

Understanding Quality in Context: Child Care Centers, Communities, Markets, and Public Policy

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Executive Summary

Children’s earliest experiences can have substantial and long-lasting effects on their development. Early care and education can prepare children for school, but while some preschool and child care programs do an excellent job, others are inadequate and some may even harm healthy development. Why is there so much variation, and how can public initiatives help poor-quality programs improve?

While research has told us a lot about key dimensions of quality—for example the role of stable, well-trained staff—and has delineated major barriers to achieving it, we know little about what influences the variation in quality of services, even among programs that face similar challenges. Why can one program provide high-quality services while another, facing similar constraints, cannot? And how can a low-achieving program start on a path toward high performance? Answering these questions could help us make even more effective use of the billions of dollars the United States spends every year to help parents access early care and education services.

This study begins to address that gap by focusing on child care center directors and analyzing how their decisions and perspectives, and the context within which they work, affect the quality of their programs. Through that work, we considered each program’s financial stability, staffing, and reliance on outside standards and licensing requirements. Ultimately, our goal is to identify what supports quality in some centers, what blocks progress in others, and how public policy can do more to ensure that all children get off to a good start.

Defining Quality

Since directors play a key role in shaping their programs, it is critical to understand how they define quality and how they strive to achieve it. For this study, we interviewed 38 center directors about their program goals, vision, and the factors that support or block their efforts to create high-quality programs. The centers they run serve at least some 3- or 4-year-olds and were chosen from four sites—Jefferson County, AL; Hudson County,

NJ; King County, WA; and San Diego County, CA—that varied by population size, income, and poverty rates.

Most directors we interviewed defined quality in terms of achieving certain outcomes for children. Nearly every director said it was important to prepare children for school, though not all listed it as their primary goal. Directors also said good-quality programs help children acquire certain skills, such as general life skills and independence or cognitive, social, emotional, physical, and language skills. Although they agreed generally on these goals, directors differed greatly in the specific skills they believed play a part in school readiness and in the aspects of their program’s environment they thought contributed to achieving those goals.

Directors also mentioned program characteristics as aspects of good quality. Many described the importance of creating a program where children felt accepted and loved—an environment like home. Others described quality in terms of excellent teaching practices, though they differed in their philosophies on when learning should take place (“all the time” or at specific instruction times), whether teachers should direct or facilitate learning, and what makes a good curriculum. Most directors also brought up their center’s indoor and outdoor space, classroom materials, supplies, equipment, and food and nutrition in their vision of a quality program. Different views on safety, health, homework, enrichment activities, and the ability to address special needs also came up, though less frequently.

Many directors also described particular teacher characteristics, educational attainment, and training as aspects of an ideal program. Some emphasized that a high-quality program supports its teachers. Some described quality as supporting families, encouraging parent involvement, or keeping parents happy. At the same time, many directors expressed frustration at the disparity between parents’ goals and the center’s goals.

What does this tell us? To better grasp how directors differed in their views of quality, we considered their descriptions along a hierarchy of children’s needs. This framework is based on Maslow’s hierarchy of human needs, which states that fundamental needs (e.g., safety, survival) must be met before higher-level needs (e.g., esteem, aesthetics) are addressed. In the same way, some directors were primarily focused on ensuring the children in their care were safe, while others focused more on children’s cognitive and esteem needs.

We also considered where directors’ ideas about quality came from and how they used those beliefs to guide their decisions. Some directors described following their intrinsic beliefs and making decisions based mainly on their instincts and personal experiences. Others were learning more about child development pedagogy to inform their personal experiences. A third group had already integrated new knowledge with their intrinsic beliefs. Later, we connect these program and director development stages to observations in the classroom.

Characteristics with Connections to Quality

In addition to in-person interviews, we collected data through classroom observations, measuring quality with the Classroom Assessment Scoring System (CLASS) and the Early Childhood Environment Rating Scale, Revised (ECERS-R). Together, these two measurements give us a picture of the interaction between teachers and children, as well as the materials and activities available in the classroom.

Centers with observed classrooms that were comparatively high quality, according to the CLASS and ECERS-R scores, had certain characteristics in common. Classrooms in centers with directors who focused on children's higher-level needs tended to have higher scores than classrooms with directors who emphasized safety or other basic needs. Also, classrooms with higher scores were more likely to be found in centers with directors whose decisions reflected an integration of their intrinsic beliefs with other learning than in centers with directors who described decision making based primarily on instinct or experience.

We also found that high-scoring classrooms were in centers with relatively less financial strain and that went above and beyond standard licensing requirements. These programs also had high expectations for teachers and emphasized staff wages, benefits, and professional development.

Staffing

Directors agreed that teachers play a key role in child care and education programs, but they differed in how much and what they expected of staff. Directors with high expectations looked for teachers with certain skills, knowledge, and performance in classroom practices and child outcomes. These directors were also more likely to have a high level of confidence in their staff. Other directors' expectations were more basic. They looked for teachers who could keep children safe and who would get along with the director and other staff. These directors often expressed a lack of confidence in their teachers' abilities and motivation.

We generally found that classrooms with the highest observation scores were in centers where directors had high expectations and a high degree of confidence in their staff. Directors with high expectations helped their staff by developing personal relationships with them, providing backup, supporting professional development, and compensating them well. Directors with basic or lower expectations of teachers were less likely to have these supports in place. In some centers, low expectations could be the result of limited resources or limitations in the labor force itself. Some directors felt they could not afford the supports needed to recruit, develop, and retain staff that would meet higher expectations.

Financial Stress

Although money does not guarantee high-quality child care or education, better-quality services often cost more. While classrooms with high observation scores tended to be in centers where directors felt financially comfortable (or pinched but with higher resource levels), not all financially stable programs were among the highest quality classrooms. Money counts, but not for everything. Classrooms with the lowest observed quality were typically in centers with directors who described a lot of financial stress. However, not all centers that appeared to have relatively limited resources had directors who described high levels of financial stress. Some programs with limited resources had directors who described a more moderate level of financial strain, and many of these had classrooms that achieved at least mixed or middle-level observation scores.

Several variables affect financial strain, including demand for child care services (low demand can lead to underenrollment), the size of the program (centers serving more children can take advantage of economy of scale), and access to funding beyond tuition and subsidies (such as free space and other in-kind donations). Also, programs that can charge more for their services or that receive higher payment rates for subsidized children are less likely to feel financially pinched.

A center's financial stability is also related to the director's scope of responsibility for budgeting and financial decisions, as well as his or her approach to setting and collecting fees. Owners also can influence a center's financial situation. Some directors struggled with the expectation that they generate a profit for outside owners who were not directly involved in the day-to-day program operation.

Standards

Mandatory and voluntary standards can help child care centers ensure they are meeting children's developmental needs. Directors differed in which standards they used to guide their operational decisions and how much they relied on those standards.

Most directors were required to meet licensing standards. Some felt licensing standards helped them reach their goals; others rejected the standards as irrelevant, costly, or burdensome. Some directors had mixed reviews on licensing, while others were fairly neutral and many reached for higher standards to guide their decision making. The way directors perceived and responded to licensing or voluntary higher standards was also shaped by the nature and degree of technical assistance available and by either direct or indirect funding requirements.

Centers with the highest classroom observation scores often went above and beyond licensing standards and relied on programmatic guidance from other sources. Classrooms with the lowest scores, however, were in centers that depended heavily on

licensing standards or struggled to meet them. Some looked to external standards, but could not achieve them. In general, centers constrained by their boards of directors, scarce resources, and limited labor supply had directors who aimed for lower standards. Centers with fewer constraints had directors who targeted higher standards.

Policy Implications

Numerous public policies and initiatives support early care and education, but wide variation still exists in quality of care across centers. Knowing more about what influences quality can help policymakers strategically target public funding and initiatives.

In exploring the factors shaping child care quality, we identified two overarching themes running through our findings and their implications. First, many factors are involved in achieving excellent care. Improving quality is not an easy equation, and each program faces unique constraints and barriers. This finding suggests that there may be a number of untapped opportunities for supporting quality in child care and that there is not a one-size-fits-all solution. Also, policies aimed at improving quality need to consider the issues comprehensively rather than focus on a single factor.

We also found that improving quality is a developmental process. Like Maslow's hierarchy of human needs, centers as organizations also have a hierarchy of needs. Centers must first meet their own safety and survival needs (e.g., financial stability) before addressing more complex goals, such as adopting best practices that go beyond licensing requirements. Directors in the lowest quality programs were often struggling to keep their doors open and meet basic licensing standards; setting higher expectations for staff or services was not their most urgent priority.

Based on our findings, we suggest a number of recommendations for policy and practice:

- ***Address multiple factors that influence quality.*** Many initiatives focus on a single issue, but quality arises from a combination of factors. Centers receiving funding through the Abbott Preschool program, in particular, offer strong evidence that comprehensive interventions can be consistently successful across directors with a broad range of backgrounds and skill sets. The Abbott program combines high funding with universal availability (thus high demand), strict standards and extensive technical assistance to address multiple factors related to quality care.
- ***Identify obstacles to quality improvement.*** As we observed, some directors facing underlying obstacles could not take advantage of assistance or incentives to move their programs to the next level. Initiatives to improve quality will be more effective if programs identify and overcome these barriers first.

- ***Tackle resource constraints.*** Our findings suggest it is not just the level of revenue that matters to centers, it is also how effectively directors minimize their financial stress through effective management of revenue and related constraints. Technical assistance providers can help directors improve their financial management skills and identify opportunities to maximize revenue or in-kind resources.
- ***Recognize the role that directors' leadership skills and belief systems play in shaping quality care.*** Our study shows that directors' traits and beliefs about quality influence their decisions. We recommend targeting directors' leadership skills and helping them recognize and confront the weakest aspects of their programs. Also, technical assistance may be enhanced by more emphasis on helping directors integrate their intrinsic beliefs with outside information about good practice.
- ***Help directors establish and improve supports for teachers.*** In our study, programs with the highest observation scores tended to be run by directors with high expectations for staff who allocated resources to support them. Examining and improving initiatives that help directors support teachers can help improve the early childhood labor force. Also, it is important to continue promoting the view of early childhood teachers as professionals.
- ***Build on program standards.*** Most directors we interviewed used standards to guide their decision making. In the view of directors, standards set important minimums, leveled the playing field among programs, and helped directors make decisions and explain those decisions to staff and parents. Thus, building on and improving program standards can help directors enrich their programs. Targeted technical assistance could go beyond enforcing requirements to help centers identify and overcome barriers to meeting standards.

The findings from this research and the related recommendations have implications for various policy efforts. Quality Rating and Improvement Systems are well positioned to address many needs identified in this study. Training, technical assistance, and mentoring programs could be strengthened by the understanding of obstacles centers face in taking advantage of such programs. Funding sources, including vouchers for families and state prekindergarten programs, can benefit from understanding the implications of financial stability on director decision making. Finally, the research points to several areas in which relatively new initiatives—such as those targeting leadership in early care and education and exploring how individual readiness to change affects learning—could help even more child care programs achieve even better things for children and families.

Chapter One

Introduction

and Study Design

A growing body of evidence indicates that focusing on the quality of early care and education can have benefits for children, families, and society. For example, advances in neuroscience have established that a large amount of brain development happens in the years before children enter school, making it especially important to attend to experiences in the early years. Other research supports this idea, finding that the quality of children’s early experiences—including those in child care and early education settings—predict their later development (see Adams, Zaslow, and Tout 2007 for a review). Further, policymakers look to early care and education as a key mechanism for addressing persistent gaps in school readiness, school achievement, and later life outcomes among children from different racial and ethnic groups and from families with different economic status.

In 2005, over 7 million children under age 5 in the United States were in nonparental care or education programs (U.S. Census Bureau 2008).¹ Among 3- to -5-year-olds in nonparental care, a majority is in center-based preschool or child care. Despite this widespread use of center-based care and education, many programs are not of sufficient quality to support children’s healthy development. Specifically, large-scale studies in differing geographic regions suggest that much of the care in the United States falls below a rating of “good” on widely used observational measures, and that 10 to 20 percent of child care settings have overall ratings of quality low enough to be potentially harmful to children’s development (see Adams, Zaslow, and Tout 2007 for a review).

Numerous public policies and programs have been implemented to help address some persistent shortcomings of the early childhood system and ensure that all families have access to high-quality early care and education. On the demand (parent) side, federal Child Care and Development Fund (CCDF) vouchers are used to help families pay for care with any legally operating provider. Many states also use CCDF and/or state funds for child care resource and referral services, which can influence the demand, and

therefore the supply, of care by providing information to parents about available options and factors to consider in choosing care.

On the supply (provider) side, several initiatives—such as Head Start, federal CCDF funds administered through a contract mechanism, and state pre-kindergarten programs—offer direct financial support to programs and often include higher standards as a condition of participation. Publicly funded initiatives also subsidize child care and early education programs by offering funding and technical assistance to help improve the care. For example, many states have initiatives offering scholarships to teachers to help them take college courses, grants for early care and education providers to help them improve facilities and equipment, and/or mentoring programs to help individuals or programs identify and address areas for improvement. Finally, public policy influences the supply of early care and education services through regulation. State licensing requirements establish a minimum threshold for basic health and safety and sometimes address other aspects of the program that potentially influence children’s physical, cognitive, and social-emotional development.

Although the United States spends billions of dollars to shape and support early care and education services, remarkably little information is available about the full range of factors influencing the demand for—and the supply of—high-quality care. Further, given the evidence that the early childhood market persistently produces quality that is not sufficient to yield widespread, consistently positive child outcomes, more information is clearly needed about the full range of factors influencing quality. Also, more information is needed about how these factors interact to yield a certain level of quality.

For example, we do not sufficiently understand how a shift in one factor—such as reducing consumer budget constraints by providing vouchers—may be impeded by other constraints—such as a limited supply of teacher labor or inadequate information among parents about the characteristics of care that influence child development. To really improve the system of early care and education, we must unpack the whole picture of supply and demand. Only then can we understand and attend to the un- and under-addressed factors that preclude the more widespread production and use of high-quality early childhood services.

This study begins addressing this gap in our knowledge. There are many different ways to go about better understanding the range of factors that shape child care quality. This study focuses on center directors, to better understand the potential mechanisms through which directors may influence quality and to explore directors’ views of how various factors support or inhibit their ability to deliver high quality services. The premise of this approach is that directors are—as Bella and Jorde Bloom (2003) refer to them—“gatekeepers to quality.”

Directors are responsible for (among other things) identifying and managing revenue sources, budgeting, hiring, motivating staff, and setting general expectations and

tone in a center. Although they are subject to numerous constraints as they work toward their programmatic goals, directors as decision makers, leaders, and managers are in a strategic position to shape child care quality. Thus, this study was designed to explore how directors of early care and education programs perceive their goals and constraints and how their decisions about what to supply intersect with key demand characteristics and constraints.

The purpose of the work is to better understand how and why there is such variation in quality across different early care and education programs. We ultimately seek to identify areas in which public policy and spending might have the largest possible effect. We also seek to identify innovative approaches to better support and maximize the effectiveness of ongoing initiatives designed to improve the quality of early care and education.

Research Questions and Conceptual Framework

The study is designed to address three broad research questions:

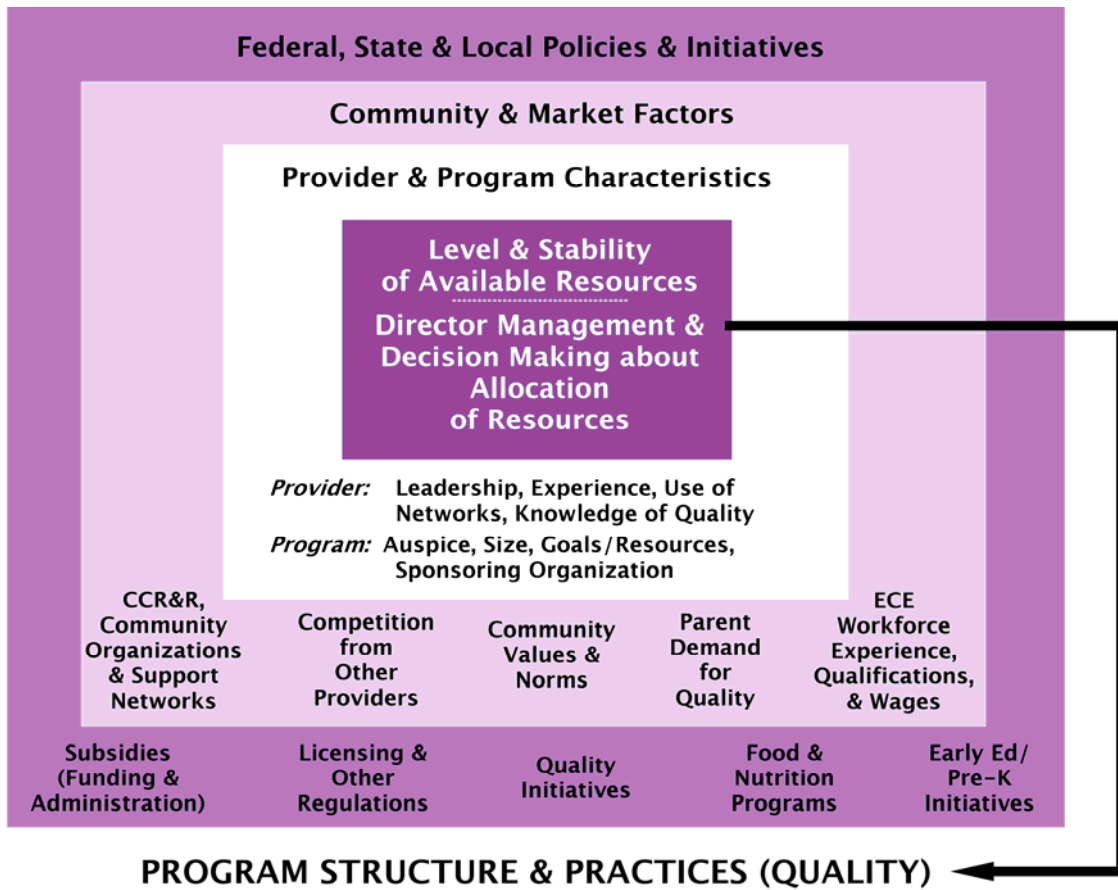
- How do child care center directors conceptualize—or define—good quality?
- What key sets of factors come together to facilitate the production of better quality in some centers, and which factors (or sets of factors) impede improving quality in other centers?
- How can public policies and initiatives better address the full range of factors that shape the quality of early care and education?

The conceptual framework shown in figure 1 was used to guide the research design, data collection, and analysis. The framework assumes that observed quality in a particular center is directly related to an interaction between the level and stability of available resources, and director decision making about how to allocate the available resources. Resources are broadly defined to include financial, human, capital, and in-kind supports. In turn, the available resources and director decision making about resource allocation are influenced by a complex set of factors including the following:

- *Director characteristics*, such as leadership style, relevant experiences and influences, knowledge, vision of quality, other goals, and connections to support systems.

- *Program characteristics*, such as organizational goals, program size, resources available through affiliations with other organizations, and decision-making authority given to director.
- *Community and market factors*, such as parent demand for quality and ability to pay, extent of competition with other providers (in both staffing and enrollment), the pool of available labor, and the presence of child care resource and referral and other community organizations or provider support networks.
- *Federal, state, and local policies and initiatives*, such as funding assistance to parents delivered through vouchers, funding assistance (including state preschool or pre-kindergarten) delivered through contracts with programs, licensing and other regulations, accreditation, the Child and Adult Care Food Program, and quality initiatives.

FIGURE 1. Conceptual Framework Guiding the Research



Better understanding how these individual factors shape the quality of care—and how they interact—can offer useful insights for designing public policy and related strategies. Consequently, this research seeks to identify key factors that can strengthen the potential of early childhood programs to deliver high-quality services and key barriers that undermine programs’ ability to do so. The goal of the study is to provide information that can help public policy better address the factors that help programs deliver good services and the obstacles that limit the effectiveness of initiatives targeted at improving quality.

Study Sites

The research was conducted in

- Jefferson County, AL (Birmingham);
- Hudson County, NJ (Jersey City);
- King County, WA (Seattle); and
- San Diego County, CA.

These sites were selected from among areas in which we conducted previous research on child care providers and the subsidy system (Adams and Rohacek 2008). Conducting the study in these communities allowed us to build on the substantial contextual knowledge gained through our prior work. The study counties were originally selected to ensure variation in early childhood system characteristics such as child care voucher reimbursement rates (which may also stand in for fees charged by providers), availability of pre-kindergarten programs, use of contract funding mechanisms for programs, stringency of licensing regulations, and the proportion of subsidized families relying on different types of care.

Beyond varying according to early childhood system characteristics, the counties also differ on such demographic characteristics as population size, income, and poverty rates (see table 1). This variation in characteristics across the four counties allows us to explore the relationships between these (and other) contextual factors and provider decision making about quality-related inputs.

Methods

The study relies on a qualitative cross-case analytic design. Miles and Huberman (1994) note that a primary task of qualitative research is “to explicate the ways people in

TABLE 1. Demographic Characteristics of the Study Sites

	Jefferson County, AL	San Diego County, CA	Hudson County, NJ	King County, WA
Number of children under 5 years old	45,386	221,458	39,851	115,039
Population under 5 years old (%)	6.9	7.4	6.7	6.2
Children under 5 living in poverty (%)	27.0	15.7	19.2	14.0
Median earnings ^a (\$)	29,234	31,919	31,855	38,087
Population unemployed ^b (%)	7.2	5.8	6.9	4.5
Population living in a rural area (%)	10.7	3.9	0	3.7
Land area (square miles)	1,112	4,200	47	2,126

Sources: 2007 American Community Survey (ACS) 1-Year Estimates (first five rows); Census 2000 Summary File 1 (SF 1) 100-Percent Data (population in rural areas); and U.S. Census Bureau: State and County Quick Facts (land area).

