the own at home - 70% with preschool aged children. The primary reason to become a provider was that it enabled the mother to stay at home with her own child. Many stated that they were only doing the job until their own child went to school and that a primary reason for leaving the job would be if they felt their own child were suffe ing.
- THAT THE POSSIBILITIES FOR PROVIDERS' QUALIFICATIONS/EDUCATION ARE INVES-TIGATED, PARTICULARLY WITH REGARD TO CONTENT, DELIVERY, SPONSORSHIP AND STATUS (CREDIT VERSUS NON-CREDIT).
- ➤ This study found overwhelming support for provider training from the providers themselves and from the agencies with which they contracted. While there was some difference of opinion about the content and format of



A DESCRIPTION OF THE ADVANTAGES AND DISADVANTAGES OF CONTRACT RELATIONSHIPS AS THEY EXIST BETWEEN THE PROVIDER AND THE AGENCY, VERSUS EMPLOYER/EMPLOYEE RELATIONSHIPS.

- training, agencies agreed that training would improve the quality of care provided. In addition, providers and agencies both identified that the establishment of a career ladder would improve the job and would prevent the high attrition rate.
- ➤ While providers spoke positively about many aspects of the job, including the support they received from agency personnel, much of their dissatisfaction with other job aspects appeared tied to their understanding of the working relationship implicit in contractual arrangements. Because of their classification as 'self-employed' they fell outside most labour legislation. They often worked more hours for less pay and with fewer benefits than would normally be allowed within an employer/employee relationship. There may be many advantages to the status of selfemployment from which providers benefit, however, it would appear that a close examination and reporting of these benefits would assist the field in understanding the compensation providers receive for their services.
- 5 An examination of the problems of provider recruitment.
- In this study all but three percent of agencies described provider recruitment as difficult. Given the reported rate of turnover, contracting with new providers is a time-consuming task for some agencies. Agencies listed several reasons why they thought recruitment so difficult. This study made no

detailed investigation into the phenomenon, however, from the various responses received, it is a problem in need of further investigation.

- AN EXAMINATION OF THE EXTENT TO WHICH CHARACTERISTICS OF PROVIDERS AND THEIR WORKING CONDITIONS (SUCH AS ARE FOUND IN THIS STUDY) AFFECT THE STANDARDS OF CARE PROVIDED FOR CHILDREN.
- ➤ While this study did not attempt to determine if such links exist, several other studies have reported that the education, experience, personal disposition of providers and various aspects of their working conditions are highly correlated to the quality of care which the children receive.

CONCLUSION

This study described some features of the personnel involved in providing family day home care, and of their work environments and conditions. It made no attempt to compare the characteristics of providers or their working conditions with the quality of care provided for children or to child development outcomes.

Providers had fewer years of post-secondary education than the general adult population. Most regarded their experience as parents to be their primary qualification for the job. However, on condition that educational opportunities would not be prohibited by location or cost, the overwhelming majority supported provider training standards. This same level of support was reiterated by the agency coordinators.

Many providers entered the field as a temporary occupation — to combine care for their own children, provide company for them and earn some additional income. This approach to the job, together with perceptions that they were poorly paid, received few benefits and did not receive their due recognition from parents or society, led many to leave the field. Other providers, most notably those who had been in the field for more than two years, were more likely to consider providing care as a long-term career and expressed less concern with opportunities for advancement. However, even though approximately 50% of providers described the job as a long-term career, less than 10% had been in the field for five years.

Although they expressed dissatisfaction with several 'external' aspects of their work, providers considered caring for children to be personally satisfying, describing it as important, enjoyable and rewarding. Many made spontaneous statements of commitment to the children and families with whom they worked. Most appreciated and used support services offered by their contracting agency.

Compensation for providers was poor and included little incentive for them to continue or



to improve their performance. Working conditions, including wages and benefits, were not affected by their level of education, years of experience or their job performance. Typically, providers cared for small numbers of young children for more than eight hours per day and were reimbursed depending on the hours of attendance of each child.

The auspice of the agency – whether publicly or privately sponsored – made little difference to income or working conditions.

While this study did not examine the relationships between provider characteristics and work environment and the quality of care provided for children, these have been noted elsewhere.

In a study which examined the relationships between child care settings, caregiver behaviours and the experiences of 40 toddlers in care, Howes concluded:

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Caregivers who were caring for toddlers under more favourable conditions (that is, with fewer children under her care, working shorter hours and combining less housework with child care) were more likely to use facilitative social stimulation, express more positive effect and be more responsive to the toddler's social overtures, as well as be less likely to be restrictive and negative. In short, such caregivers were better able to provide 'high quality non-maternal care'. More experience and more formal training in child care and child development were also related to 'high quality' care giving (Howes, 1983, p. 106).

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The National Day Care Home Study also found positive correlations between provider training in child development and the attention given to children (Stallings and Porter, 1980). Clarke-Stewart and Gruber (1984) reported that child social and cognitive competence was related to the family day home provider's training and knowledge of child development.

Stuart and Pepper found relationships between providers' personality traits and vocational interests. They found that personal qualities such as nurturance, organization and responsibility were associated with the standards of care provided for children (Stuart & Pepper, 1986).

In spite of these reports and the growth of regulated family day home services, few descriptions of providers, or the children they care for, have been undertaken. In 1980, Bruner, in discussing the difficulties in studying family day home providers, stated, "They operate within their own home and privacy, rightly or wrongly, is inviolable. There are remarkably few studies of any kind based upon observation of behaviour at home" (Bruner, 1980, p. 92).

While regulated family day home continues to grow as an alternative form of non-parental child care and providers play an increasingly important role in the lives of young children, there is a need to identify those personal and environmental characteristics which impact on children in this form of care.



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