^a Individual earnings over previous 12 months among those age 16 or older with at least some earnings (inflation-adjusted 2007 dollars).

^b Civilian and noncivilian population age 16 or older.

particular settings come to understand, account for, take action, and otherwise manage their day-to-day situations” (p. 7) and that qualitative data “often have been advocated as the best strategy for discovery, exploring a new area, developing hypotheses.” (p. 10) Cross-case analysis involves comparing patterns across cases to increase the potential for generalizability and to enhance understanding of the relationship between context and individual characteristics and behavior.

Thus, the cross-case analytic design offers a strong methodology for the questions addressed in this project, including how do directors understand quality and support good-quality services, and how does the context in which directors operate influence their behavior and programmatic quality? These questions, and the approach, address an aspect of quality (the directors’ outlook, vision, and perceptions) that is often not studied directly.

Key features of the approach include

- *in-depth interviews* with center directors that follow a semistructured protocol covering key topic areas but also allowing a great deal of flexibility for the director to talk about what she or he finds important;
- *classroom observations* guided by widely accepted observation tools that, taken together, yield a well-tested, objective, and multidimensional picture of quality; and
- *a large sample* for a qualitative study (38 centers) chosen to obtain wide variety in program context and quality.

Instruments

Primary data collection included in-person interviews with center directors and classroom observations. The observations explore how quality varies across classrooms, while the interviews with directors explore why quality varies across classrooms. Details about each data source are provided below.

Center director interviews

The in-person center director interviews were guided by a semistructured interview protocol designed specifically for this study and included in appendix A. These interviews sought to gather information from directors about

- program goals;
- vision of quality; and
- factors supporting or impeding the production of quality.

An additional goal of the interviews was to explore the directors' views of certain community, market, and policy factors as well as to identify strategies directors employed to achieve their programmatic goals.

Before finalizing the interview protocols, four pilot interviews were conducted with center directors in Washington, D.C., and northern Virginia. The results of these pilot interviews were used to refine the interview questions and procedures.

Classroom observations

Two instruments measuring somewhat different aspects of the classroom environment were used to guide the observations. Both instruments have been widely used to measure quality for the purpose of research and for technical assistance. The Classroom Assessment Scoring System (CLASS) includes 10 items and three subscales that evaluate quality by the level of emotional support, classroom organizational structure for learning, and support for cognitive and language development (Pianta, La Paro, and Hamre 2008).

To complement the CLASS, the data collected during the observation also included 23 items that form three subscales of the Early Childhood Environment Rating Scale, Revised (ECERS-R). These items measure quality through space and furnishings, activities in the classroom, and program structure (schedule balance) (Harms, Clifford, and Cryer 2005). Together, the CLASS and ECERS-R document the materials and activities available in the classroom and the interactions between teachers and children.²

Sampling

Data were collected from 9 to 10 centers in each site with a total sample size of 38 centers. Given the research goals—and as is typical for a qualitative design—the sample drawn for this study was purposive. That is, rather than being randomly selected, individual sample members were chosen based on their characteristics. Although this sampling approach diminishes the statistical representativeness of the results (which is the basis of, for example, conclusions about the prevalence of centers with specific characteristics), purposive sampling can enhance the likelihood of collecting data that represent the full range of different experiences in the population. For this research, the chosen sampling approach facilitated a more complete exploration of the varied relationships among the factors in the conceptual framework than would have been possible with a randomly selected sample.

Goals

The primary sampling goal was to maximize variation on key elements in the framework among the population of providers most likely to offer services to full-time working families of young children. Although limited by the data available on the study population, the purposive sampling procedure was designed to reach as many different types of providers as possible. Specifically, we sought to ensure variation on the following factors (not all of which could be definitively evaluated before selection):

- observed quality
- accreditation and licensing status
- auspice (for- or nonprofit and affiliations with other organizations)
- parent demand for care and ability to pay
- sources of subsidized funding
- teacher qualifications
- program size

Sampling frames

The population for this study was limited to centers offering full-time care (at least 40 hours a week) to children under age 5 and at least some children of preschool age (3- or 4-year-olds). In addition, the population was limited to centers enrolling at least some children whose costs are paid by parents or through child care voucher programs. However, because of the prevalence of subsidies funded through certain contract mechanisms in New Jersey (the Abbott Preschool Program) and California (General Child Care or State Preschool), the sampling population in those states did include programs funded through those contract-based programs. Centers exclusively serving special populations (such as homeless children, children with special needs, or backup care when regular

arrangements fall through) or exclusively funded through other contract-based funding mechanisms (such as Head Start) were excluded from the sampling population.

To achieve the sampling goals, two sampling frames derived from different sources were constructed for each county. The first frame was made up of centers that completed a survey for the Child Care Providers and Child Care Voucher Programs study in 2003. To increase the likelihood some of the highest quality programs in each county would be included in the research, a second sampling frame was constructed to supplement the first. The second sampling frame was developed by contacting early childhood experts in each the community and asking them to nominate programs that were, in their opinion, among the highest quality. The protocol used to request these nominations and additional information about this process is included in appendix B.

Overview of sampling procedures

As described earlier, the sampling objective was to yield centers with the widest possible variation in program goals and strategies for meeting those goals. To that end, we sought to select a sample within each county that included lower-quality and higher-quality programs, with some of each type located in lower-poverty and higher-poverty areas. Also, whenever possible, we attempted to balance the sample in each county with centers that varied in rural, suburban, or urban location and other programmatic characteristics. Based on those objectives, the sampling procedure involved the following steps within each of the four study counties:

- defining geographic clusters of providers
- selecting clusters from which to sample
- identifying programs to recruit for study within clusters (six centers per county from survey sampling frame)
- identifying programs to recruit for study within clusters (four centers per county from nomination sampling frame)

Additional details regarding these steps are presented in appendix C.

Sample recruitment and participation rates

All centers selected for the sample were sent an advance letter, informing the director about the research and indicating that someone might call to request their participation in the study. Directors were then contacted by phone, informed about the study procedures, and asked to complete screener questions confirming their program met the sampling criteria. Programs meeting the sampling criteria were asked to participate in the research. Given the burden involved in study participation, we offered programs a two-part incentive that included \$50 in cash and a \$100 gift certificate to an early childhood supply company.

When directors agreed to participate in the study, we scheduled a date and time for the interview and the classroom observation. Directors agreeing to participate in the research were sent a letter confirming the date and time of the visit and were also called a day or two before the visit with a reminder. If directors did not agree to participate in the study, or did not meet the sampling criteria, the next program identified for recruitment within that cluster was contacted.

In all, we attempted to contact 63 directors. Of these, we did not reach three, and three centers were ineligible for the study because of the age of children in care or the hours during which services were provided. Of the 57 eligible directors we were able to reach, 67 percent agreed to participate in the research.

Data Collection Procedures

In each county, field data were collected during weeklong site visits that included two Urban Institute staff members. In two counties in which centers had to postpone our visit just before it took place, we rescheduled and returned to the county over two days to complete the interviews or observations. Data were collected between January and April 2009.

Interview procedures

To maximize continuity in the interview procedures across cases, one staff person conducted all the in-person interviews with directors. We scheduled the interviews at the most convenient times possible for the directors, offering to conduct the interviews during the early morning, afternoon, evening, or weekend. All directors opted to complete the interviews during center business hours.

Most interviews were completed with one respondent, the center director. In some cases, directors requested that someone else—such as an assistant director or a regional supervisor—attend; consequently, about 6 of the 38 interviews included more than one respondent. In two cases, the assistant director participated in the interview instead of the director. In one of these cases, the assistant director was responsible for day-to-day program operations. In the other, the director had a family emergency and suggested we instead interview the assistant director; this assistant director was thoroughly informed about the center and able to address the topics in which we were interested.

All the interviews took place at the sampled centers. Most interviews were about 90 minutes long, but they were as short as 50 minutes and as long as two hours. We asked directors to arrange for the interviews to take place in a relatively quiet area, in which the director would be comfortable speaking freely and honestly. Given the length of the interviews, we allowed for interruptions as needed for the director to address urgent management tasks. In some cases, there were no interruptions during the interviews,

while in others, directors occasionally answered telephone calls or worked with staff who came in with questions. Although these interruptions did affect the flow of the conversation, they did not appear to affect the quality of the data collected (center directors are clearly skilled at multi-tasking!).

With the agreement of the respondents, all the interviews were recorded. However, directors were free to ask us to turn off the recorder to say something off the record. Only a few directors requested that we briefly turn off the recorder. The information shared during the times directors asked for the recording to stop did not substantively affect the findings and is not reported here.

Observation procedures

Three field staff conducted observations for this study with one person conducting about half the observations in each of the four sites and two additional people conducting about half the observations in two sites each. For both the observation instruments, all three staff attended a centralized, intensive training sessions led by expert trainers. Observers were trained to reliability with master coders for the CLASS measure and conducted a series of pilot observations to ensure inter-rater reliability at accepted levels for both the CLASS and the ECERS-R.³

Classroom observations were scheduled to begin in the morning before the start of the day's main group activities. In some programs, the observation period began just as the teacher and a majority of children were arriving; in other programs with early wrap-around care in which only some children were present in the early morning, observations began after many children had arrived but just before the start of the morning activities.

Within certain parameters specified by the study design, center directors chose the classroom that was observed. We asked to observe a "3-year-old classroom," but because of variations in center sizes and classrooms structures, some observed classrooms included only 3-year-olds while other classrooms included a range of mixed-aged groups (for example, only 3- and 4-year-olds or 2- through 5-year-olds). Researchers observed the chosen classes for approximately three hours, following the children and staff as they moved through their daily activities, including movements from one classroom to another and between indoor and outdoor play areas. Observers followed the protocols and procedures for both instruments, including restricting their interactions with staff and children to preserve objectivity and attempting to remain as unobtrusive as possible.

Additional procedures specific to each instrument are described later in the observation results section of this report.

Data Analysis

Although we referred to numerous sources to guide the analytic plan for the study, Miles and Huberman (1994) served as the primary source for developing and refining the analytic strategy. Key steps we followed included these seven:

- Transcribed interviews.
- Scored observation measures. Categorized classrooms according to quality relative to the rest of the study sample (yielding three groups).
- Conducted individual case analysis, yielding a narrative (based on director report) for each case summarizing the key factors influencing the quality of the services delivered in the center.
- Coded interviews for key themes identified through the individual case analysis. Also coded key themes from study's conceptual framework.
- Within the key themes (e.g., directors' view of systems of standards), reanalyzed interview data to identify categories according to which cases differentiated themselves.
- Constructed a case-ordered predictor outcome matrix, arraying the quality category against the categories defined for each key theme. This yielded a theory regarding how various combinations of factors were associated with the quality categorization.
- Refined and verified. For cases that did not fit the theory, we returned to the interviews to identify factors that appeared to account for the exception and refined and expanded the theory accordingly. Finally, we returned to the individual interviews to verify that the theory continued to have relevance and explanatory power across the full set of cases.

Strengths and Limitations of the Research Approach

As is the case for any research method, the approach selected for this study has certain strengths and limitations. Looking at strengths, in-depth interviews permitted a rich exploration of the beliefs, experiences, perceptions, and concerns of center directors. The cross-case approach allowed us to explore differences across directors and how these differences might be associated with the context in which particular directors operated.

In addition, the mix of observation and interview data—and the large number of centers purposively sampled for the research to maximize contextual variation—helped overcome several hurdles typically faced by qualitative projects. For example, studies that draw inferences from promising or successful programs often lack a contrast with lower-quality programs, making it difficult to know whether the findings are relevant for the lower-quality programs. In this case, the selection approach and the classroom

observations led to the successful enrollment in the study of programs with a very wide range of quality.

Another hurdle faced by some qualitative projects is small sample size. Because of the number of centers involved in this research, and because the interviews reached a saturation point (in which later interviews repeat, rather than add new information to, earlier interviews), we can be confident that the results reflect much of the range of experiences of center directors in the study communities. The sample size also increased the potential for successfully comparing themes, and patterns of themes, across cases.

Despite the strengths of the qualitative cross-case research method and other aspects of the study design, the research faces several key limitations. First, the interviews were conducted only with the center director, rather than with other staff, board members, or community members. Thus, the results can only be based on what the director perceived, not on other perspectives. Clearly, other stakeholders might see the world differently. Second, the observations of quality were conducted in only one classroom per center. When there was more than one 3-year-old classroom, the director chose the room to be observed. Although this would introduce errors in cases in which the classroom we observed was exceedingly atypical of classrooms in the rest of the center, the most likely error would be a general positive bias in the observation results (i.e., directors likely chose the classroom they were proudest of).

Third, like other qualitative research, findings from this work should never be taken as indicating frequency of a particular phenomenon. Thus, for example, the number or proportion of directors whose vision of quality we report falls into a particular category does not represent the proportion of directors in the overall population whose vision of quality falls into that category. Rather, the goal of the research is identify what the range of categories (or themes) might be and to develop hypotheses about how the themes might relate to quality.

Finally, the results suggest links between different parts of the conceptual framework but do not support definitive conclusions about the directions of influence. For example, if directors who report less financial strain are also in centers in which the observed classroom was of higher quality, the causality could be in either direction (or both). That is, less financial strain (as perceived by the director) could be the result of offering higher-quality care (perhaps because the higher-quality center can charge higher fees) or it could be the reason the center can offer higher-quality care (less financial strain may reflect having sufficient revenue to fund the costs of quality).

Sample Characteristics

Because we were interested in drawing as complete a picture as possible in approaches to achieving—and obstacles to—quality, we selected centers for the research to obtain sample variation on a range of characteristics. The final sample of child care centers was diverse, varying along several dimensions including enrollment size, funding sources, ages served, for- and not-for-profit status, licensing status, and faith-based and other affiliations. A summary of sample characteristics is below.

The sample included large centers serving over 200 children and a small operation in a converted house serving only 20 children. While the sampling criteria required that centers serve at least some 3- and/or 4-year-olds, many also delivered services to younger and older children; about half the sample served infants younger than 12 months old, and nearly three-quarters served toddlers between 1 and 2 years old. Most centers were caring for a relatively small number of infants and 1-year-olds. A majority (62 percent) also served school-age children.

The centers in the study ran the gamut in organizational and financial structure. Half the directors reported having a for-profit tax status and half reported a not-for-profit tax status. The sample included a program affiliated with a national chain serving thousands of children in hundreds of sites, centers that were part of local chains (some for-profit, some not-for-profit), and independent single-center ventures. Half the sample (19) included stand-alone centers that were not affiliated with (or operated by) any other organization. Of the remainder, 1 program was part of a national chain, 3 were part of a local chain of child care centers, 6 were affiliated with a nonprofit organization that either operated other early care and education programs or delivered other family services or supports, and 9 centers were affiliated with a church or other faith-based organization. Although five of the faith-affiliated centers were located in Alabama, at least one center in each study county was affiliated with a church.

As a result of the sample design, the programs included in the research were located across the spectrum of socioeconomic settings. As such, the centers received funding from diverse sources. Twenty-eight of the 38 centers in the sample had at least some children whose fees were paid with voucher-based subsidies (most often CCDF-funded vouchers but also locally funded voucher programs), and 7 of those were also serving children through a contract-based funding mechanism (Abbott Preschool in New Jersey or State Preschool or General Child Care in California). Of the remaining 10 centers, 3 were primarily funded through a contract-based mechanism, and 7 were not caring for any children whose services were paid for through a government-funded program.

The interviewed directors were a heterogeneous group. However, all the directors we interviewed were women. In a handful of cases, men were among the others involved in day-to-day operations that joined the director for the interview. The directors

in this study came to their positions with varied backgrounds; 9 directors had been in their current position for over 20 years, while 3 had been in their position less than a year. The average tenure in their current position among the directors we interviewed was 13 years. Most directors also had previous experience as an early childhood teacher, and some had experience in elementary education.

The directors we interviewed also had different levels of educational attainment. Of the 36 who reported on this topic, about 25 percent had an associate degree, 45 percent had a bachelor degree, and 15 percent had a graduate degree. Among the remaining 15 percent of the sample who did not report holding a college degree, all but one director had completed some college coursework. Of those with college degrees, slightly over half held degrees in early childhood education and 6 held degrees in elementary education. The remaining directors held degrees in subjects including business, marketing, vocational home and family studies, social studies, criminal justice, nursing, and general education.

Although the sample represents a diverse cross-section of center-based programs offering full-time services to 3- and/or 4-year-olds, it is important to emphasize that the sample is not representative of the populations from which it was drawn. Statistics (such as those presented above) are reported to help readers understand the characteristics of the study sample and cannot be generalized to the populations of centers in the sites involved in the study. Further, although we believe that the qualitative findings can inform understanding of early childhood systems beyond the four study counties, this should be done with caution and with consideration of differences in local contexts.

Report Structure

The report relies heavily on quotes from directors to illustrate key findings. Given this purpose, quotations were edited to enhance readability, as suggested by Kvale and Brinkman (2009). Specifically, certain elements—such as repetitions, pauses, “umms,” and extraneous words (e.g., “you know” or “like”)—were generally omitted unless they seemed integral to the meaning or interpretation of what was being conveyed by an interviewee. Likewise, some quotations are presented with undocumented minor alterations to correct grammar for the purpose of improving ease of comprehension. Finally, when a quotation required more extensive editing to improve readability, we used certain conventions including ellipses (...) to indicate omitted speech and parentheses to indicate a word or group of words replaced with a synonym or words added by the report authors to enhance understanding of a respondent’s meaning.

The next four chapters present the research results. Chapter 2 of the report includes data about how the directors we interviewed define—or think about—quality. Chapter 3 presents the results of the classroom observations in which we assessed quality as

measured through the CLASS and selected items from the ECERS-R. Chapter 4 explores what we learned from directors to explain the variations in observed in classroom quality. Specifically, chapter 4 presents findings related to the key policy, market and community, and director and program factors associated with variations in observed quality. The chapter also includes information about the strategies that directors use to support their programs and overcome constraints to improving the quality of care. Finally, chapter 5 outlines some potential implications of the results for policy and practice.

Chapter Two

Good-Quality Services: The Vision of Center Directors

Directors of early care and education programs play an important role in shaping program quality. Invariably, a director’s ideas about what is important can influence management decisions, what takes place in the classroom, and, ultimately, children’s outcomes. Bella and Jorde Bloom capture this idea in their references to directors as “gatekeepers” of quality (2003).

Thus, one key to understanding why observed quality differs across centers involves exploring how directors define quality and articulate programmatic objectives. Most research on this topic involves comparisons across stakeholders and typically finds both overlaps and discrepancies in how various stakeholders—including researchers, program staff, parents, and children—define good quality (Ceglowski 2004; Tanner, Welsh, and Lewis 2006). These and other authors (e.g., Katz 1999) suggest that considering the perspectives of all stakeholders is an important step in developing sustainable services that effectively support children and families.

Research studies and external standards (such as in licensing, accreditation, and quality rating systems) related to quality often focus on elements of care that are specific, easily measured, and that show associations with child outcomes. When directors in this study talked about their visions or definitions of quality, certain aspects of their definition aligned with these other sources. Other aspects of directors’ definitions of quality focused on objectives reflecting much broader principles of care than are typically addressed through research and quality standards. Some directors were readily able to explain what they needed to put into place in the classroom in order to achieve these broader goals, while others seemed to have more difficulty identifying the high-quality methods or practices important for achieving their goals.

This chapter of the report describes how directors in this study defined quality. There are two sections in the chapter.

- **Key elements defining quality.** The first section presents the key themes or elements making up directors' definitions, or views, of quality. The themes that emerged from the interviews fell into the following topic areas: child outcomes, program characteristics, teacher characteristics, and goals related to parents. This section of the chapter focuses on the individual elements defining good-quality services that directors mentioned during the interviews.
- **Differences in overall vision of quality.** The second section of the chapter explores differences that emerged in directors' overall approaches to defining quality. In contrast to the first section of the chapter—which presents specific characteristics of quality mentioned by directors—the second section looks at directors' view of quality more broadly. That analysis relies on two frameworks that proved useful in identifying and explaining variations in directors' visions of quality. One framework considers the comprehensiveness of child-related objectives in terms of Maslow's hierarchy of needs (Maslow 1943). A second framework, based on the work of Brownlee and colleagues (2000), considers whether directors inform their intrinsic beliefs about child development with a theoretical knowledge base and use this integrated understanding to guide program practice.

Key Elements in Directors' Definitions of Quality

The primary source of information about directors' definitions of quality was responses to one or more of the following questions. These questions, or similar versions, were asked at the beginning of each interview.

- Could you start by telling me a little bit about your program?
- What are your program's primary goals?
- There are many different views about what good quality is. What is your vision or definition of a good-quality program?
- What are the pieces of the puzzle that have to be in place to meet your goals (or achieve your vision of quality)?

Findings on directors' views of quality were also drawn from responses to other interview questions, but only when the responses clearly reflected directors' definitions or views of quality. Directors generally defined quality in terms of four dimensions.

- **Child outcomes.** Good-quality programs are those that help children acquire certain skills or achieve certain outcomes (school readiness, general life skills and independence, or cognitive, social, emotional, physical, language, or other skills).

- **Program characteristics.** Good-quality programs have certain process or structural characteristics. Characteristics most frequently mentioned by the directors with whom we spoke included how the program feels to children, teaching practices, curriculum, materials and physical environment, food and nutrition, and others.
- **Teacher characteristics.** Good-quality programs require good staff. Directors described certain character traits, education and training, and supports for staff as important elements of quality.
- **Goals related to parents.** Good-quality programs meet the needs of parents who want or need to purchase care for their children (typically in order to work), support parents in other key ways, involve parents in the center or with their children's learning, or simply keep parents happy.

Within each area, certain goals were mentioned in broad terms by many directors. For example, most shared a goal of preparing children for kindergarten. Most also believed that good staff is a key element of quality. There was more variation in whether directors mentioned parent-related goals as part of their vision of quality.

Despite expressing common views when speaking broadly, directors differed substantially in how they specifically defined quality. When describing detailed personal visions, directors varied both in what they hoped to achieve in their programs and in the elements they felt needed to be in place to achieve those goals. These differences can lead to variations in the decisions directors make about resource gathering and resource allocation, and therefore to variations in observed quality.

The next sections of the report offer additional details about how directors described their definitions of quality, organized according to the four dimensions listed above.

Child Outcomes

One key theme of the interviews was that most directors defined quality, at least in part, as achieving certain child outcomes. A large number of directors mentioned school readiness as a key programmatic goal. Directors also frequently discussed child outcomes related to general life skills and independence, cognitive development, and social-emotional development.

School readiness

Nearly all the directors reported working to prepare children for school. Most seemed motivated by an understanding that children's transitions to kindergarten can be academically, behaviorally, emotionally, and socially challenging. For this and other

reasons, many directors explained that school readiness was a central programmatic goal. While some directors described school readiness as a wide-ranging set of developmental achievements, others concentrated their description of school readiness on specific aspects of development.

Among directors focusing on certain aspects of development, several mentioned “academics” as a central component of school readiness. One director summed up this philosophy by saying

It's very, very difficult... in the social aspect when they hit public schools. So I think [it's better] if they're okay with their academic [skills] so they can only focus their first month [on] making a new friend and being able to achieve that. Because if they're not well in their academic part and they're not well in their social part, it's a very frustrating transition for them.

Directors who defined school readiness in terms of academic skills generally described this as the acquisition of certain types of knowledge such as color, letter, and number recognition.

Although directors rarely mentioned fine motor skills, at least one talked about the importance of teaching children to hold a pencil the “right way” and how to work with scissors. This director viewed these skills as academically important because, in her view, if they were not perfected, a lack of these skills could impede children’s school performance.

Other directors strongly emphasized certain self-regulatory skills—including sitting still, focusing, waiting in line, and learning to raise a hand and wait to be called upon—as important aspects of school readiness. For example, “It doesn’t matter how well they know the alphabet or can read.... If they can’t listen to the teacher and sit down when the teacher needs them to, and follow directions, they’re going to be behind.”

General life skills and independence

Although many directors mentioned school readiness as a goal, some directors’ primary focus involved child outcomes or life skills more generally. One director described this type of wide-reaching, child-outcome-oriented goal as follows:

Developing children to survive as adults, preparing them now, and giving them the foundation and the knowledge and the understanding that they need to [be able to] focus and to become healthy young men and women. We believe that giving the foundation here in preschool and prekindergarten will set some standards within them that they will have in their hearts. And [the children] will apply them long after they've left here.

Also in this category, some directors described their center as intently focused on helping children be independent. However, the concept of independence differed from basic life skills (such as helping children learn to feed and dress themselves), to helping children make decisions for themselves, to intellectual, social or emotional independence.

Cognitive and language development

In terms of cognitive outcomes and language development, directors mentioned, for example, wanting to give children the foundation they need for reading, wanting children to learn about the world, and teaching problem-solving skills. In centers where many families did not speak English, directors often described English-language skills as one of their primary goals for children.

Social-emotional development

When mentioning social-emotional outcomes after being asked to define program quality, directors discussed helping children develop interpersonal, conflict-resolution skills, self-confidence, moral values, and an understanding of how to be polite and respect others. Many directors also mentioned that a good-quality program is one in which children “are happy.”

Program Characteristics

Although directors typically began their definition of quality by describing the child outcomes they wanted to achieve, they also discussed specific program characteristics they felt were important aspects of good quality or important for reaching desired child outcomes. Some characteristics mentioned by directors—such as how the program feels to children and teaching practices—reflected the process within the program, while others—such as curriculum, space, and materials—reflected the structure of the program. Additional details about the characteristics of the program or center that directors mentioned as part of quality are presented below.

How the program feels to children

Many directors talked extensively about their goals or definition of quality in terms of the feelings they wanted children to have in their center. Some examples of the words directors used to characterize the experience they wanted children to have included “know they’re loved,” “they’re accepted no matter what culture,” “this is a place where they belong,” “knowing you’re going to be taken care of,” “feel safe,” and “have fun.”

Some directors described a good-quality program as one in which teachers treat children as if they were their own, saying, for example, “It’s also nurturing that child, bringing that child up the way we would... (as) if it was ours. We try to treat these

children like they are ours.” Another director shared this idea as she explained how she communicates her expectations to staff:

You could be the uncle or aunt of that child. How would you feel if you were to walk into a place and [the children] were being talked to in a certain way or treated in a certain way? You would be livid, and it might not even be your kid. Imagine how [parents] would feel. And I tell [the staff], “You take an oath when you come into this place and you promise that when they [the parents] are gone, this is how you’re going to treat their kids.”

Finally, some directors expressed a desire for the environment to feel as comfortable as “home.”

Teaching practices

In describing their vision of quality—or the pieces of the puzzle that have to be in place to achieve their desired outcomes—directors often touched on their ideas about how children learn and develop. Directors’ ideas about appropriate or effective teaching practices varied. These differences came out in several different ways during the interviews. In some centers, they played out as variations in whether teachers were seen as responsible for directing versus facilitating children’s learning. In some centers, they played out as different philosophies about when learning and instruction were to take place. Finally, in some centers they played out in directors’ ideas about a good curriculum’s contribution to quality.

- ***Teacher-directed versus child-directed activities.*** The directors with whom we spoke had clear ideas about the classroom structure and activities that would most effectively facilitate learning. A majority of directors emphasized the importance of allowing children’s interests to shape classroom activities and lessons, both on a moment-to-moment basis and over time. Directors in this category also explained that, in their view, high-quality early childhood programs understand that individual children learn and develop differently and take individualized approaches to supporting healthy child development.

Other directors with whom we spoke described quality in terms that included more emphasis on teacher-directed activities, typically with the goal of ensuring the achievement of certain cognitive milestones. For example, one director expressed this idea through a comment about parents who refused to do homework with their children saying, “If I’m going to get stuck on doing colors and basic shapes [when I deliver instruction], because there’s no reinforcement from home, there’s only so much as an educator... that I can do.” Others in this group talked about quality in terms of having at least some portions of the day in which children sit down and teachers teach and expressed frustration with the emphasis on play found in some curricula.

- ***Time for learning.*** Related to the differences we observed in how much directors emphasized teacher- versus child-directed activities in the classroom were differences in how directors thought about the times of the day during which children learn. In describing their vision of quality, some directors explained the importance of capitalizing on every moment—including circle time, meals, free play, transitions, and outdoor time—for learning. In contrast, other directors described certain portions of the day, year, or week as set aside for teaching or “program time” and the importance of setting aside other portions of the day for just playing and having fun. Finally, some directors also mentioned that high-quality programs need to operate for enough hours to give children a sufficient amount of support while others mentioned concern regarding children who spent long hours in care.
- ***Curricula.*** Although many directors mentioned curriculum as an aspect of program quality, definitions of a “good” curriculum varied, often in relationship to a director’s sense of the right balance between teacher- and child-directed activities. A director using the Creative Curriculum described its benefits by saying it is, “non-stressful, nonjudgmental, not so structured that the kids feel bogged down... they’re learning through their play.” In contrast, a director using the A Beka Book curriculum thought it was good because it provided structure, workbooks, and worksheets that she saw as important teaching tools. Other curricula mentioned by directors included Tools of the Mind, High Scope, Montessori, and curricula developed by local school districts.

Some directors felt their program was strengthened by not using a “canned curriculum.” However, many of these directors emphasized that they used a curriculum developed internally, often borrowing from what staff learned through classes, training, and their previous experience, as well as from what they saw as best practices in existing curricula. Finally, some directors indicated that their program’s curriculum choice was either influenced, or wholly determined, by the requirements of a funding source such as the Abbott Preschool Program in New Jersey or Department of Education–contracted programs in California.

Materials, supplies, and equipment

When describing their vision of good-quality care, most directors gave at least a passing mention to classroom materials, supplies, or equipment. For the most part, directors discussed materials and equipment in the context of supporting specific developmental skills. For example, one director said they had tricycles and manipulatives to improve gross and fine motor skills. Another director described needing books, paper, and crayons to support early literacy skills. As one director explained, “The first part [of quality] is providing a fun learning environment. And the types of things that we need... are the supplies, being able to have the art, science, and the supplies and stuff that will help [children] develop their cognitive ability.”

Beyond describing the materials they thought were important in a high-quality classroom, several directors stressed the importance of the quantity or specific features of the materials and equipment. For some directors, having “enough” of everything was important. A few directors emphasized that materials and equipment should be fun and exciting for children noting, for example, that they used equipment like computers “to get [children’s] attention,” “fascinate,” and “engage.” Others mentioned materials should be “age appropriate.” Some centers used curricula in which some of or all the necessary papers and learning tools were prepackaged.

One director noted that it is important to make use of the materials, saying,

To me quality is having them [materials] out and used. I’ve been to places where they have wonderful materials and I look at them and those books have never been opened. They’re sitting on a shelf and they look nice when somebody comes through, but they’re not being used.

Finally, the directors with whom we spoke frequently mentioned the important role of teachers when talking about classroom supplies, materials and equipment. One director said that having materials of sufficient quality was not only important for supporting good child outcomes, but also important for keeping staff happy. Another director noted that good outcomes come from “good teachers with good materials.” Also, some directors also described the importance of ensuring teachers have the skills to use available materials to achieve the desired effect.

Others saw classroom materials as tools to help children direct their own learning. Directors who viewed classroom materials in that way often emphasized needing diverse materials so children had choices and could create and explore for themselves.

Physical space

Some directors also mentioned certain characteristics of physical space as an aspect of good-quality care. Among directors mentioning physical space as a part of quality, many talked about space for gross motor play. For example, one director said,

Our motive for staying [in this location] is the incredible space that we have. It is unbelievable. We have really nice yards with classrooms that are attached to them that are perfect for young children. That’s the main motivation.

Another director noted,

There’s so much sitting [these days]. And we don’t encourage kids to get out and run around. So for me that fact that we’re on the playground... as much as we can be is great.

Still other directors conveyed their sense of the importance of gross motor space by mentioning a new playground, outdoor equipment, or an indoor gross motor space at the top of their wish lists.

In terms of indoor space, some directors indicated the role of space in quality as they described efforts to use their space in the most effective way possible. One director explained the benefits she saw after dividing one larger room into several separate classrooms saying, “It was chaos when we had all the kids together ... everything works much smoother now.” Another director talked about space in terms of consistency, imagining what would happen if the rooms changed and “the children find everything in a different position. You would have chaos in that classroom.”

Food and nutrition

Another program-specific aspect that at least some directors thought was part of quality involved food and nutrition. Some directors emphasized food as a vital basic need met by their programs. For example, one director said, “My kids will eat, no matter what. If I don’t pay utilities, or it comes out of my pocket, my kids will eat.” Beyond that, however, some directors specifically noted that their meals and snacks contributed to their program’s quality. One such director noted, “The food, and the smells, and all of that are a big part of our program.”

Directors differed in the aspects of food they felt mattered. Some emphasized they had “hot meals.” Others described their meals as good because they were “well balanced” or “healthy.” Still others felt it was important to serve food that was culturally “familiar” to the children. Finally, some directors mentioned that they always made sure there was enough food so children could eat as much as they wanted.

Other program characteristics

Directors mentioned a host of additional program features and activities as part of quality, though less frequently and in less detail than the elements described above. These are briefly outlined below.

- **Safety.** Some directors described safety as a basic element of quality, saying things like, “I’d rather be closed than endanger a child” or emphasizing that it was important to make sure that children were always supervised.
- **Health.** Directors who mentioned health as an element of quality typically mentioned it as an explicit goal for children. When defining quality, some directors also mentioned the importance of cleanliness and hand-washing.

- **Addressing special needs.** Some directors discussed screening, referrals, and individualized services for children with special needs as an important part of what they offered to children and families.
- **Enrichment activities.** Numerous directors viewed enrichment activities—such as dance, music, gymnastics, computer classes, and swimming classes—as valuable for children and families. Directors also talked about field trips as an important aspect of their program. Centers serving higher-income parents typically offered these activities for an additional fee. Centers serving predominantly lower-income parents either offered these activities as their budget allowed, or their directors described very much wanting to be able to offer enrichment activities.
- **Homework.** The directors who mentioned homework when talking about quality were sharply divided. Some saw homework as important, either for encouraging parents to engage in their children’s learning or as crucial for moving learning forward in the classroom. Other directors spoke strongly about a belief that homework was not appropriate for children not yet in kindergarten.

Teacher Characteristics

Teachers clearly have an important role in determining the nature of the services delivered in early childhood programs. Accordingly, most directors mentioned staff as a central element of good-quality care. For example, when asked about her vision of a good-quality program, one director replied “I have some definite thoughts on this one. It starts with the staff. It starts with your teachers.”

As with other elements defining quality, however, directors differed substantially in their perspectives about the specific characteristics defining good staff. Features directors used to describe good teachers generally fell into three categories: disposition, training and education, and having certain types of support from the center.

Disposition

Directors often described staff’s contribution to quality as specific character traits or dispositions. In this area, some comments directors made in response to being asked about their vision of a good-quality program included, “I like teachers that are creative and get the job done,” and “Teachers should be friendly, loving, caring and, nurturing.” Directors also described good-quality care as having staff with “enthusiasm” or being “excited about what they’re doing,” “commitment to the field,” an “ability to provide instruction to children,” and who “know what appeals to children and how to work with a team.” In some cases, directors described these characteristics as important because they differentiated teachers from being “just babysitters.”

These traits were clearly, and often, very important to directors. But this presented a problem for many programs because, by nature, disposition is difficult to evaluate with certainty during a standard application and interview. One director explained this in detail when discussing part of her definition of good quality.

A teacher that cares about children. And when I say deeply cares and loves children, I truly mean that in the sense of caring enough to look out for their well-being and their learning. And sometimes we have teachers who can say they do that, and they just show it on the outside but when it comes to a child, sometimes they don't have it to give all the time. And you have to give all the time.

Many directors reported evaluating disposition based on a feeling about candidates saying things like, “A lot of times you’ve just got to kind of get a feel for them when you interview them.” Some directors described acting on general impressions while others discussed approaches they used to try to increase the likelihood that newly hired staff would have the desired disposition. Some of these strategies are presented in box 1.

Education and training

Many directors also mentioned education and training as part of their perspective on quality. For at least some directors, education or training served as an indicator of some traits outlined above. For others, education or training was a proxy for other skills that directors felt were important to achieving their desired child outcomes. One director noted that in her view, “loving children” is not sufficient. This director explained that part of her vision of quality is to

Make sure that we have trained teachers. We don't just take teachers who love children. It's nice to have people who do love children, but they do have to have credentials. And that makes all the difference.

Although many directors mentioned “trained staff” as an important part of a good-quality program, they had different perspectives on the type and amount of training needed. Some directors thought good quality requires more training than mandated by licensing. However, many directors who mentioned the importance of trained staff were largely indicating agreement with the training requirements specified in state licensing regulations. A director explaining her view of training as part of the “nuts and bolts” of a good center said,

First of all, lots of training. You have to provide lots of training for the staff. You have to let them know what is expected out of them, and give them the tools to produce that.

Rather than, or in addition to, training, some directors specified that a good-quality program needed “educated” teachers. One director described why she thought teacher education was important:

Having teachers that have backgrounds in early childhood education that know how to actually utilize the supplies in a way that will help their children develop. Because it doesn't matter what type of supplies you have, if the teachers aren't using them properly, the children will not learn. It's just that simple.

Box 1. Strategies Directors Use to Assess Disposition of Job Candidates

A large number of directors reported that good teacher performance in the classroom depends on certain personal characteristics associated with liking, respecting, and relating to children. Some directors, however, reported challenges around accurately assessing this when hiring. One director noted, “I thought I was a good judge of character, but I've learned different.” To address this type of challenge, directors described various strategies they used to evaluate the skills and attitudes of job candidates, including the following.

- *Probationary period.* Prospective or new hires spend time teaching under observation before a job offer is final.
- *Written questionnaire.* Candidates provide written endings to a list of statements such as “When a child cries...” or “Children are wonderful, but...” or “Children are naughty because...”
- *Asking directly.* Do you like children? Do you like families?
- *Hiring staff with children of their own.*

Support from center

Finally, some directors emphasized that their vision of a good-quality program included teachers who had support and incentives from the center. One director mentioned that it is important to have “a commitment to developing teachers.” Another director put support for teachers at the core of her ideas about good quality:

First of all, children are at the front of it all... but second... our board's mission and our board's work is all about making a place that is really rewarding to teachers as well. We have a very good benefit package. Our wages are good for the field, but our benefit package is probably stellar. We are one of the only centers who has not cut our benefits for medical and dental... They get a week [off] at Christmas, plus three weeks [of vacation or sick time] after their third year, two weeks for when they first start. They get a mental health day every three months... we pay for training... We do bonuses twice a year.

Although directors discussed the support they offered to teachers over the course of the interview and clearly viewed these issues as important for achieving their goals, it was relatively rare for directors to bring up these issues when initially asked to define good quality.

Goals Related to Parents

Many directors mentioned issues related to parents as an aspect of quality in their centers. This played out in three related ways. First, directors often described supporting parent employment, or other family needs, as a key program goal. Second, directors mentioned parent involvement in the center and in their children's learning as an aspect of quality. Finally, some directors described quality in terms of doing what is needed to keep parents "happy."

Supporting or assisting parents

Supporting or assisting parents was a frequently mentioned program goal among the directors in this study. They described several different types of family supports including delivering a service so parents maintain employment; connecting parents to community resources, offering general emotional support, and helping parents better understand child development and children's needs. In general, directors seemed to view parent support as an important part of successfully supporting children's development. One director summarized this viewpoint in saying,

The child is not separate. The child is part of the family.... If you support the families, you're supporting the child.... You're creating what you're looking for, basically, a good environment for that child to be in.

Most directors clearly viewed their services as important for helping maintain parental employment. One director described her program's goals by saying, "I want to be here for parents that... have to go to work." Another director built on that viewpoint, saying, "We want to enable [parents] to be able to take care of their children financially by providing them a healthy and safe place to keep their children." Some directors more specifically sought to help parents by offering affordable care.

Beyond caring for children so parents could work, many directors described other goals related to supporting parents. One director explained,

We're just providing something that these families need, too. We want to make sure that we are an asset to them as parents in terms of supporting them, encouraging them, sometimes teaching them a little bit about age-appropriate things with their children and expectations and ways to handle problems and that kind

of thing. We often are a connection to the community for them, doctors, and to the public schools for early intervention.

To this end, the directors in this study described varied formal and informal supports including those designed to help parents learn English, pursue further education, meet their families basic needs, develop advocacy skills, and better meet their children's developmental needs.

Some directors seemed to view delivery of parental supports as an aspect of quality or as important for achieving the program's goals for children. Others seemed to view them as more fundamentally helpful in keeping children enrolled in their program. For example, some directors felt that helping families with parenting skills helped reduce conflicts with parents and enrollment turnover.

Parent involvement in center or with their child's learning

Parents' involvement in the center or with their child's learning was another aspect of quality mentioned by numerous directors during different parts of the interviews. Some directors talked about parent involvement with their children's learning when they were asked about their vision of quality. Others talked about parent involvement when asked about key supports on which the program relied to achieve its goals, such as this director, who said

The parents help us pretty well, too... We go on trips. They volunteer to go. [We're] always trying to encourage [parents by saying], "You're always welcome." And sometimes they'll come in... and we encourage them to bring books to read to [the children]. And they go from class to class.

Finally, some directors brought up insufficient parent involvement when asked about key obstacles to achieving their goals.

Directors offered several different explanations of the value that such involvement added to the program. Most often, directors either indicated that parent involvement allowed the center to offer certain activities or experiences for children that they otherwise could not, or they indicated that parent involvement was valuable in helping ensure that parents and the center shared similar goals and approaches for supporting children's development.

One director described how and why the center attempted to connect children's time at home with activities in the classroom:

We have bags we send home... and in that bag goes [the equipment, ingredients, and book]... and a little card of instructions that say... bake the muffins together and enjoy the muffins and the story together.... So look at all the things you get. You get a parent involved who can't come during the day.... The parent has a

chance to participate, have an idea of what's happening [in the classroom]... So you've got the child participating with the parent, and you've got a link that's going back through the school.

This theme—the importance of the center and parents having shared goals and approaches—was relatively common. One director explained their program worked on

really focusing on the child and the family and having families, of course, be involved in as much of the planning process as they can, but certainly in the assessment and in setting goals for their children. And trying to build that bridge between what's important at home and what's important at school. So our families are required to participate in the program... their input is really valued and really critical for our success.

In contrast, other directors were more frustrated by a disparity between what the center was trying to accomplish and parent views.

I would actually like to see parents being more involved with the children in the education. Right now, they just feel that it's a babysitting service and [they tell their child], "You're staying with Miss M," and then they walk out. That's not what this is all about. We're here to teach [the children]. But if the parents could read off the same sheet of music with us, that would be a lot better for the children.

Making sure parents are happy

A final parent-related aspect of quality that many directors mentioned had to do with offering emotional support or generally making sure parents were happy. Some directors described this goal as part of, or in addition to, a focus on other supports for parents and on parent involvement. For other directors, particularly those who described challenges with parents, the idea of making parents happy (or limiting conflict) appeared to be their primary parent-related goal.

One way that this played out was as a desire to ensure parents felt at ease with the center. As one director explained,

Quality day care is what happens when the parents walk in. They should be able to talk to me, smile. If they're sad, I should be able to say something that will lift their heads up. I make sure when they leave [to say], "Have a great day" [or] "Be careful out there, don't forget it's raining, it's slippery."... I want them to come in knowing that if their children are crying, I'll say, "Oh, come on to me. Mom has to go to work," something that they will feel relaxed in leaving their children with me.

When making operational decisions, the director quoted above also considered the impression that the center was making on parents. For example, as she described her expectation that every teacher pitch in when help is needed, this director noted,

Every now and then, when I hear a baby cry... I need to go in and see why he's crying a little bit too long. I can see that because [the teacher] is changing [one] baby, she can't hold [the other baby]... But as a parent, if I walk in, it doesn't look good... I have to think as a parent... [and I ask the teacher] "Can I help?"

Other directors who were primarily concerned with ensuring parents were happy described supporting parents by not burdening them with too much negative information about their children. For example, this director said,

I tell the teacher, "When parents come in, don't talk about how bad their children are being every day. They don't want to hear that. These are babies. You take care of it. Give [the parents] some encouragement."... I want to be supportive and encourage [parents] more.

Summary

The sections above outlined some key elements constituting directors' views and vision of quality. In general, most directors in the research shared common goals related to preparing children for school and creating an environment that would achieve those goals. Most directors touched on some aspect of child outcomes, program characteristics, teacher characteristics, and goals related to parents as they articulated their vision of quality. However, directors differed greatly in the specific skills they viewed as related to school readiness and in the key aspects of the environment they thought were important in achieving those goals. The next section of this chapter steps back from the specific elements making up directors' definitions of quality to explore some primary differences across directors in their vision of good-quality services.

Differentiating Directors Based on Overall Approach to Defining Quality

The themes described in the previous section offer details about directors' definitions of quality. However, looking at individual components does not offer a clear image of how directors differed in their overall visions of quality. Consequently, we felt it was important to also conduct analyses that would allow us to categorize directors in terms of their views of quality when multiple elements were considered simultaneously.

Because directors mentioned numerous combinations of quality-related characteristics—and frequently used key words such as “school readiness” that had different meanings for different directors—a clear pattern across quality elements did not initially emerge. However, as we looked more closely at the interview details (including variations in meaning behind some of the key words and other context from the interview data), we noticed patterns of differences in directors’ visions of quality that corresponded to two different frameworks in the literature on human motivation.

The first framework is based on Maslow’s hierarchy of human needs (1943). The second framework, based on the work of Brownlee and colleagues (2000), looks at the role that intrinsic beliefs and external knowledge—and the integration of the two—play in shaping directors’ definitions of quality. Findings related to each are discussed below.

In chapter 4 of the report, these frameworks are used to further explore the associations between directors’ views of quality and classroom scores on the CLASS and ECERS-R observation measures; these frameworks are also used to better understand the relationships among various factors related to differences in observed classroom quality. Ultimately, exploring directors’ definitions of quality through these frameworks suggests a developmental process. This developmental perspective on directors’ conceptions of quality may serve as one consideration in designing a range of quality improvement strategies that effectively meet the differing needs and capacities of individual programs and directors.

Describing Directors’ Views of Quality in Terms of Children’s Basic Needs

Maslow’s hierarchy of needs (1943) has been applied to various social problems and settings and is considered universally applicable to different cultures. Here, we use an adaptation of the hierarchy to reflect directors’ differing expectations about what children should or will primarily receive, learn, or accomplish in their centers. Maslow’s original theory of motivation suggests five levels of basic human needs:

- physiological (or survival),
- safety,
- love/belonging,
- esteem, and
- self-actualization.

Later adaptations of Maslow’s work incorporate two additional levels (cognitive and aesthetic needs) just below self-actualization.

Maslow asserted that higher-level needs (i.e., esteem, cognitive, aesthetic, and self-actualization) emerge only as lower-level, or more fundamental, needs (i.e., survival, safety, love/belonging) are relatively well satisfied. For example, it is difficult, perhaps impossible, to focus on acquiring knowledge and understanding (cognitive needs) if one feels afraid or uncertain (safety needs). Similarly, it is commonly accepted that good physical health and development is a precursor to healthy cognitive development. Although Maslow's theory was originally developed as a theory of self-motivation, because children are reliant on caregivers to meet their basic needs, it is useful to consider the programmatic features that address each level of need and to categorize centers according to the needs on which they seem to focus.

In other words, one factor that may explain differences we observed in the quality of care (as measured through the CLASS and the ECERS-R) are differences in the basic human needs that programs are trying to address. Thus, for each interview, we coded the child outcomes—and justifications for specific programmatic practices—directors mentioned according to the level of human need being described. Based on that analysis, each director was categorized according to the highest need level predominantly emphasized in their definition of quality.

Table 2 presents a basic definition of Maslow's levels of need and offers examples of how directors' descriptions of specific aspects of quality, or programmatic decisions, aligned with those levels. In most cases, directors who were focused on higher-level needs also mentioned programmatic features addressing lower-level needs. However, following the premise of Maslow's theory, whether or not it was directly mentioned, we generally assume that directors whose definitions of quality tended to focus on needs at higher levels (moving down the table) had also put programmatic structures into place to address children's "lower level" needs.

As will be described in chapter 4, programs that had classrooms with the highest scores on the ECERS-R and the CLASS (which measure needs on all levels) tended to have directors whose descriptions of quality focused more on esteem and cognitive needs; programs with the lowest scores on the ECERS-R and CLASS tended to have directors whose descriptions of quality focused more on safety and belongingness needs.

This correlation is not perfect. In some cases, directors who wanted to focus on higher-level needs described factors that intervened so that they could not do so. Similarly, other directors emphasized more basic needs as they defined quality, but some of these directors also described other influential factors that helped them successfully address higher-level needs. Beyond understanding whether and how differences in vision were associated with observed quality, a central goal of this research was to understand the factors that seemed to support, and those that seemed to interfere with, the translation of a directors' vision of into classroom practice.

TABLE 2. Directors' perspectives on the definition of quality in terms of Maslow's hierarchy of needs

Human Need	Maslow's Description of Need	Director Definition of Quality
Physiological (Survival)	Food, water, air, sleep	<i>If I don't pay the utilities... or it comes out of my pocket, my kids will eat.</i>
Safety	Predictable, organized world; routines Unexpected, unmanageable, or other dangerous things do not happen Adults who protect, shield from harm, and offer fairness and consistency	<i>You know, just the structure, having structure and workbooks. We have workbooks. We have worksheets. And you have to have a schedule. I mean, all my teachers go by a schedule, because children, even at two they are in a schedule, a routine.</i>
Love/Belongingness	Friends and affectionate relations A place in the group	<i>We need to be very loving and nurturing... they need to feel like this is a place where they belong, and they're welcome.</i>
Esteem	High and stable self-esteem Feelings of self-confidence, self-worth, capability, and being necessary in the world Based on real capacity or achievement Based on respect, recognition, appreciation from others	<i>If... they can be more independent and feel more confident in themselves, I think if that... would be a goal that I can reach with them, I would feel that we've been successful with that one child.</i>
Cognitive	Knowledge, curiosity, and understanding	<i>Helping (children) with their everyday, I guess just understanding the world around them a little bit better.</i> <i>The program is to help children to learn at their own individual rate.... we want them to become self-assured, curious, independent children.</i>
Aesthetic	Aesthetics and beauty	<i>We seek to meet their creative needs... and all the activities in the classroom are based on what [children] like to see happening... their artwork, their music, dancing... anything that they do in the classroom is their expression.</i>
Self-actualization	Fulfillment of these needs has intrinsic value, independent of esteem Doing what one is "fitted for" A desire for self-fulfillment and to become everything that one is capable of becoming	<i>Our children are being pushed so much when they get to school... so you need to be able to teach them to... know themselves as much as they can... I think you just want them to shine when they leave here, be able to shine their little light over there someplace.</i>

Describing Directors' Views of Quality in Terms of the Role That Intrinsic Beliefs and Evidence-Based Knowledge Have in Shaping Practice

As we explored director's views of good-quality care in light of Maslow's hierarchy of needs, it was evident that directors differed in their views of quality along another dimension that could affect quality as measured through the CLASS and ECERS-R. Many directors shared the goal of addressing children's cognitive or esteem needs. However, their expressed means for accomplishing these goals—as seen through their opinions about the role of staff, what constitutes a good curriculum, the structure and atmosphere in the classroom, and so forth—differed dramatically. To further explore these differences, we applied a second framework to directors' descriptions of quality.

Research conducted by Brownlee and her colleagues explored the role that personal beliefs play in classroom practice (2000, Berthelson and Brownlee 2004). This work concluded that differences in caregiver practice often reflect the combined influence of intrinsic beliefs, knowledge caregivers have acquired, and caregivers' ability to integrate this acquired knowledge with their intrinsic beliefs. Although Brownlee's work dealt with teachers, we saw similar differences behind directors' definitions of quality. Consequently, we made some slight adaptations to Brownlee and colleagues' framework and terminology and coded the directors' interviews to categorize them into three groups, each with somewhat different types of beliefs guiding their programmatic decisions.

- Some directors primarily appear guided by their *intrinsic beliefs*. That is, they make programmatic decisions based mainly on instincts, intuition and personal experiences.
- Other directors are in the process of *learning*. These directors are working to inform their intrinsic beliefs with additional knowledge or understanding but are still in the process of effectively integrating that knowledge with their intrinsic beliefs. They often describe the application of new knowledge or ideas but appear to have not fully reconciled certain conflicts between their beliefs and new knowledge, or they may rely exclusively on intrinsic beliefs in certain areas of decision making.
- Some directors have what Brownlee and colleagues describe as *informed beliefs*. Like directors in the category above, these directors base programmatic decisions on intrinsic beliefs supplemented with outside knowledge or information from a variety of sources. They differ from the learning group in that they have more fully reconciled any conflicts between their beliefs and external information and demonstrate a solid understanding of the reasons behind new ideas and related programmatic decisions.

Among the classrooms observed for this research, classrooms with higher scores on the ECERS-R and CLASS tended to have directors who appeared to be guided by informed beliefs or who were learning. In contrast, classrooms with lower scores tended to have directors who relied on intrinsic beliefs to guide programmatic decision making. Again, this correlation was not perfect among the centers in the study. As will be discussed in chapter 4, numerous other factors were associated with quality. Thus, although we conclude that beliefs matter, there are clearly circumstances in which quality is shaped by factors independent of director beliefs and/or in which director beliefs are moderated by other factors.

Intrinsic beliefs

About 12 directors in the sample appeared to rely primarily on intrinsic beliefs for the operation of their program. These beliefs are shaped through various prior life experiences from childhood to raising one's own children or grandchildren to work experiences. Many directors in this category were also characterized by firmness of beliefs and by conflict with extrinsic standards and learning that contradicted their intuition about good practice. One such example is the following director who had strong beliefs about what children should "know" when they start school and appeared to entirely reject school district ideas about classroom structure and what is important for school readiness.

I believe in teaching the kids a little bit about ABC. But see, [the school district funding source] wants [children] to learn how to play, how to get along with each other... and pick the toy of your choice. But like learning the letters, numbers, they don't want you to teach them that.... But then they want you to get them ready for school.... But the way they have [the requirements] set up, [the children] won't know anything but how to play, play with blocks and all different kinds of toys.

Another director described similar difficulty her staff had when asked to incorporate external standards and knowledge with their intrinsic beliefs, saying

We would sit and have our meetings and it was always, "Yes, I understand. I understand." But then when you go to see if they're doing it, in a sense it wasn't quite getting done.

Learning

Some directors in the sample were clearly learning how to integrate the knowledge they were gaining with their intrinsic beliefs to inform their programmatic decisions. About seven directors fell into this category, with one describing coming to terms with new curriculum and programmatic standards (associated with a contract for funding) this way:

It's taken about three years for me to really get a hold on it. And I can see the more I learn about it, and the more we use it, I can see the value in it. At first, it was like, "Gosh, that's a lot of paperwork." And then they're always changing something... And yet, all those things are important. So I'm getting to where I'm starting to really appreciate it more.

This director also described new ideas that she was working to implement as principles she had accepted but was still struggling to fully understand.

Now things have kind of changed a little bit because you have to, you let the child explore. So you have to have things set out for them to be able to create and explore... When I was a teacher, it was old school and we did things as a group together all the time, you know. So then it may have been fine, but now it's different. And I know materials are very important, you know, for [children], and a teacher.

Informed beliefs

Finally, about 19 directors in the sample had beliefs that would be described as informed by Brownlee and her colleagues. These directors relied on both their intrinsic beliefs and on various sources of outside information to continuously shape and refine their beliefs and programmatic practices. They are distinguished from directors in the intrinsic beliefs category by their desire to gather additional information to inform their beliefs. They are distinguished from directors in the learning category by their appreciation of the importance of understanding the reasons behind programmatic approaches or standards and by the evidence they offered of having actively worked to integrate knowledge from outside sources with their own beliefs and principles.

For example, one director explained how self-evaluation using the ECERS-R helped her staff understand the reasons for having interest centers in the classrooms and why this was important.

The state says we need to use the ECERS... and I think it's very good... Before that we were doing [many] of the same things, but I don't think the teachers realized the reasons behind why we were doing.... When I went to school, [professors] talked about the block area, and the library area, and the home living area. We had these in our classrooms, but I think [now] the staff understands more why we have these in our classrooms. I think it's really helped our program.

Another illustrated how directors with informed beliefs tended to value information from diverse sources. When asked where she got ideas about the kinds of things that are important for her program, one director replied,

Learning more, reading books, looking how children develop, and the ideas from your parents, the ideas from a good model program. It's not only one person. It's a collective [influence].

Like some of the directors who seemed to rely almost exclusively on intrinsic beliefs, some directors with informed beliefs also described conflict between their beliefs and external standards and knowledge. However, rather than rejecting the conflicting ideas, the directors in the group with informed beliefs blended external information with their intrinsic beliefs. For example, one director explained that her program faced a challenge with published curricula because the curricula required extra work to adapt to meet the program's cultural and dual-language goals. When asked why the program used a published curriculum given those special program needs, the director explained

We have the opportunity to blend [the published curriculum] in what we are already doing. [It] is a research-based curriculum. And then we blend in with the themes of the month that we create and community involvement component. So all those three bring a good tool... That particular... curriculum has that ability to blend in the other components.

Summary

Directors' overall views of quality differed in ways potentially related to observed differences in classroom quality as measured through the ECERS-R and CLASS. Two frameworks, or lenses, proved useful in better understanding key differences in directors' views of quality. The first framework was based on Maslow's hierarchy of needs. Through that lens, it was apparent that directors differed in the types of children's needs on which they were most focused. Some directors defined quality and made programmatic decisions that emphasized children's needs for safety. Others emphasized love and belongingness needs. Others emphasized cognitive needs. And still others emphasized what Maslow would refer to as esteem needs. The second framework used to explore differences across directors was based on the work of Brownlee and colleagues. Through that lens, we saw that directors differed in the role that intrinsic beliefs, external knowledge and information, and the integration of the two played in shaping ideas about quality and related programmatic decisions.

The next chapter of the report presents information about how quality differed across the classrooms we observed. Following that chapter, the report returns to directors' definitions of quality and explores how those variations, combined with other factors influencing centers, may relate to variations in observed classroom quality.

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Chapter Three

Observation Results

The interviews with directors indicate some commonalities across programs in how directors think about quality. Nearly all the directors were committed to providing good services to children and families. However, when moving from the general goal of achieving good child outcomes to more specificity, directors varied greatly, not only in how they operationalized child outcomes, but also in the approaches they used to achieve their goals and in the resources they were able to bring to their programs. To better understand how these issues translate into classroom structure and practice, an observation was conducted in one classroom in each center.

As described in the earlier report section on study methods, two widely used instruments that measure different aspects of the classroom environment guided the observations.

- *Classroom Assessment Scoring System (CLASS)*. The CLASS includes 10 items and three subscales that evaluate the level of emotional support, classroom organizational structure for learning, and support for cognitive and language development (Pianta, La Paro, and Hamre 2008).
- *Early Childhood Environment Rating Scale, Revised (ECERS-R)*. To complement the CLASS, we also completed 23 items making up three subscales in the ECERS-R including items related to space and furnishings, activities in the classroom, and program structure (schedule) (Harms, Clifford, and Cryer 2005).

Together, these subscales from the CLASS and ECERS-R offer pictures of the materials and activities available in classrooms and of the interactions between teachers and children.⁴ As expected, there were meaningful differences in classroom quality—as measured through the CLASS and ECERS-R—across the centers involved in this study.

It is important here to restate that the sample for this study is not statistically representative of the population of centers in the study sites. The goal was to sample centers using a method to maximize variation in both “quality” and contextual factors related to quality. Thus, although the results below likely reflect—or come close to reflecting—the *range* of quality among classrooms serving 3-year-olds in the study sites (as measured by the CLASS and ECERS-R), it does not reflect the *rate* at which different levels of quality are found in the study sites.

In addition, although some research indicates that a one-classroom observation is not as representative of a center’s quality as a multiple-classroom observation, we determined that, given the research goals, there was more value in maximizing the number of centers visited than in observing more than one classroom per center. In centers with more than one classroom serving 3-year-old children, directors chose the classroom to be observed, which maximized the likelihood that we collected data about the classroom the director felt either best represented the center’s services or demonstrated the center’s best practices for 3-year-olds. Given our focus on understanding the factors that seem to be associated having an ability to maximize quality, this approach to the classroom observation meets the needs of the research design and sufficiently supports the types of conclusions that are reached.

This chapter is divided into three major sections. The first two sections individually cover the CLASS and ECERS-R results. Each section includes a brief summary of the data collection procedures specific to the measure, an overview of what is captured by the measure’s subscales, and a summary of results (i.e., subscale scores for the sampled classrooms).

The third major section below forms the basis for exploring how and why some centers achieve higher quality than others. In that section, the scores on the observation instruments are used to divide the sample into three groups: those that generally scored the lowest on all the subscales, those that had mixed results across the subscales and/or generally scored in the middle on all the subscales, and those that generally scored the highest on all the subscales. The chapter concludes with a picture of a prototypical classroom for each quality group.

Classroom Assessment Scoring System

The CLASS evaluates 10 dimensions of the classroom environment. These dimensions are further categorized into three domains: emotional support, organizational structure for learning, and support for cognitive and language development. Each of the three domains, and its corresponding dimensions, is briefly described below, based on the descriptions in the CLASS user manual (Pianta et al. 2008). For additional details on the dimensions measured in the CLASS, see appendix D.

Procedures

The CLASS requires an observation period of at least two hours, broken into at least four 30-minute cycles. During the 30 minutes, 20 minutes are dedicated to uninterrupted observation and note-taking, and 10 minutes are spent finalizing notes and assigning scores to each of the 10 dimensions. However, for this study, the note-taking period was typically extended to at least 15 minutes to allow for note-taking and scoring of ECERS-R indicators that were seen during the 20-minute CLASS observation cycle.

Each of the 10 CLASS dimensions is scored on a seven-point scale, with observers comparing what they see during that cycle to the narrative descriptions of indicators within each dimension. Thus, observers compare what they saw with descriptions of the indicators at the low (score of 1 or 2), middle (score of 3, 4, or 5), or high (6 or 7) levels in the CLASS manual (Pianta et al. 2008). The individual cycle scores are averaged for each dimension. Finally, subscale (or composite domain) scores are calculated as the mean scores of the dimensions making up the subscale (or domain). In general, a higher score indicates a higher level of quality according to the constructs measured by the CLASS.⁵

Results

Summary statistics for the CLASS observation results are shown in table 2. On average, classrooms in the programs selected for this research scored in the middle range on emotional support and classroom organization and in the low range on instructional support. These results are similar to findings from other research studies in which programs tended to have the greatest challenges addressing children’s cognitive and verbal language development through the use of activities that promote analysis and reasoning, integration of knowledge over time, scaffolding and feedback to deepen children’s understanding, problem-solving, and persistence, and language-rich environments (Karoly et al. 2008; Peisner-Feinberg and Schaaf 2008; Pianta et al. 2008).

Emotional support

The *emotional support domain* is designed to capture aspects of the classroom environment that are thought to support children’s social and emotional functioning and development. The four dimensions that are evaluated as part of this domain are positive emotional climate; negative emotional climate; teacher sensitivity, including awareness of, and responsiveness to children’s individual needs; and regard for student perspectives in the planning and conduct of lessons and activities.

- In the emotional support domain, the average score among the 38 classrooms in the sample was 5.3 (middle, approaching high, range).

- Most classrooms scored at least in the middle range of this domain. Only 1 classroom scored in the low range, and 13 classrooms scored in the high range.

Among the individual items making up this domain, on average, classrooms in the study scored highest on negative climate (i.e., they were unlikely to have negative climates) and lowest on regard for student perspectives (how often children are encouraged to express their ideas and supported with opportunities for choice and leadership).

TABLE 2. Summary Statistics for Sampled Classrooms: ECERS-R and CLASS Subscales

	<u>ECERS-R</u>			<u>CLASS</u>		
	Space and furnishings	Activities	Program structure	Emotional support	Classroom organization	Instructional support
Mean	3.8	3.4	4.5	5.3	4.9	2.4
Median	3.9	3.3	4.6	5.4	5.1	2.3
Minimum	1.1	1.1	1.3	2.7	2.1	1.0
Maximum	5.6	6.0	7.0	6.7	6.7	4.6

Notes: ECERS-R scale authors interpret the level of quality associated with scores as 1 = inadequate, 3 = minimal, 5 = good, and 7 = excellent (Cryer et al. 2003). CLASS scale authors interpret the level of quality associated with scores as: 1–2 = low, 4–6 = middle, and 7–8 = high (Pianta et al. 2008).

Classroom organization

The *classroom organization domain* looks at classroom procedures and management strategies related to maximizing time devoted to learning (rather than spent on discipline, waiting, and transitions) and that support children’s interest in—and ability to learn from—activities. The domain is based on three dimensions: behavior management, productivity, and instructional learning formats.

- In the classroom organization domain, the average score among the 38 classrooms in the sample was 4.9 (middle, approaching high, range).
- As with emotional support, all but one classroom scored at least in the middle range for classroom organization for learning.
- However, unlike emotional support, in which no classrooms had a score of 3 (middle, with some characteristics in the low range), numerous classrooms had an organization score of 3.
- Further, compared with the emotional support domain, fewer classrooms (six) scored in the high range on organization.

Among the individual items making up the classroom organization domain, the lowest scores in the sample were on the item related to instructional learning formats.

Instructional support

The *instructional support domain* is designed to capture the types of teacher-child interactions that are important in supporting children's cognitive and language development. The items in this domain emphasize the importance of rich interaction between teachers and children and "learning how facts are interconnected, organized, and conditioned on one another" rather than "simply learning facts" (Pianta et al. 2008). The instructional support domain, includes the following three dimensions: concept development, quality of feedback, and language modeling.

- In the instructional support domain, the average score among classrooms in the sample was 2.4 (low, approaching middle, range).
- Only six classrooms scored at least a 3 in this domain (middle, with some characteristics in the low range).
- The maximum score on this domain was 4.6.

Among the individual items making up the instructional support domain, classrooms on average scored higher on language modeling than on quality of feedback or concept development.

Early Childhood Environment Rating Scale

To complement the CLASS, we also completed a subset of 23 items, comprising three subscales, from the Early Childhood Environment Rating Scale, Revised (ECERS-R). These items allowed us to objectively compare programs' physical environments and the materials, activities, and experiences they provided for children. The subscales used for this research, and their corresponding items, as described by Harms et al. 2005 and Cryer et al. 2003, are described briefly below. See appendix D for additional details.

Procedures

The ECERS-R requires an observation period of at least three hours. Unlike the CLASS, this period is not broken into cycles, and the items are scored continuously throughout the observation. Like the CLASS, the ECERS-R also uses a seven-point scale, though the scale is scored and interpreted differently. For the ECERS-R, observers assign scores for each item based on "yes/no" answers to a series of indicators on the item. Item scores begin at 1, which the scale authors interpret as an inadequate level of quality. The

maximum score is a seven, which the authors describe as excellent. In between, the ECERS-R authors refer to a score of 3 as minimal and a score of 5 as good. Subscale scores are calculated as the sum of the scores for each item divided by the number of items in the subscale.

Results

Summary statistics for the ECERS-R observation results are shown in table 2. On average, classrooms in programs selected for this research scored in the middle range—slightly above a score of 3—on each of the three ECERS-R subscales measured for this study (space and furnishings, activities, and program structure). As noted earlier, the scale authors describe a score of 3 as representing a minimal level of quality.

Space and furnishings

The *space and furnishings* subscale reflects aspects of the physical environment that support child safety, comfort, learning, and development. The items also consider whether the physical environment permits adequate supervision and addresses children’s special needs. It encompasses eight items: indoor space; furniture for routine care, play, and learning; furnishings for relaxation and comfort; room arrangement for play; space for privacy; child-related display; space for gross motor play; and gross motor equipment.

- The average score on the space and furnishings subscale among classrooms in the sample was 3.8 (slightly above the level defined by the scale authors as minimal quality).
- Just over half of classrooms in the sample for this study (20) scored between 3 and 5, (above minimal but below good).
- The remaining classrooms were evenly split: nine programs scored below a 3, and nine scored above a 5 (moving toward a score of 7, which the study authors describe as excellent quality).

Among the individual items making up the space and furnishings subscale,

- classes in the study had the lowest average scores on the item assessing space for gross motor play, and
- the average scores on the seven remaining items were roughly the same.

Activities

The *activities* subscale reflects the various materials available to children in the classroom and how they are used. Emphasis is placed on ensuring that classroom materials allow

children to have meaningful experiences in a range of subjects and areas of development. Within each item, the ECERS-R typically assesses the variety and condition of materials, whether children can access the materials on their own, and the amount of time children are free to engage with the materials. The subscale includes 10 items: fine motor; art; music/movement; blocks; sand/water; dramatic play; nature/science; math/number; use of TV, video, and/or computers; and promoting acceptance of diversity.

- The average score on the activities subscale among classrooms in the sample was 3.4 (again, only slightly above a score of 3, which the scale authors describe as minimal quality).
- Slightly fewer than half of classrooms (17) scored between 3 and 5 (between minimal and good).
- Compared with the space and furnishings subscale, more classes (13) had a score of less than 3 (minimal), on the activities subscale; about the same number of classrooms (8) scored above 5, or in the range scale authors defined as good or excellent.

Among the individual items making up the activities subscale, classrooms in this study had

- the highest average score on the art item, and
- the lowest average score on the nature/science item.⁶

Program structure

The *program structure* subscale is designed to capture the balance between structured, teacher-directed types of activities and more unstructured play periods and between large- and small-group activities in the classroom's daily schedule. It also examines the time for outdoor play and provisions for special needs children. This subscale includes four items: schedule, free play, group time, and provisions for children with disabilities.

- The average score on the program structure subscale among classrooms in the sample was higher than the other two ECERS-R subscales, falling at 4.5. This average is approaching the level defined as good by the authors of the scale.
- Unlike the other two subscales, most classes did not fall into the middle range: 15 programs scored above a 5 (defined as good), while 14 had a score in the middle range (at least 3, or minimal, but less than 5) and 9 scored less than a 3 (minimal).

Among the individual items making up the program structure subscale, classrooms in the study had

- the highest average score on the group time item, and
- the lowest average score on the schedule item.⁷

The variation in the range of item scores in the program structure subscale was greater than variation in the range of item scores in the space and furnishings and activities subscales.

Looking across the Subscales

To address our central research question about factors that facilitate or act as barriers to the production of quality, we needed to look across the standardized measures to identify centers with the highest, middle, and lowest quality classrooms in our sample. This information allows us to explore how the values, beliefs, and priorities revealed during the director interviews may be reflected in their center's classrooms. Compared with scores on individual items, an evaluation across subscales offers a more comprehensive picture of quality and acknowledges that some centers or teachers may choose to emphasize certain programmatic aspects over others but still have a number of features in place to effectively support child development.

Rather than using the cutoffs identified by the ECERS-R and CLASS authors to distinguish among highest, middle, and lowest quality classrooms, we grouped the classrooms based on their quality relative to other classrooms in this research. This approach yielded a more parsimonious set of quality groups when looking across the subscales and helped ensure meaningful distinctions across the quality groupings. The process used for defining highest, middle, and lowest quality classrooms in this research is described below.

Defining Highest, Middle, and Lowest Observed Quality

To identify lower, middle, and higher quality classrooms, we began by looking at the distribution of scores on individual subscales. Subscale scores were categorized as low, medium-low, medium-high, and high, relative to the scores of other classrooms in the study sample on that subscale. To define the range of scores for a particular subscale that fell into each category, we considered natural break points combined with break points that appeared to delineate some of the most meaningful differences across classrooms. Table 3 shows the ranges associated with the definition of lowest, middle-low, middle-high, and highest scores on each subscale.

With subscale scores for each classroom categorized as among the lowest, middle-low, middle-high, and highest, we looked at the pattern of results across subscales for

each classroom. Based on these patterns, we divided the centers into three groups defined according to the overall level of observed quality in the room we observed, relative to other centers in the study:

- *Highest quality.* In these classrooms, at least half the subscales fell into the highest range, no more than one of the remaining subscales fell into the middle-low range, and no subscales fell into the lowest range.
- *Middle or mixed-quality.* In these classrooms, at least half the subscales fell into the middle range or there was a mix of lowest, middle, and highest scores across the subscales.
- *Lowest quality.* In these classrooms, at least half the subscales fell into the lowest range and none of the remaining subscales reached the middle-high or highest ranges.

Additional descriptive information about each of the three categories is provided below.

TABLE 3. ECERS-R and CLASS Subscale Scores Defining Lowest, Middle or Mixed, and Highest Quality Classrooms in Study Sample

	Lowest range	<i>n</i>	Middle-low range	<i>n</i>	Mid-high range	<i>n</i>	Highest range	<i>n</i>
Emotional support	2.7-3.6	3	3.9-4.9	9	5.2-5.4	8	5.7-6.7	18
Classroom organization	2.1-3.5	7	4.3-4.6	8	4.9-5.3	9	5.4-6.7	14
Instructional support	1.0-1.4	4	1.5-2.4	18	2.5-3.3	10	3.5-4.6	6
Space and furnishings	1.1-2.8	10	3.1-3.9	9	4.0-4.8	10	5.1-5.6	8
Activities	1.1-2.8	13	3.0-3.3	10	4.0-4.5	7	5.0-6.0	8
Program structure	1.3-3.3	11	3.7-4.7	12	5.0-6.3	8	6.7-7.0	7

Highest Quality in Study Sample

Eleven classrooms fell into this category. With selected exceptions, programs in this category generally had high levels of emotional support in the classroom we observed (a score of 6 or above), middle to high levels of classroom organization for learning, and met all the minimal criteria and half or more of the good criteria on the ECERS-R subscales.

However, even among these high-quality classrooms, nearly all had a handful of subscales on which their relative scores were not among the highest. This “highest

quality” group of classrooms was most likely to have lower ratings on one of two subscales: program structure (ECERS-R) or instructional support (CLASS). Further, all the classrooms in the study, including those in this category, generally had lower scores on the instructional support subscale than on the other subscales.

Drawing from the notes on all the classroom observations that fell into this category, a composite description of the characteristics typical in a classroom with among the highest ECERS-R and CLASS scores on each subscale is given below.

- *Emotional support.* The teacher used a gentle but enthusiastic voice throughout the observation. She simultaneously responded to both the group’s and individual children’s needs; for example, she alternated between comforting one child who missed her mother (by holding the child in her lap, calling her “mi amor,” and suggesting activities she might enjoy) and playing along with the imaginary game of another girl seeking attention (by saying, “Yum, that is such a delicious soup! What will you cook next?”). The children in the class frequently laughed and smiled. They were eager to participate during group activities and with their peers during free play. The teacher was in close proximity to the children throughout the period, often sitting on the floor with them, and participating in the children’s chosen activities. The children frequently asked the teacher to join in games and activities. For example, during gross motor play, the teacher suggested several different games that the children could play with bean bags, and played along with them. The teacher treated the children with genuine respect and warmth.
- *Classroom organization for learning.* Children stayed busy throughout the observation period. The children knew the schedule and sequence of events, as well as the expectations for behavior. In addition, the teacher offered reminders of behavior expectations in advance and corrected misbehavior with subtle hints. The children’s behavior did not cause any ongoing disruptions. Transitions (such as between whole-group and free-play periods) were quick and efficient, and the teacher created opportunities for learning within them. For example, children counted the number of steps they were taking when walking to the gross motor play area. The teacher oriented children to the tasks at hand; for example, during a group reading activity, she responded to a boy’s irrelevant comments quickly but respectfully, and then brought the children’s attention back to the book. The teacher provided activities that involving visual, audio, and hands-on materials, as well as movement, and the children were interested in the activities. During a group dancing activity, for example, the teacher held up posters featuring different body positions, and the children froze in that position (e.g., with one leg in the air or hands on their hips).
- *Instructional support.* During both group and free play times, the teacher asked open-ended questions such as, “Tell me about how you made your soup” and asking a girl who was playing with a balancing scale about “more and less” as they experimented

by adding more weights to one side of the balance. Also during free play, the teacher helped a boy building a block bridge make the connection to real life by bringing him a book about bridges. Before free play, children were asked to plan their activities by drawing pictures of what they wanted to do. After free play, children sat in a circle and told the teacher and other children what they had done during free play. The teacher helped children who had difficulty talking about their activities by asking them specific questions about their activities.

- *Space and furnishings.* All furnishings, space, and equipment were in good repair and safe for the children to use; for example, the floor of the indoor gross motor area was covered in padded mats to protect the children from injury. The space was easy to supervise, allowing the teacher to monitor the classroom from any vantage point. The classroom was divided into approximately nine interest centers (for example, blocks, dramatic play, and art) in which children could find all the materials they needed for an activity without teacher assistance and enough space so they were not interrupted during their play. Materials were located on low, open shelves labeled with pictures to help children play and clean up independently. One area of the classroom was set aside with soft and comfortable furnishings (including carpeting, pillows, and a soft child-sized couch) so children could engage in quiet activities (such as reading books or listening to music with headphones) when they wanted to relax or lie down. In several areas—including a small writing table, small sand table, and painting easels—children could find activities to do alone if they needed time away from the hustle and bustle of the group. Throughout the classroom, walls and sides of shelves were covered in the children’s artwork, photographs of the children in the class, and posters from previous whole-group lessons (for example, a chart from a “sink or float” activity).
- *Activities.* The classroom and gross motor space used by the children provided a variety of materials addressing different developmental skills. For example, the dramatic play area contained toys, dress-up clothes, and props that allowed children to imagine that they were either in a kitchen or a flower shop; several girls were very excited about the play soup they were preparing for the teacher. Another area was set aside for science-related materials: children took out microscopes to look at slides and magnifying glasses to look at pine-cone and sea shell collections or realistic plastic animals; one boy spent his free play period sorting plastic food into food groups; several children took turns brushing a giant set of teeth with a toothbrush while wearing doctor’s scrubs. The block area contained three different types of blocks and various accessories that the children could use to extend their block play, such as building roads with miniature wooden street signs, buildings, vehicles, and dolls. Children had access to all these materials for more than half the day and were free to choose among the materials and activities.

- *Program structure.* The classroom's schedule gave children long periods of free play, punctuated by short (15 minutes or less) whole- and small-group activities, with smooth transitions in between. For example, after most children arrived, the day began with a 15-minute whole-group activity during which the class danced and sang songs, brainstormed words starting with "the letter of the day," and planned their time for the next activity. The children then had an hour-long free-play period, followed by a 5-minute conversation about behavior expectations in the gross motor area, in which the children then spent 50 minutes. When supervising free play and activities, the teacher consistently sought out opportunities to engage with children and facilitate their play.

Middle or Mixed Quality, Relative to Rest of Study Sample

Eighteen classrooms fell into this category. With selected exceptions, centers in this category generally had middle to high levels of emotional support in the classroom we observed, middle levels of classroom organization, and had space and furnishings and activities scores that the ECERS-R authors would describe as above minimal but generally below good. As with all the classrooms in this study, those with middle or mixed quality (relative to the rest of the sample) tended to have low scores on the instructional support subscale of the CLASS. Once again, based on notes from all the classrooms we observed, a composite description of a classroom with scores falling in the middle of the sample is given below for each of the subscales.

- *Emotional support.* There were some instances of both positive (for example, smiling) and negative (for example, sarcasm) affect. In general, the teacher maintained a flat affect and tone of voice throughout the observation. Some children seemed to be enjoying themselves (actively playing and giggling). Others seemed disconnected from their teacher and classmates, and two children were frequently upset during the observation. The teacher sometimes responded to children's requests for attention but sometimes had to dismiss or ignore their concerns because she was busy. Part of the observation was spent in free play, when children chose their own activities. In another part of the observation, the teacher gave instruction with alphabet and rhyming flash cards, at which time the children were expected to sit still and engage in the lesson the teacher had planned.
- *Classroom organization for learning.* The children were generally very well behaved. They seemed to know the classroom routines and where to find the materials they wanted. The teacher used a combination of proactive and reactive behavior management strategies. Children were often busy during the observation period. During an art activity, the teacher worked with one child at a time while the next child wait-

ed for his or her turn and the other children either engaged in free play or wandered to find an activity.

- *Instructional support.* The teacher asked children close-ended questions, such as, “What letter is on this flash card?” and “What is a word that begins with ‘B’?” seeking to make sure children would learn the right answer. When children got the answer right, the teacher offered praise. When children did not get the answer right, the teacher asked another child. There was frequent conversation between children in the classroom while they played with blocks or cards together and during imaginary role-playing.
- *Space and furnishings.* The small size and organization of the classroom made it easy to supervise, but it was difficult for children to move through certain parts of the class, and there was no room to set aside space for children to play or rest alone. There were four different interest areas in the classroom. The reading corner was placed next to the block area, which meant that quiet reading could be interrupted by more active play. The classroom offered some minimal relief from the “hardness” of classroom life, with a few cushions and an area rug in the reading area. The furniture was in good condition but children had to kneel on their chairs in order to reach and work with materials on the tables. The program had outdoor space available to the children, but the woodchips under the stationary playground structure were not deep enough to protect children from injury if they fell.
- *Activities.* This classroom had a wide range of materials for the children to use, including art supplies, manipulatives, books, blocks, and math and number toys. Outdoors, children had access to sand and water play with various accessories such as toy trucks, shovels, and buckets. During the 9 hours the center was open, most of the day was spent on routines and teacher-structured activities. Children had free access to the indoor classroom materials for around 90 minutes.
- *Program structure.* The children seemed familiar with the schedule and the daily routines and were comfortable transitioning between activities as the day progressed. Although the series of events was thus predictable, the teacher did not rigidly adhere to it, and adjusted to children’s individual interests when they did not take time away from the rest of the group; for example, when children were not interested in an activity the teacher set up for center time, she changed the materials available so they were more interesting to the children. The children spent some time in free play and in small, self-selected groups; however, these periods lasted less than half the day. The teacher’s supervision was focused on helping children access materials they needed for their activities.

Lowest Quality in Study Sample

Nine classrooms fell into this category. With the exception of the CLASS emotional support subscale in some centers, these classrooms did not reach even a minimal standard for most dimensions measured in the CLASS and the ECERS-R and they did not reach a standard that offers strong support for child development on any dimension. Again, drawing from the notes on all the observations in this category, a composite description of characteristics typical in a classroom with among the lowest ECERS-R and CLASS scores is given below.

- *Emotional support.* Throughout the observation, the teacher appeared irritable and annoyed by the children. Her interactions with the children were characterized by a harsh, angry tone of voice, threats, and punitive control (such as physically pulling children to a seat). When children were upset, the teacher typically responded by saying, “No crying!” The teacher’s response did not resolve the children’s concerns, and interruptions to the group activities continued. Although some children seemed to enjoy being together and hugged the teacher, she did not seem to reciprocate these positive feelings. For example, when a group of girls began singing, she told them to be quiet.
- *Classroom organization for learning.* The children in this classroom did not generally meet the teacher’s expectations for behavior. The children had just a few activities to occupy their time. Between activities, the teacher took care of managerial tasks while the children waited. For example, the children were expected to quietly watch television while the teacher cleaned up breakfast, and the teacher reprimanded the children when they tried to play with each other or with toys. Children moved through activities as a group. For example, during a series of worksheets, the teacher handed out the next worksheet after all children were finished with the first worksheet. Children who finished more quickly were expected to sit quietly and without talking or leaving their seats. The teacher generally managed challenging behavior after it could no longer be ignored. Disruptions in the classroom tended to escalate, rather than being resolved early.
- *Instructional support.* The teacher ensured that children did not talk when they were supposed to be completing worksheets or watching television quietly. The teacher used worksheets for instruction, helping children fill out the worksheets correctly. During the activity, the teacher asked some closed-ended questions such as “What color is this?” and “How many circles are on the page?”
- *Space and furnishings.* The classroom was furnished with linoleum floors, a small area rug, a few open shelves, and chairs and tables. Because there were few sound-absorbing materials, the classroom was very loud. At naptime, there were fewer cots

than children. During gross motor time, many children were interested in, and shared, one tricycle. Toys in the classroom were stored in bins that the children needed help accessing, and they were all primarily located along one wall of the classroom. The display in the class included posters at adult eye level.

- *Activities.* The classroom had a few different kinds of materials, such as puzzles, Play Dough, and a magnet table. Children were allowed to play with these materials for short periods. When the group watched television, children were expected to stay with the group and were reprimanded when they moved to another part of the classroom to do another activity.
- *Program structure.* The teacher determined the classroom's schedule, and she did not adjust the day's activities to allow for children's individual interests. For example, at TV time children were asked to put away the stringing beads they were enjoying. Although it was a nice day with fair weather, and the program had outdoor playground facilities, the class did not go outside. The children were kept together as a whole group for more than three-quarters of the day, resulting in little free play and few opportunities for the teacher to interact with children individually. During free-play periods, the teacher took care of managerial tasks, cleaning, and preparing future activities.

Summary

This chapter of the report provided results of the observations conducted in one classroom in each of the 38 centers in the study sample. The observations were guided by two widely used measures in early childhood research and technical assistance, the CLASS and the ECERS-R. According to these results, classroom quality in this sample varied as measured by the CLASS and ECERS-R subscales. The next chapter of the report connects these findings to the interviews conducted with directors in order to explore the factors in the conceptual frameworks that might explain the reasons that particular classrooms had low, middle/mixed, or high CLASS and ECERS-R scores relative to others in the sample.

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Chapter Four

Exploring the Relationships between Director Views, Decision Making, Center and Director Characteristics, and Observed Quality

The primary objective of this research was to help uncover factors that enable child care centers to deliver high-quality services and factors that impede improving the quality of care. As suggested by the conceptual framework, the premise of the study is that quality in a particular child care center is shaped by the intersection of key director decisions and the human and other resources accessed by the program. Further, the study is based on the idea that both director decision making and resources available to centers are affected by a complex range of program, community, market, and policy factors.

The interviews confirmed the proposition that producing quality is a complex endeavor. One director, when asked about her vision of a high-quality program, said,

When I think about quality, I think there are so many things that have to come together to make that happen. There's got to be support. Support for the children, support for the parents and families, support for the teachers to do their jobs effectively... support for board members who are volunteering all their time... really we want them to feel acknowledged and recognized as well [so they can continue to support us]. So a lot of balls, really, to juggle to keep that all happening.

Although they described a common need to attend to multiple goals, many center directors also described pursuing very different goals. Further, classrooms with the highest scores on the observation measures differed in the contexts under which they reached their quality goals. Centers with the highest scores included Montessori centers, private for-profit programs, nonprofit programs, programs voluntarily accredited by

NAEYC, and programs that were not accredited. Likewise, centers with the lowest scores on the observation measures had a range of contexts and influences.

This chapter presents findings related to our second research question and the primary study objective. That is, what key factors come together, and thus appear to facilitate the production of better quality, in some centers, and which factors appear to interfere with improving quality in other centers?

Chapter Overview

To develop conclusions from what were effectively 38 case studies, we followed generally accepted qualitative methods for developing theoretical propositions. First, we identified evidence from the interview data regarding the paths that center directors took to achieving high-quality services. We began this analysis by coding—within each interview—the key themes (or factors) that were either directly reported as important in shaping quality or that, according to the conceptual framework, could be associated with observed classroom quality.

Within the key themes, the analysis continued with identifying typologies by which directors with differing views could be classified. Next, to explore the relationships between these interview themes and classroom quality, the typologies were arrayed against the observed classroom quality and directors' views on various factors in the framework. Finally, the results were tested and refined by returning to the individual case interviews to look for confirmation of, and contradictions to, the observed factors.

This analysis revealed clear relationships between observed quality and certain factors in the conceptual framework; these relationships held with limited exceptions that are described in the results throughout this chapter. Classrooms that were of the highest quality (according to the characteristics measured in the CLASS and the ECERS-R) had the following characteristics in common. Directors of those classrooms

- expressed high expectations regarding staff qualifications and what staff should achieve for children, and expressed respect for—and a commitment to support—staff;
- were at ease with their financial situation or were feeling somewhat financially pinched but had more resources than other centers;
- emphasized allocating resources to staff wages and benefits, and to professional development activities;

- relied on external standards that exceeded licensing requirements to shape program practices; and
- used technical assistance or relied on wide variety of external sources to inform their understanding of effective programmatic practices.

In contrast, classrooms of the lowest quality had the following characteristics in common. Directors of those classrooms

- expressed relatively low expectations regarding staff qualifications and what they should achieve for children;
- were typically struggling with funding;
- emphasized programmatic goals and decisions related to meeting children's safety and belonging needs, as opposed to children's esteem and cognitive needs; and
- relied on licensing standards to shape program practices.

This chapter discusses in depth the findings for three of the factors most consistently connected to observed classroom quality across the 38 centers. The chapter includes one section each on staffing, revenue, and standards. Each section discusses findings that cover

- the primary typology (or classification scheme) that differentiated directors and centers on the factor;
- associations between that typology and observed classroom quality; and
- a summary of evidence related to additional factors in the conceptual framework that either seemed to shape the typological category into which directors fell or helped explain the relationship between the main factor (or other, related factors) and the quality findings.

It is worth noting again here that the methodology does not allow for definitive conclusions regarding the direction of causality between various factors and observed classroom quality. For example, increased financial stability can lead to increased quality, but increased quality can also lead to increased financial stability. However, the interview data offer two types of rich evidence that can be used to inductively develop theories regarding directions of influence. This evidence includes an ability to trace

chains of reasoning and decision making among directors and first-hand accounts of the perspectives of directors on the factors affecting quality.

Staffing

Teachers are clearly a central factor in supporting classroom quality. They are ultimately responsible for shaping children's experiences in the classroom, with important implications for child outcomes. As described in an earlier chapter, many directors mentioned staff as part of their vision of quality. One director said,

When people ask me about the school, I always tell them the best thing about the school is the staff. There are other schools, I'm sure, that have better facilities, or whatever. But the staff keeps our school going.

Another director described hiring and retention as an element of quality, saying,

The other thing is the staff. I consider that a really important part of our philosophy. How we recruit staff. How we hire...staff. How we nurture staff and how we keep staff.

Although the directors we interviewed tended to agree on the central role of teachers, they differed in what they expected of staff and in the factors they mentioned related to their expectation levels.

This section is organized into five subsections.

- *Classifying centers by expectations for (and confidence in) teachers* outlines the different ways that directors described their expectations of staff.
- *Links between observed quality and director expectations for (and confidence in) staff* discusses the associations between observed classroom quality and whether directors had relatively higher or lower expectations for teachers.
- *Explaining variations in expectations for (and confidence in) staff* presents conclusions drawn from directors' comments about the primary factors that appeared linked to how directors viewed and managed their staff.
- *Connections to other parameters in the conceptual framework* returns to the conceptual framework for the study to explore how other factors may have contributed to differences in director expectations for staff or to the primary factors associated with those variations.
- *Wrap-up* pulls together the key points.

The findings discussed below were formulated based on directors' responses to several interview questions. Some directors first shared their ideas about important staff characteristics as they described their program's goals or their vision of a good program. Others brought up staff expectations when prompted to discuss the "pieces of the puzzle" they had to put into place to accomplish their goals. Other information presented below came up when we asked directors to describe how they decide whom to hire, whether it is easy or difficult to find or retain staff they feel good about, how they determine wages, or their requirements for ongoing professional development.

Classifying Centers by Expectations for (and Confidence in) Teachers

The 38 directors in this study differed fundamentally in how they described their expectations of staff. Some directors had very high expectations. These directors were looking for certain skills, knowledge, and a high performance level related to their beliefs about good classroom practice and desired child outcomes. They also tended to express a high level of confidence in the abilities of their staff. Other directors' expectations were more basic; these directors were looking for teachers they could count on to keep children safe and who would get along well with the director and other staff. Directors in this category also often talked about staff in a way that suggested conflict or a lack of confidence in staff abilities and motivations.

We used the data from the interviews to categorize director expectations for—and confidence in—staff as low, mixed, or high. To categorize directors, we coded and analyzed sections of the interviews that offered insights into the following questions.

- Did the director generally talk about staff and job candidates with respect or disapproval?
- Was the director looking for staff with specific knowledge, skills, or classroom methods that reflected informed beliefs about child development principles?
- Did the director have expectations for continuous improvement or ongoing professional growth and development among his or her staff?
- Did the director describe conflicts or other struggles with staff?

Although many directors that we classified as having high expectations mentioned specialized college coursework as important, we identified other directors mentioning teacher education as having middle/mixed—or even low—expectations for staff. As one director explained, it is important to be concerned about teachers' "professional growth, not [just] that they're collecting units."

This director also emphasized that what really matters is that teachers “implement [new knowledge] in the classroom.” Consequently, when considering how to classify directors’ expectations for staff, we looked carefully at *what* directors said about the outcomes and reasons for requiring staff to have college coursework or degrees, rather than simply whether they mentioned these criteria. [Further information regarding director beliefs about the value of coursework, specifically, is presented in box 2.]

High expectations and confidence

Some directors had high expectations of, and confidence in, their staff. Interviews with directors in this category included a preponderance of evidence that they had clear hiring criteria related to classroom practices, viewed staff as partners in decision making, and worked to achieve a balance between staff independence and support for staff. One director described how and why she developed higher expectations for her staff:

When I first started, I was willing to give anybody a chance because... somebody gave me a chance. But then there gets to be a point where you say, okay, you want to grow. And you can't continue to always start everybody from the bottom because then you're never going to go on to the next step.... And that's what happened to me for the first couple of years. I was continually at the same step, and I was doing well, but still at the same step.

Another director categorized as having high expectations described her hiring approach this way: “We are very particular about who we want to bring in, not just in terms of their credentials but also in terms of their personality... being very engaging, being cheerful, being cooperative, being open minded, and having a lot of experience in the classroom.” This director also described a high level of confidence in her staff, saying,

We allow our teachers a lot of independence. Yet, we are always available to guide, support, [or] intervene if we need to. But we try to... be very trusting of the [teachers]. We've hired them for a reason. We feel that they are very competent. We will help. And we know what's going on all the time. But we don't necessarily step in, because we feel that they are capable of handling most things on their own. And if... we can see that they need the help we will assist, clearly. So nobody ever feels like they are overwhelmed.

The comment above also illustrates how directors with high expectations and confidence primarily viewed their teachers with respect. In addition, the director described working to balance independence with support for teachers, another common theme among this group.

Another common theme among directors in this category was a collaborative, team-based orientation toward the center’s work. In these centers, directors often described

Box 2. Directors' Beliefs about College Coursework and Degrees as an Element Defining Qualified Staff

Directors had strong, and sometimes divergent, views on college coursework as an indicator of qualified staff.

One director who would have liked to hire staff with more education noted that a degree gives teachers book knowledge, but she also believed teachers must have a certain “magic” to be truly effective:

I want somebody with the magic.... It's just that [a degree in early childhood education] is not an assured sign. I think [teachers with college coursework] have gained a lot of book knowledge, but that's only the beginning. And I think it's great to have the book knowledge... I have my people go to school when I can. [I] help them find grants and scholarships. I think the schooling is great. But I think the experiences, the ability, that magic is most important. And then, let's enhance it with education.

This director's view of college coursework reflects the issue highlighted by Brownlee and her colleagues (2000); that extrinsic knowledge only improves classroom practice after teachers actively understand and integrate new learning with their inherent beliefs. Consequently, many directors we interviewed pointed out that a college degree does not, in and of itself, indicate a teacher will do a good job in the classroom.

As a director of a program that required teachers to either have a degree or agree to pursue a degree after being hired explained,

It doesn't mean that everybody we hire is going to be a perfect match. We try. And those people find out on their own that they're not cut out for this. You know, that this is not really what they want to do. We had one that lasted a month. And she came in here gung ho. And she had all the right answers. And the other teacher [in that room] loved her [and] thought she was going to be a great fit. And she lasted a month.... What we've learned is a degree doesn't mean they're going to come in here and know what they're doing. It means they've gotten the head knowledge.

Directors took this reality in one of three directions as they made management decisions:

- Some completely rejected a degree or college coursework as a criterion for their staff—a decision that may be influenced by both a director's beliefs and the challenges involved in finding, hiring, and retaining degreed teachers.
- Others viewed college coursework as a factor that—along with inherent abilities and beliefs—was a foundation of good classroom practice. For these directors, hiring teachers without some specialized education was an exception.
- Some fell in between, indicating that they had a preference for teachers with coursework but often had to consider or hire candidates without college coursework or degrees.

working closely with teachers to make decisions. For example, several directors explained that they pursued voluntary accreditation only after their staff collectively agreed that accreditation was valuable and that they would put in the work needed to meet the requirements. When asked how her program was able to have high expectations for staff, one director explained it this way:

I think we have a great deal of communication [about the] commitments that we have [made]... I know other directors are struggling with that and with training their personnel. But we have a great deal of communication. So before I start doing something... we have staff meetings and then we say, "Do you think that we can all as a collective go for the re-accreditation of our program? It's higher standards. There is [more work]. There are higher expectations [for] professional development. Are you all for it?" And if the majority [agrees] with that, it's a collective [decision]. It's one of our values in terms of not doing individualistic things but rather working together.

This director also explained why she feels it is important to make decisions with teacher input:

You see more productivity from the teacher than if you just order... them [to do something]. I feel like I'm lucky that I've been able to accomplish many, many, many things with [the teachers'] support and their commitment. It's not easy because we have a double job... But we are committed to have a degree. And [teachers] have families, and they have this and they have that. But they know [higher education is important].

A final factor characterizing directors as having higher or lower staff expectations was how carefully directors seemed to think about their staffing criteria and how to evaluate job applicants according to these criteria. Because of the importance of character traits for classroom practice, many directors included some aspect of how they "felt" about job candidates as a criterion. Beyond that, some directors clearly thought more deliberately than others about what children needed and how to identify that in potential staff. One director explained that the qualifications she looks for depend

on the position, of course. Our 4-year-old teachers, I either want someone who's got a degree in an education-related field, whether it be an associate degree or a bachelor's degree, or someone who really has some good experience. Fortunately, all of the [4-year-old] teachers have both right now... A 3-year-old teacher, I like good experience. They don't have to have a degree, but two out of three [of our teachers] do. But I am looking also for someone who is gentle, who has the personality and the patience for 3-year-olds. And, the teachers need to know and to show that they know the world of 3s and 4s. They need to show that they know what they're talking about when I interview them and that they know... what you can expect for a 3-year-old and a 4-year old.

Another director explained that she was not serving infants because when she started her center, she did not believe that she had the skills to assess the qualifications of infant caregivers. She said "As an inexperienced director... I did not feel that I had the qualities as a director at that point to know how to hire an individual who's going to treat a baby [well]."

Low expectations and confidence

In contrast to directors with high expectations for (and confidence in) their teachers, others in the sample described very low expectations for staff. One director explained that she did not have a problem with staff retention

because I'm not hard on [the teachers]. I mean, there are things that are required, but that room is [their] room and they do what they want to do in there. As long as everything is clean and neat and the kids are not crying, everything is fine with me. So I don't really think that's that hard.

Although directors in this group usually mentioned some expectations directly related to children's developmental needs—such as looking for teachers who “know that there are certain things that little children require”—they more often emphasized qualities of a good worker. For example, one director asked to describe what she looked for when hiring said, “Number one, they have to be flexible because we're here from 7:00 to 6:30.” She later explained that she needed staff who are flexible “in case somebody calls me and says, ‘I can't come in tomorrow.’ Then I could call... and say, ‘Can you cover for her?’”

Another director described her hiring criteria this way.

I go by their references.... I want to make sure they're drug free. And they fill out all the paperwork. If you go through those basic standards when you hire somebody, then they're going to be good with the children. Second... you go by their personality.... they've got to know how to teach the children and work with the children.... I guess it's just a judgment call.

Also,

They have to have a high school diploma. I like for them to have training. It doesn't matter to me if they've worked in a day care center.... All children should be treated like each one's individual. And there's no screaming. There's no hollering at kids.

A third director looked for staff that “don't mind taking orders or taking directions,” “have some education, at least a high school diploma,” that are parents themselves, and that have a personality that “blends” with her personality.

Many directors we identified as having low expectations for staff emphasized that they were looking for employees who understood the work involves more than “just babysitting.” Although directors with higher expectations for staff also described looking for teachers who understood the full scope of their role, for directors with lower expectations this tended to be a central concern and struggle in hiring. One director explained,

A lot of people... they'll come in here and think, "Nothing to this job. All you do is sit there and you watch children while they play." Let me tell you, that's wrong.

Later, when this director was asked if it was easy or difficult to find staff she felt good about hiring, she returned to this idea:

Very difficult. Like I said before, it's a low-paying job. And you've got to love the children. You cannot work here and be successful if you just want a job. If you just want a job and you just care about the money... you're better off going [somewhere else] because you will make more money.... [To work] here, it takes someone special.

Another contrast between directors in this category and other directors in the study was the level of confidence they had in their staff. Like the director quoted above, several directors described challenges when hiring because they had difficulty identifying staff that would work out well once they got into a classroom. One director said that it was hard to find staff she felt good about hiring because

they start out well, do everything [they're] supposed to do.... And then, after a few months, when they think they're in, then they start slacking. And then it's time for [them] to go.... I always [say] to them, "I shouldn't have to babysit you, and I shouldn't have to be peeping around the corner at you, because you should know what you have to do."

This quote illustrates another characteristic defining directors in this group. When discussing staff, they often emphasized problems with staff more than their positive attributes. When one director was prompted to talk about staffing, she began by saying,

I find it's better to have a smaller staff... . [Otherwise], you have the people attitudes. When I had a large staff, they just kind of clashed a little bit.... It was always this thing about "[She] doesn't get to work on time. I'm always stuck with her children." So I went through that for a minute.... But that became a problem for me because I was stepping out of [the director role] and stepping into [the teacher's role].... It was easier to let those people go and have a smaller staff.

In terms of professional development, directors who had low expectations—like those with higher expectations—emphasized the importance of ongoing staff development. For example, directors in this group usually described requiring their teachers to have some ongoing training. However, their requirements were typically limited to what was mandated by licensing. One director explained:

Of course, they'd have to keep the CPR and first aid going. [Otherwise], there's not a requirement in our policies. When I see classes come across, in the mail or on the Internet or whatever, I let [the teachers] know. And if it looks like we all

want to go, that's definitely something the school will pay for. So we've done that. We haven't done it in a while.

Other directors did not report having specific requirements for ongoing teacher training. Like the director above, these directors implied that staff did not typically engage in very much training but that they would support teachers who expressed interest in doing so.

Mixed expectations and confidence

Some directors in the sample showed characteristics of both high and low expectations and confidence in staff. For example, the following director emphasized the importance of training and coursework in child development and described expectations that exceeded licensing requirements:

We are allowed to hire individuals with six to nine [credit hours in early childhood education]... but I really prefer all my teachers to be fully qualified... and have the educational background they need to be successful... I place such importance on that—training and having somebody that's really been through their child development courses and those sorts of things—because I think kids need people that know what they're doing.

However, this director emphasized training conducted internally and noted,

Most of my teachers are a little older, a little more established. And most of them are pretty well done [with training and education]. They've taken as much as they're going to take.

Another example of a program with mixed expectations and confidence was a director who had relatively high expectations for her teachers but low confidence. When asked about challenges she faces in meeting her goals, she said,

Teachers, every single day... I really believe that young teachers today do not take their job seriously. [Staff are] challenging for me, because I teach them not to be lazy. A challenge for me is [getting teachers to think in terms of] "What is your goal at the end of the day when your kids left your class?" I'm very demanding in that aspect.... You have to target different goals... the visual, the auditory, and the written part. You have to target these three aspects every single day, because every child learns differently. And some children are faster than others. If a kid is faster than another, give them something else do to. And [teachers] don't seem to understand that.

In general, fewer programs in the study fell into this middle or mixed category than into either the low-expectations or high-expectations categories.

Links between Observed Quality and Director Expectations for (and Confidence in) Staff

Differences in expectations for staff among the directors in this study were one factor that appeared to related to variations in classroom quality as measured through the CLASS and the ECERS-R. Though there were exceptions, we generally found that classrooms with the highest observation scores were in centers where directors expressed the highest expectations for—and highest confidence in—staff, while classrooms with the lowest observation scores were in centers where directors had more basic expectations for staff.

As is generally the case among the key factors to which observed classroom quality was linked in this research, there were exceptions to these findings. In some centers with high director expectations for staff, further analysis of the interview data suggested that other factors limited quality. That is, some classrooms in centers with high director expectations for staff had middle or mixed scores on the ECERS-R and CLASS measures. And, in a handful of centers, the interview data pointed toward other factors supporting higher quality, despite low expectations for staff. That is, some classrooms in centers with low director expectations for staff had middle, mixed, or high scores on the ECERS-R and CLASS measures.

Explaining Variations in Expectations for (and Confidence in) Staff

As we analyzed the interview data to understand the key differences between directors with higher and lower expectations for staff, the following issues emerged. Directors who struggled with staff, and had low expectations, described various obstacles that contributed to their perspectives on staffing. They were often struggling with revenue and did not feel they could afford to hire staff with more of the qualities they felt were important. Yet, some directors struggling with staff did not believe there was a connection between wages and the labor pool to which they had access. In either case, many directors with low expectations seemed to see the labor pool and related staff skills as relatively fixed parameters.

In contrast, directors with higher expectations for staff viewed themselves as empowered to affect their staff quality. These directors employed numerous strategies that helped them have and meet higher expectations. Most frequently, directors with high expectations for staff described the importance of certain supports for staff and a pattern of maximizing revenue available for teacher wages and benefits. External factors also seemed related to some variation in director expectations for staff.

Thus, the sections below present findings from the interviews regarding how directors with different expectations varied in

- views regarding the supply of labor to their center;
- external standards related to staff that applied to their center; and
- strategies to support higher expectations for staff.

Supply of labor to centers

All directors described some difficulty finding qualified applicants for open positions. Some of those with lower expectations implied that the quality of the labor pool was a key obstacle to expecting more of staff. This suggests that those with higher expectations might have even more difficulty finding staff they felt good about hiring. However, this was not the case. We did not find that directors with higher expectations for staff were any more or less likely than other directors to describe difficulty finding staff they felt good about hiring.

In fact, one director in a program with very high expectations said finding staff was “pretty easy, really, because we are a sought-after school. People want to work here.” Along with other evidence from the interviews, this suggests that programs with higher expectations for staff (probably those that concurrently provide a good working environment) may enjoy an advantage in recruiting staff over programs with lower expectations. Another director with high staff expectations explained,

I usually have enough people to interview that I feel fairly comfortable.... But it's hard anyway when you're hiring. It's not hard in the sense that I can't get people to work for me.... It's interesting that [the licensing agency] would only require that they have a high school diploma and they're 19 [years old]. And so I could maybe find those people, but I don't hire those people. When I put an ad in the paper, I say, either a degree or experienced... So I have a higher quality of interviewee.

Given the lack of evidence for a connection between expectations and difficulty in hiring, our data support the idea that lower director expectations for staff may, at least in some cases, reflect a realistic view of the available labor pool. This raises the question of what might influence the labor supply to centers. Although we have insufficient evidence to reach conclusions regarding the relative role of different factors in shaping the labor supply to different centers, the data for this study suggest some potentially relevant factors.

One contributing factor appears to be self-selection among those seeking employment as a teacher. Related to this factor are the resource constraints directors face in setting wages and benefits. Some directors believed that if they were able to pay higher wages, then they would have access to stronger candidates. One director who was asked if she thought there were people in the labor pool with more of the qualities she was looking for said,

I'm quite sure there are, because I've taken a lot of applications.... And what they asked for as far as salaries was not a great deal. But it was just more than we could offer at the time.

Another possible factor is that some programs with lower expectations are located in communities with a fundamentally less-skilled pool of labor. This idea was supported by the directors in the study who did not see a connection between the wages they were able to pay and the quality of the labor supply to which their center had access. One director specifically said that being able to pay teachers twice as much would not make a difference to who she could hire.

External standards related to staff

Another factor associated with variations in directors' expectations for staff was standards related to staff training and education that were specified by licensing, voluntary accreditation, or as part of contract funding for prekindergarten or state preschool. (This topic is discussed further in the "Standards Guiding Program Practice" part of this chapter.) Not surprisingly, directors described expectations for staff that either aligned with or exceeded the standards applying to their program. Variations in the applicable standards, therefore, seemed to account for some observed differences.

For example, directors in centers funded through the Abbott Preschool Program in Hudson County, New Jersey, and programs accredited by the National Association for the Education of Young Children (NAEYC) were the most likely to report that they expected their staff to have—or be working toward—a college degree in early childhood education or a related field. Further, these directors' expectations for staff education were not simply a concession to the requirements. For example, these directors often agreed with the requirements, and they described correspondingly high expectations for their staff in areas beyond educational credentials. In contrast, the lowest training expectations for new hires found among centers in San Diego County reflected California's licensing requirement regarding college units, while the lowest training expectations for new hires found among centers in Jefferson County reflected Alabama's licensing requirement of regarding hours of workshops, training, or college coursework

Directors generally saw at least some value in the standards for training and education that applied to their programs. We asked all directors about key challenges they faced, and we asked most directors if they found any aspects of licensing or contract funding (when applicable) wasteful, challenging, or not helpful. Apart from the increasing educational requirements associated with NAEYC accreditation (discussed later), no director mentioned the training or education requirements in their responses.

Strategies associated with higher expectations for staff

During the interviews, directors touched on a number of strategies they used to help recruit, develop, and retain staff that could meet their expectations. As one director explained,

What you try to do is have a situation where teachers are well cared for. So the model for me was, if I'm caring for the staff, then the staff is caring for the children. But if no one's caring for the staff, how can they care for the children?

Strategies that directors used to “care for the staff” revolved around supporting them through compensation and other means. Forms of support not related to compensation included making the center a friendly place to work, setting up a staffing structure that made it possible for teachers to give children what they needed, stocking sufficient supplies and materials, and providing resources for training and education. Specific strategies discussed included

- establishing personal relationships with staff;
- allocating staff across the center and providing backup;
- providing sufficient supplies and materials;
- supporting professional growth and development;
- committing to raise revenue for—and put revenue in—compensation; and
- motivating teachers to excel and to pursue professional development.

In some cases, these strategies were wholly internal, based on how the director worked with her staff. In other cases, the strategies involved external interactions between directors and community, market, or policy factors to accomplish staffing goals.

Both low-expectation and high-expectation directors used some supportive strategies. However, directors with lower expectations generally described employing fewer of these strategies, while directors with higher expectations described employing more. Further, those with high expectations tended to specify that they provided supports designed specifically to help staff implement good classroom practices.

Establishing personal relationships with staff

One of the most basic teacher needs that directors described trying to meet was to show understanding and caring for teachers as people. Many directors described the importance of noticing when staff weren't feeling well or offering a kind word when their mood was low. One director described it this way:

My staff has mostly been here for years. And that's because I think we treat them well. Most of them will tell you it's a home away from home. They feel at home here. If they have personal problems, they know they're free to come talk to me

about it. And it's just a loving atmosphere to work in. And I think that's made all the difference in the world.

Both directors with low expectations and directors with high expectations for teachers described offering this type of support to staff.

Allocating staff across the center and providing backup

Many directors with high expectations appeared especially thoughtful about how they allocated staff across the center and about setting up a staffing structure with backup for teachers when they needed it. One director described her thinking about how staff is allocated across the program this way:

In the toddler room, our room is licensed for 10 children. Well, I could put one staff in there and run [the room more economically] with seven [children]. That's crazy. If that staff member has to change a diaper, who's watching the other six kids? So it makes a lot more sense to put the two staff in there [with 10 children] and the same in the preschool [class]. It just makes sense to have the extra person always available so that you don't have to worry. I like having two people in each classroom because two people means you've got two sets of eyes. You also have someone watching, so the whole idea of an employee maybe getting out of hand or maybe an employee losing it is going to be less likely because the stress level is so much less when you have two of you to share a load.

Several directors also explained that they considered teachers' skills, interests, and fit with individual children when assigning teachers and children to classrooms. Directors mentioned considering whether there were children that "have some special need or [a] particular problem" in deciding how many children will be in a classroom. The director above, who liked having two staff in each room, also said

You have to look at what is feasible. Sometimes we have a certain child that... requires a lot of extra care. So even though the classroom may be down to seven children [and therefore only require one teacher], and he's a preschooler, if he's here, I still have a second [teacher in the room] because it's needed.

Directors also described the steps they took to back up teachers. Directors with low expectations for teachers often described backing up teachers themselves. Although directors with high expectations for teachers also stepped in themselves when teachers needed a hand, it was more common for these programs to have a staffing structure that included floaters and other built-in backup. One director who had put these supports into place said,

We do have extra people around. We're very fortunate to have those extra hands when we need them.... And at the beginning of the year, I have even more come

in.... I may have two or three aides just stationed in the halls... just to help with bathroom and that kind of stuff.

Providing sufficient supplies and materials

Although directors were clear that classroom supplies and materials could not substitute for good staff, some directors with high expectations for staff mentioned that having these material resources was important for helping teachers do their jobs well. One director explained this way:

I think one of the things we can do the best is have as many resources [as possible] available for teachers on how they can make those experiences possible for the [children]. [We can't just tell the teachers] "Okay, what do you want? Oh, we can't afford it this year. We can do it next year." So we try to dig into whatever we can to kind of make those little things [the teachers] need and want possible for them.

When asked what specifically she meant by resources, this director said, "Making sure there are enough books for them. The supplies that they need, also." Other directors gave their teachers a budget to use as they wished for classroom supplies.

Supporting professional growth and development

Directors whose high expectations for teachers included an interest in seeing teachers pursue ongoing training and education typically described several strategies to support teachers' professional development. These directors viewed professional development as important because, as one director said, "in the long run, the kids are advantaging."

Support for professional growth and development included paying for coursework or training, providing information about professional development opportunities to teachers, and providing release time for teachers to attend training or courses. One director explained,

If they don't have an answer or they need a training, we can always call [the resource and referral agency] and they do trainings. So whenever I go find something, I always e-mail everybody to let them know.... And it's an extra effort thing, I interchange. "Okay, you can have two hours off or you can have the afternoon off."

In contrast, directors with low expectations either did not describe these supports for teachers or explained that financial obstacles prevented them from supporting professional growth and development. When we asked one director if she was where she wanted to be with staff training, she responded,

I think they all could use more training. I really believe in it.... It's just having the... money to send them and then pay a teacher to do their class while they're

gone. So there it goes back again to the financial burden, the money. And being a small day care center, the money's just not there.

Another director expressed the same perspective this way:

It boils down to money. I used to participate a lot with [the local resource and referral] in their training sessions, and still do some. But the staff nowadays, to get them to go on Saturday, I have to pay them.... Then pay the fees to the classes. So basically it boiled down to money. I do most of my training in house.

Notably, these directors were not just concerned about the fees associated with workshops or coursework but also with having funds to pay teachers for the time they spent in professional development activities. Further, programs differed in whether they had enough staff to cover for teachers taking time off for professional development. One director said that it was not hard to support professional development “if you have enough staffing.”

Committing to raise revenue for—and put revenue into—compensation

Some directors viewed compensation—including salaries and benefits—as one of the most important supports they could provide to staff. One director with extremely high expectations for staff described this funding as an integral part of her program’s vision of quality, saying,

I think our vision, first of all, the children are at the front of what we do. But second, our board’s mission and our board’s work is all about making a place that is really rewarding to teachers as well. We have a very good benefit package. Our wages are good for the field but our benefit package is probably stellar.

This director was in a relatively resource-rich center. But even some more financially pinched programs were committed to supporting their staff through compensation, particularly when they had high expectations. One director in this situation said,

I never pay anybody minimum [wage]. I think it’s an insult to give minimum. It may not be much over minimum, but I look at what I think I can afford.

Another director with relatively severe revenue constraints and high expectations for staff described the importance of compensation in supporting higher expectations for teachers. She explained that she had been telling other decision makers for her center

if you had the finances to put some things in place benefit-wise or some incentives, you would maybe get more out of the teachers. Or you would even attract teachers who are willing to go that extra step. [Otherwise], you’re attracting some complacency.

At least some directors (both those with low and with high expectations for staff) agreed that low salaries made it difficult to find staff they felt good about hiring. One director said, “I think you have more bargaining power when you have a good package to give them, or when you have an hourly [wage] that is reasonable.” However, directors with low expectations tended to accept low wages as a constraint, while those with high expectations made an ongoing effort to maximize revenue. One director explained her view of the difference this way:

Some schools... they'll say, "Well, we can't raise the tuition."... And I say, "But it's part of quality. You need to do that. In order to pay your teachers, that's something you have to do."

Another director mentioned that the program had had a great deal of trouble getting “teachers out here” because “we didn’t have a lot of money.” Over time, the board found additional resources, beyond funds from the state preschool contract, to increase wages and benefits. The director reported that these steps made it “a little bit easier” to find and support teachers. This director further explained, “Every program [that offers a bit of revenue] helps... if we didn’t have the other programs around us [to support our revenue], I don’t think there’s any way we would be able to function in that way.”

Directors with high expectations for staff also described supporting their expectations by putting the bulk of additional revenue in teacher salaries and benefits rather than into other expenditures. Directors with low expectations for staff, when asked how they would use additional money if they had it, were more likely to mention physical improvements to classrooms, materials, or offering enrichment activities for children.

Motivating teachers to excel and to pursue professional development

Beyond differences in the likelihood of establishing strategies to inform teachers about and cover costs of professional development, directors with high expectations for teachers were also committed to finding ways to motivate teachers to excel and to pursue professional growth and development. In contrast, directors with low expectations for teachers conveyed that it would be too much to ask of teachers. One director explained that an obstacle to motivating teachers to pursue education is

probably families.... We have to take [classes] during the evening time. So if they have families and they have children, leaving them in the evenings is hard. And sometimes transportation. They have to [drive a distance] to go to school. I think that would be the only challenge that they would have is balancing their time in the evening.

This director had an expectation that her staff pursue coursework despite the personal burden she saw it placed on them. In contrast, other directors who said they valued education accepted it when teachers were not interested in pursuing further education. One director said,

I have given the teachers information on [the scholarship program]... but we have not taken advantage of [it] as of this point.... They have not shown any interest. I think it's interest and/or time... They have families and households to go to in the evening when they get off. So I think that's... the hesitation for them to take advantage of that.

Some directors also identified their own engagement level as important for motivating teachers to grow professionally. One director with mixed expectations for teachers illustrated this as she discussed implementing a new curriculum associated with a contract-funded subsidy.

We would get small workshops. We'd have someone come in and help us. For me... it was hard because I was leaving [learning about the curriculum] for the teachers... I wasn't getting involved in it as I should have.... [But] helping to keep [the teachers] on top of what they learned and what they need to know, and provide that information for them, that's the part I knew I needed to start playing.

We were also curious about how strongly salaries motivated teachers to excel and pursue professional development. Directors were divided on whether they thought salaries mattered. One director asked about sources of motivation for professional development replied,

Very little is in pay..... True concern for the children and the families [lead teachers to say], "I really need to get some more [information] in this area... Why is this? I don't understand what I'm doing. How can I get this a little bit better? Dang it, my discipline just isn't cutting it. I really think I maybe need to get some other tactics here, some other skills that I can work with." So it's intrinsic... They're doing it because they want to do this [work]. Like I said, that \$.25 to \$.50 an hour raise is like, "Whoopee" [with sarcasm].

However, other directors saw a connection between salaries and teacher motivation. Hudson County, New Jersey, is an interesting case because the salary disparity between classrooms funded by the Abbott Preschool Program and classrooms funded by other sources is quite large. One director in a program with both funding sources explained that, although the large increase in salary helped motivate teachers to obtain college degrees so they could work in an Abbott classroom, other factors continued to be at play.

There's a difference between a non-Abbott salary and the Abbott salary, simply because of the funding. The Abbott is much [better] funded than the state [vouchers].... [Teachers] complain about that but.... it should be an incentive. And some of them did jump from the non-Abbott to the Abbott [classrooms]. I have one case [which] is a very good [example] of how difficult, and yet possible, [it is] to motivate somebody. I have a teacher who was one of the first that did a CDA...

that was a time when Abbott wasn't so strict.... But then they were given time to finish their coursework.... So I had to finally pull her out from Abbott, give her a lower salary in non-Abbott. But I said, "Go ahead, you finish." The second year she got her associate degree... and then she finally finished her bachelor's degree.... It took four years, five years before she could actually understand the value of having a bachelor's.

A related difference we observed between programs with higher and lower expectations for teachers is that directors with higher expectations described a culture within their centers that valued professional growth and development. These directors believed that there is always more to learn.

You can always learn. You can always get better. There's always something to learn and [I value staff who have] that type of attitude instead of, "I know this" or "I've got that."

Another director expressed it this way when asked if she was where she wanted to be with ratios and group sizes:

Group sizes and ratios, yes. I'm not where I want to be as far as education. And I don't think we'll ever get there. There's always so much to learn. Just since we've started, the brain research is coming out more and more and more.

Directors who seemed to have established a culture that valued learning viewed learning as exciting. We asked one director who reported that her staff obtained 50 hours of training annually why she chose that level and how she motivated staff to complete that training. She replied,

I just have this neat stuff [coming] across my desk and it's so exciting. How can you resist?... I try to go at it from... being excited that they have an opportunity. I try to build the excitement.... "Isn't it wonderful we found [this training] and what do you think?"

Considering supports in terms of Maslow's hierarchy of human needs

Variations in director support for staff may also be interpreted through the lens of Maslow's hierarchy of human needs. Directors with lower expectations for, and confidence in, staff often described supports targeting the more basic needs in Maslow's hierarchy. For example, directors who emphasized consideration of staff as people and making the center feel like a "home away from home" were clearly most concerned about meeting teachers' belonging needs.

In contrast, directors with higher expectations for staff tended to describe a broader range of supports that addressed a wider range of human needs. For example, efforts targeted at supporting and motivating teachers' professional development—and those

targeted at helping teachers successfully support healthy child development—are designed to support teachers in fulfilling their esteem and cognitive needs. Thus, although it was developed as a theory of personal motivation, Maslow’s hierarchy of human needs offers an interesting framework for considering whether supports in particular centers are effectively addressing the full spectrum of teachers’ human needs.

Connections to Other Parameters in the Conceptual Framework

The section above explored three key factors that seemed to relate directly to whether center directors had higher or lower expectations for (and confidence in) staff. Another way of looking at those factors is through the conceptual framework for the study. This section places the three factors into the context of the framework to investigate how additional framework factors played into director expectations for staff or into director perceptions of the available labor supply, standards that apply to staff, and establishing supports for staff.

Key director and program characteristics

Several director and program characteristics appeared related to expectations for staff and to the number of supports in place for teachers. Revenue is perhaps the most important of these factors. Programs that were not struggling financially (defined in greater detail in the next section) were more likely to have higher expectations for teachers.

Also, although this finding requires further exploration, some evidence suggests that whether directors had specialized college coursework, sought information and support from varied sources, and had the authority to make financial and hiring/firing decisions may also relate to staff expectations and supports. Finally, connections with larger organizations were sometimes associated with additional supports for staff. Programs that were part of multisite operations often had educational coordinators or supervisors to offer technical assistance to teachers and often had access to additional financial resources to cover professional development costs.

Key community and market factors

The interviews with the directors supported the idea that most community and market factors in the conceptual framework relate to the differing expectations for staff. These factors include community values and norms, the presence of child care resource and referral and other organizations supporting the field, community and market factors that affect the financial resources to which centers have access, and the labor supply.

- **Community values and norms.** Several directors were frustrated that society and policymakers did not have more respect for the early childhood field. Sometimes directors mentioned this as a message they wanted to give to policymakers in order to

help make the case for increased funding. Other directors discussed this as an obstacle to staffing, suggesting that high expectations for staff were in conflict with how society views early childhood professionals. One director brought up community values in the context of retention. When asked whether salaries were the primary factor behind the turnover she was describing, this director explained,

I think a lot of it is saying you work in a day care versus “I’m a school teacher.” You know, just the... pride.... It doesn’t sound important being a day care teacher.

A few directors specified that maintaining high expectations for teachers was challenging because society and policymakers do not support these expectations.

- **Community organizations supporting centers and teachers.** Directors cited local resource and referral agencies as helping meet their expectations for teacher training and understanding of good classroom practice. Local colleges and universities were another important support on which directors relied to help maintain high expectations for staff.

When asked about the timing or availability of workshops or coursework through these organizations, most directors were satisfied with what was available. However, at least some directors described the importance of working with colleges to ensure that they or their teachers could pursue coursework. One director who did mention travel and timing of courses as obstacles said,

In our area, we do not have a bachelor’s program. We have colleges, but the closest college to us doesn’t have an ECE program.... The group of providers that I mentioned, we’ve been working together with these colleges trying to get the classes offered here in the area. We have managed to get probably a class a quarter offered up here.... Class was taught in our centers. So you met four centers, and each one of the centers hosted a couple nights.... And that’s good because if you can leave work at 5:30 and be at your class at 6:00, that’s a whole lot better than leaving work at 4:30 to be at a class at 6:00, so to get that extra hour of pay because every penny we make, we need.

Other directors who had worked closely with their teachers to help them pursue college coursework described another challenge. Directors needed to help some teachers develop confidence to attend classes and skills to help them fit into the college community. A director who employed many bilingual teachers explained,

I would say it’s not been easy to obtain the professional development.... Going on campus is another challenge because the campus has [different] norms.... I need to find the library, get to know my teacher, develop that relationship with the teacher. Sometimes they don’t like me just because of the color of my skin. Just

because I did not say [something the way] you say it in English, now I see the barrier of people not even wanting to understand me or not open or not being inclusive. So those are some of the barriers.

This director worked with community colleges to implement a curriculum that would meet her teachers' needs. She also addressed the challenges to fitting into the college community by easing her teachers into coursework through a class that was offered at the center, rather than on campus.

- **Parent demand and competition with other centers.** Two factors related to the supply and demand for care in particular communities appeared related to directors' expectations for staff. According to at least some directors, parent ability to pay more for care increased the financial resources available to programs, which increased their ability to support staff. This in turn increased directors' comfort with having high expectations for staff. In contrast, some directors cited low financial resources as a reason they could not offer better compensation or supports to staff.

Directors did not typically describe competition with other centers as shaping their expectations for staff. However, there were some exceptions. Some directors mentioned competing—or an inability to compete with—school-based programs in hiring and retaining the most qualified staff. Some directors contrasted their own expectations of staff, and related supports, with those in other centers. In those cases, a few directors suggested that their expectations, and what they were able to offer staff, helped their program attract more qualified staff. In contrast, directors who focused on keeping their fees low relative to competing centers tended to have correspondingly low expectations for staff.

- **Labor pool.** As described earlier, supply of labor helped shape director expectations for staff. Almost all directors agreed that finding qualified staff, given their center's budget, was one of their biggest challenges. However, director expectations for staff differed, and these differences appeared related, at least partly, to the labor supply to which directors had access. Further, directors varied in whether they had, or perceived having, an opportunity to shape the labor supply. Expectations were higher among directors who did not accept the labor constraints as fixed and who worked to reduce limitations, either through their hiring practices or incentives or through the supports they established for staff once they were hired.

Other federal, state, and local policies and initiatives

For some directors, policy requirements, voluntary initiatives, and related incentives affected their expectations for teachers. Among accredited centers, some directors were concerned about the future degree requirements associated with NAEYC accreditation.

However, for the time being, these criteria appeared to be motivating some directors to encourage ongoing education and motivating their teachers to pursue further education.

- ***Requirements for staff training and education.*** Many directors were responsive to, and seemed to appreciate, the push toward training that came through licensing requirements. We asked one director who did not require her teachers to have more hours than mandated by licensing what she would think if the licensing requirement was lowered. She said,

I wouldn't want it any lower. I wouldn't want it lowered because then I think you'll be skipping out on good-quality care. You can never learn too much, and things are always changing. I wouldn't want the hours to be lowered.

Some directors, particularly those with the lowest expectations for staff, appeared to have internalized licensing standards as reflecting their own values about training. That is, when asked to describe their ongoing teacher training requirements, directors described requirements identical to licensing. We observed a similar phenomenon among some directors in centers subject to additional staffing-related requirements through Abbott Preschool Program funding in New Jersey or child care contracts in California.

A key shortcoming of requirements in shaping expectations was that they did not invariably translate into meaningfully higher expectations for staff. The interviews with the directors suggest that increased requirements can begin to shape director expectations for teachers. However, for the requirements to actually lead to high expectations as we have defined them, at least some other factors—including those related to the supply of labor to the center and the implementation of strategies to support higher expectations for staff—need to be in place.

- ***Incentives and assistance for training and education.*** Some directors also noted that external incentives and assistance for professional development allowed them to elevate their expectations for staff. For example, when we asked directors in King County how they managed to maintain high expectations for staff, some cited the assistance offered by Washington State's wage and career ladder. The wage and career ladder helps centers offer higher salaries to teachers when those centers agree to meet a certain salary target based on teacher education and experience. At least one director in King County mentioned not gaining access to the wage and career ladder as an obstacle.

Among directors of programs receiving technical assistance to pursue accreditation, and those with contract-based subsidies, related support for professional development facilitated programmatic expectations. Among Abbott Preschool Program-funded centers in New Jersey, several directors noted that they were able to meet the

requirement for teachers with bachelor's degrees because of the mandate and funding.

On the other hand, policy incentives related to supporting staff did not appear to make a difference for some directors. Often, these directors reported operating in an environment that included factors impeding both higher expectations and the ability to take advantage of resources that could help the program better support staff. Ironically, one key factor in this regard appeared to be resource constraints. For example, programs in King County that were not financially comfortable enough to meet the required wage targets could not benefit from the wage and career ladder funding. Similarly, directors in centers that could not afford release time for teachers to attend training explained that they were unable to take advantage of free training or scholarships.

Wrap-Up

The interviews with directors revealed substantial differences across centers in how staff is viewed. Further, the qualitative pattern analysis indicated that directors' expectations for staff were associated with classroom scores on the CLASS and ECERS-R. In general, classrooms with higher ECERS-R and CLASS scores were found in centers where directors had high expectations for their staff. Classrooms with lower scores were found in centers where directors had low staff expectations.

Some directors had very high expectations for staff, expressed as specific skills related to supporting child development. Directors with high expectations typically supported those expectations with various strategies to help teachers. Other directors had more basic expectations for staff, typically expressed as skills that would minimize directors' staffing-related hassles. These directors were much less likely to report having supportive staff strategies in place.

The direction of causality between supports for staff and expectations is unclear, and it likely varies from one center to another. In some programs, the interview data suggested that a lack of supports for staff reflected fundamentally low expectations. That is, some directors' comments indicated that, because they did not see a need for higher expectations, they also did not see a need for more teacher support. In other centers, it appeared that low expectations resulted from limited resources (both human and financial) for supporting staff. That is, directors did not expect more of their staff, at least in part, because they could not afford the supports needed to recruit, develop, and retain staff that would successfully meet higher expectations. Thus, addressing both conceptual and resource constraints has the potential to increase the reach and effectiveness of initiatives designed to improve the capacity of labor force to deliver high quality services.

Sufficiency of Revenue

Although sufficient funding does not guarantee high-quality early care and education, at least some costs are clearly associated with delivering better quality services. Nearly all programmatic inputs—including staff, supplies, equipment, food, and space—are constrained by revenue (and the availability of in-kind donations). As one director put it, “It seems like... all we talk about is... money, money, money, money all the time. But money... helps you to operate. It helps you to be better, and you need it to do [better].”

During the interviews, we discussed several aspects of revenue with directors. As we analyzed the interviews, it became evident that the construct of interest was not usually how much revenue a particular center had or did not have. Rather, what seemed to differentiate centers was how much stress or confidence directors felt around their financial position. Thus, the discussion in this section primarily addresses revenue from that perspective. Specifically, this section presents findings related to financial stress and revenue and their relationship to observed classroom quality. It includes the following parts.

- *Key funding sources* provides background on the primary funding sources used by the centers in the study.
- *Classifying centers by financial stress* describes findings on whether directors appeared comfortable, or struggling, with their program’s revenue.
- *Links between financial stress and observed quality* discusses associations between observed classroom quality and whether directors talked about their revenue in terms suggesting they were relatively comfortable or struggling.
- *Explaining variations in financial stress* presents conclusions drawn from directors’ comments about some of the factors that appeared to facilitate or constrain the ability of directors to maximize program funding.
- *Connections to the conceptual framework* recaps and expands on the findings in this section, organized into each major domain in the study’s conceptual framework.
- *Wrap-up* briefly summarizes the findings.

Although we touched on impressions of revenue sufficiency with all the sampled directors, we did not typically ask respondents about these issues directly (except the data about funding sources). Instead, most findings below emerged from discussions that followed from questions about factors that directors thought helped achieve or impede programmatic goals. In some cases, the evidence was gathered from portions of the interview dealing with how directors set parent fees or teacher wages or how they managed their budgets when enrollment levels were fluctuating. Thus, the conclusions are drawn from both the connections that directors described directly between quality and our analysis of themes and patterns in the interviews.

Key Funding Sources

Before discussing variations in the level of directors' financial stress, it may be useful to outline the revenue sources directors reported. Below we describe the primary revenue sources among centers in the study, as well as additional funding sources and in-kind resources. As was noted before, because centers were selected for this research to maximize variation in primary sources of program revenue, the distribution of revenue sources described does not represent the population of programs in the counties included in the study.

- **Primary revenue sources.** For day-to-day operating costs, child care programs typically rely on a primary funding source tied to child enrollment and/or attendance. Primary revenue sources among programs in this study included the following.
 - *Private-pay families.* Some programs in the study were wholly or primarily reliant on fees from parents as their main revenue source. Not surprisingly, most (but not all) of these programs reported serving middle- to high-income families. Some programs that primarily relied on parent-paid fees were also serving a small number of children whose fees were covered through CCDF- or TANF-funded vouchers.
 - *Families whose fees are paid through CCDF- or TANF-funded vouchers.* Some programs in the study were primarily reliant on parent fees that were paid through CCDF-funded vouchers. Funding from these sources is dependent on the continuing eligibility of families for the assistance and subject to certain limitations on payments that can reduce the amount of revenue collected per child, compared with revenue from private-pay families or subsidies funded through a contract mechanism (Adams, Rohacek, and Snyder 2008).
 - *Abbott Preschool Program.* Five programs visited in Hudson County, New Jersey, received funding to serve 3- and/or 4-year-olds from the Abbott Preschool Program. To cover costs of wraparound care for children needing hours beyond those funded by Abbott, all the programs we visited had at least some children whose fees were paid with CCDF-funded vouchers, and some had families that privately paid the costs of wraparound care. Similarly, centers in New Jersey that were primarily funded through the Abbott Preschool Program but also served younger children typically had some children whose fees were paid through CCDF-funded vouchers (or a contract) and some whose parents paid the full fee. Centers receiving Abbott Preschool funding are subject to additional programmatic and fiscal standards.

- *California General Child Care or State Preschool.* A few programs visited in San Diego County were funded through state-funded CCDF contracts. Like the Abbott Preschool Program in New Jersey, programs with funding from general child care or state preschool are subject to additional standards, though the standards differ substantially between California and New Jersey.

- *Additional funding sources.* Beyond their main funding sources, the directors with whom we spoke reported that they tapped into various other financial resources, including the Child and Adult Care Food Program; special grants (such as to assist with meeting licensing requirements, accreditation, space expansions, special initiatives related to early literacy, and/or purchase of playground equipment); scholarships for teachers; funding for wage supplements; special fundraising activities; and revenue from renting space.

- *In-kind resources.* Some centers supplemented their budget with in-kind inputs. Although they are not cash revenue, for some programs, in-kind inputs represent a substantial resource for which revenue would otherwise have to be allocated or generated. Free or reduced space costs were the most common in-kind assistance. A handful of programs reported other types of in-kind inputs such as parent assistance with building maintenance, accounting, or other management services provided by organizations with which centers were affiliated, or donations of supplies or equipment.

Classifying Centers by Financial Stress

When asked about key challenges to achieving their programmatic goals or providing the best possible care, almost every director mentioned funding. One director said,

Money really seems to be the major barrier. I can find the people. I've got the dreams. I've got parents who love it [our program]. But there is no money.

Although most directors mentioned funding challenges at some point during the interviews, the directors were experiencing vastly different levels of financial stress. Further, although related to revenue level (or revenue per child), the level of financial stress did not appear to be perfectly correlated with resource levels. Not all centers with the lowest funding were experiencing the greatest stress, and not all centers with the highest funding were experiencing the least financial stress. An analysis of patterns in the interview data suggested three main categories that differentiated directors according to their level of financial stress: financially struggling, relatively comfortable, or feeling pinched. As analysis progress, the patterns of associated factors suggested splitting the feeling pinched category into two; one group with relatively more resources and one with relatively fewer resources. Each category is described below.

These interviews were conducted between January and April 2009, a period of economic decline across the United States. Several directors mentioned that the economic situation was affecting their enrollment and revenue. However, although the economic context at the time of the interviews may have shifted the precise definition of categories (for example, leading those who may have merely appeared financially tenuous in a better economy into extreme struggle as the economy declined), we believe that this benefited the research, highlighting distinctions among programs with fundamentally different financial approaches (no matter the state of the economy), rather than changing the basic findings.

Struggling

At one extreme, several directors in the sample mentioned they were losing money and had to take radical measures to address the shortfall. One director noted,

It's hard to make ends meet. I want to say, it's been coming on probably the last year.... My income was probably about \$75,000 less for the year end [2008] than it was the year before. It's never gone down until this past year.... I have no income going in to help our [own family's] monthly bills, which is hurting us.... This last pay period I didn't have to, but the four pay periods before that, we get paid biweekly, I had to go into our personal savings just to make payroll. So that's me not drawing a check, plus it is costing us to pay my employees.

This was not an isolated circumstance; several directors talked about reducing their own salaries, or lending personal funds to the program, to make ends meet or purchase necessary supplies. Directors also talked about reducing staff hours or laying off staff to balance their budget. Centers with these types of financial challenges and reactions were categorized as financially struggling.

Again, although the general economic decline at the time we conducted the interviews exacerbated the position of centers in this category, the data also suggested that directors in this category were typically operating on the margin of financial security.

Relatively comfortable

At the other extreme, some programs in the sample appeared relatively comfortable financially. These centers tended to charge among the highest fees, were part of the Abbott Preschool Program, or received other contract and community-based grant funding. One nonprofit program that did not receive any revenue from voucher or contract-funded subsidies was in an exceptionally strong financial position:

Right now, we probably have \$180,000 in our capital improvements fund. Our bonus pool always has \$15,000 in it, which we draw from and replenish. We have money in case we have to leave this building. We were never in that shape before. Our goal is \$1 million because we know that if we have to move... we know

what it's going to cost.... We'd love to be in a position of being able to buy a space. Our rent here is over \$10,000 a month.

Most of the other directors we interviewed did not describe their center's financial security so strongly and clearly. But other programs appeared relatively comfortable financially. One director described operating with a surplus, saying, "In 2008, we were more full than I had projected. And so we took that overage and we put it into our employees' 401(k) plan." This director also reported giving teacher bonuses as surplus funds were available.

Another director ensured that the program's financial position remains secure even as revenue fluctuates by setting up "a rainy day fund, so when we've been in a situation where our operating expenses are less than our revenue, we set aside some of that money to help bridge the gap." Another director who owned a for-profit program expressed her center's financial position this way when asked how she decides to allocate additional revenue from increased fees.

Really, I guess it [the center] brings in a good bit of money... I mean, as far as equipment and stuff, we get whatever we need. The money's there.

Directors categorized as relatively comfortable, although not financially tenuous, however, often mentioned the need for additional funding to better accomplish their goals.

Feeling pinched

Some centers could not be characterized as relatively comfortable financially because their directors expressed concern about a recent financial pinch. However, in contrast to centers that appeared to be struggling to keep the doors open, the circumstances of these centers were less acute; the directors described having to be more careful with spending or having concerns about whether the center could maintain its current level of staff support. These directors fell into two subcategories: those operating with relatively more resources and those operating with relatively fewer resources.

Pinched but with relatively more resources

One director who said, "We are blessed in terms of our financial situation" nonetheless described making adjustments in response to decreasing revenue. This center, which had lower registration at the start of the previous school year, was operating with one less classroom than in the year before. The program also did not increase parent fees and, consequently, did not give teachers a raise. The director noted that,

This coming year, we are going to go up [in fees charged to parents], in spite of the bad financial situation in the world right now.... I really went 'round and 'round with this... and it was really for the sake of our staff... so we felt like we

needed to do that.... Other changes, I've probably cut back in some fairly minor ways, like buying lunch for the staff less often and that kind of thing.

When we asked another director whether she had faced challenges in keeping up the center's expectations for continuing staff education, she mentioned funding as an obstacle: "The challenge would be making sure that our budget is budgeted so that [teachers] can participate in [a scholarship program that requires a center contribution and teacher release time to attend classes]. Right now our budget's still where we can manage that." This director also discussed steps the program had taken to ensure there would be sufficient funds to maintain center support for continuing teacher education:

We've been very good about keeping our [substitute teacher] budget low this year... because [the director and assistant director] have kind of taken over some of that when we can.... We closely watch the sub budget. We closely watch our supply budget. We buy what we need. We buy what the children have to have. But we don't overspend. You know, it's easy to overspend in your supply budget. We start relying on each teacher within their classrooms. What do you have that I can use, and what do I have that you can use?... We share materials and things. And it's cut our budget quite a bit this year. So that's really helped.

Even some directors in Abbott-funded preschool programs, which have comparatively high per child funding levels, expressed feeling financially pinched. One director of an Abbott program explained her financial struggles as follows:

They actually give you a very tight budget. And as a matter of fact, it's funny. They kind of penalize you because you started at the beginning.... When we started, we started with a very low budget and they only allowed a 5 percent increase [annually]... What I do is I kind of cut down... my salary.... Usually, it's my administrative money that I have to actually let go of some of the things.... for example, I have a janitor who comes in and cleans... so that comes out of my money.

Pinched but with relatively fewer resources

The programs described above, although forced to make adjustments in response to revenue variations, generally seemed to be in a relatively secure financial position. Those directors reported generally strong parent demand for services and—compared with nearby centers—charging among the highest fees and paying among the highest salaries.

Other directors who reported a financial pinch clearly had relatively lower revenue. One such director explained,

Things have changed in 22 years. This used to be more of a middle-income area. Now, apartments all around here are subsidized.

This distinction may be important because, as illustrated above, programs with relatively higher revenue had a cushion that could absorb some of the pinch. In contrast, directors with relatively lower revenue appeared to have fewer, or more difficult, choices in responding to a financial pinch. The director who mentioned a shift over time from serving middle-income families to serving families with vouchers described a drop in enrollment as subsidized families lost vouchers and

had to make choices between the quality care and food and housing and utilities and gasoline. It's like the bottom just fell out in September. And then it just kept falling. Now all of a sudden, starting in December, we started picking up kids again.... But you know it takes a long time when you're subsidized because you keep them a month, send in your paperwork, and get paid in the middle of the next month for that month. So we should have a really good February check for January.

Regarding her response to the drop in revenue, this director described a scenario requiring more strategizing and involving more stress than the directors with relatively higher revenue:

I had to cut people's hours. Well, we work as a team, so we met and we talked and they could see the children were gone.... And I was paying half their health insurance. I had to drop it. There just wasn't the money to do it.... And the garbage pickup, I have to pay for the dumpsters, I called them and just told them what's happening. And I said, please, please work with me.... I talked to workman's comp.... I said, 'I can pay this small one, please work with me'.... And so they're working with me.... I had to combine (classes).... And it's been very stressful for the teachers, because they've been trying to restructure their classes and restructure the lesson plan.

Unlike directors that fell into the financially struggling category, directors feeling financially pinched with lower revenue showed signs that they were able to keep the program above water and had more flexibility in responding to revenue variations. The director quoted above also described having decided that,

I'm not even going to try to separate [the classes I combined when enrollment fell] even though I've got more children [enrolling again].... I've got to have the stability. The children need to know where their class is, what their routine is, where their coats are going to be hung.... The parents need to know where to find the kids.... That back and forth thing was not good.

Links between Financial Stress and Observed Quality

As we discussed directors' views of quality and what supports or inhibits the achievement of their goals, sufficiency of revenue emerged as a key factor to which many other programmatic decisions, supports, and constraints were linked. Thus, it is not surprising that variations in financial stress or comfort—as defined above—was associated with variations in observed classroom quality. Specifically,

- classrooms with the lowest observed quality were typically in centers characterized as struggling with funding, and
- classrooms with the highest observed quality were all in centers characterized as financially comfortable (relative to other centers in the sample) or in centers characterized as pinched but with higher resource levels.

However, the data from the programs in this study also indicate that although resources are a prerequisite for offering the highest quality care, they are not sufficient for reaching this goal. That is, not all centers that were financially comfortable had the highest quality classrooms. This suggests that, despite the higher availability of resources, other factors were inhibiting the production of higher quality (as measured by the CLASS and ECERS-R). Also, some relatively revenue-poor centers did have classrooms that achieved a mixed or middle level of quality. This suggests that, in these programs, other factors were helping the centers overcome their funding constraints.

Based on additional analyses of the interview data, we identified several other factors associated with the translation of financial resources into higher quality or with a mismatch between higher resource levels and higher-quality classrooms. Among other things, these factors included the topics covered in the other two major sections of this chapter: whether directors had high expectations for staff and had established supports to help meet higher expectations, and the external standards to which programs looked to guide programmatic practice.

Because the production of quality is complex, there were a small number of exceptions to the general findings above. For example, one center with among the highest classroom observations scores was classified as financially comfortable, but the director of that center did not have especially high expectations for staff or look to external standards beyond licensing to guide programmatic practice. However, this director also had some unique qualities, goals, and motivations that seemed to support the delivery of high-quality services.

In contrast, one center with among the lowest classroom observation scores was financially comfortable and had recently begun considering accreditation and raising expectations and supports for teachers. In this case, the newness of the center's efforts to

improve quality, combined with a director whose interview responses clearly indicated she was struggling to incorporate what she was learning with her inherent beliefs about what children need, apparently inhibited the observed classroom quality. In this case, we were able to exclude the alternative explanation that the teacher we observed was atypically ineffective; among other aspects of this case, the director specifically expressed pride in the improvements that had been made in the classroom we observed.

Explaining Variations in Financial Stress

The conversations with directors indicated that struggling with revenue influences program operation. Accordingly, helping centers address the factors underlying their revenue constraints may be a key avenue through which program quality could be better supported. To this end, we used the interview data to further explore possible causes of variation in how much programs struggled with revenue. Some factors that seemed associated with variations in sufficiency of funding specifically, or resources more generally, include

- level and type of parent demand;
- availability and use of resources (in-kind or financial) beyond parent tuition or tuition-based subsidies;
- whether the program had achieved economies of scale;
- allocation of program earnings, specifically how strongly programs were interested in maximizing earnings for owners, program leadership, or a supporting organization;
- director authority for budgeting and other funding-related decisions;
- approaches to fee setting and fee collection; and
- implementation of thoughtful financial management practices.

Parent demand

Parent demand and ability to pay for care was, for some programs, one of the most important community and market factors associated with variations in financial stress or comfort. Although most directors described parent ability to pay for care as a financial constraint, the limits of parent ability to pay and the implications of this differed across centers.

Our theory is that parent demand is associated with financial stress through two interconnected aspects of access to revenue. First, programs operating under their desired capacity would be more likely to be struggling with revenue or feeling pinched. Second, programs able to charge more per child, or receiving higher payment rates for subsidized children, would be less likely to feel pinched and show other signs of relatively

low operating resources or struggling with revenue. The data collected for this study supported these theories.

Among centers categorized as financially comfortable, or that felt pinched but appeared to have higher revenue relative to other programs in the sample, most directors reported that they

- were fully, or near fully, enrolled; and
- had fees on the high end compared to other centers nearby (or were serving children whose fees were subsidized through Abbott Preschool contracts in Hudson County or California Department of Education contracts in San Diego County).

One director of a program in a relatively good financial position explained, “I think we’re lucky because of our location and the parents we are drawing from. We have parents who are not losing their jobs.” Generally, contract-based funding (including state-funded preschool or prekindergarten) that covered tuition costs for eligible children tended to help programs serving low-income families to reach higher financial comfort, even in cases in which directors described needing to supplement the contract funds with other revenue sources.

In contrast, many directors struggling with revenue described weak, or inconsistent, parent demand for their services. Directors saw this as related to generally low incomes among the population being served, a decline in demand due to the economy, and reliance on families paying their fees through voucher programs.

Some programs experiencing weak demand relied heavily on families that needed vouchers to pay for care, and some of these directors reported a decline in demand among families receiving vouchers. One director, whose enrollment was at one-third of capacity at the time of our visit, described the problem this way when we asked about the biggest challenges the program is facing:

Right now, the economy. A number of our families are on these subsidy programs through the state. A lot of them have lost their privileges to the subsidized care, so we always have that revolving door. We’re always enrolling but we’re always losing too.... Enrollment now has been a challenge. We’ve lost a lot of our families to layoffs or they couldn’t afford a co-pay. Our posted rate is above what the subsidy agencies are willing to pay. And so a lot of folks, even though the co-pays are quite minimal, sometimes they have an issue with that.

As would be expected, directors experiencing the greatest financial stress also reported that their programs depended on parent fees or voucher-based subsidies from lower-income families that directors believed could not afford to pay more for services. Although these subsidies help parents who could not otherwise afford care to pay for it,

a heavy reliance on voucher-based subsidies did not appear to support parent demand in a way that facilitated financial stability. Instead, many directors caring for children receiving vouchers described low reimbursement rates, high family turnover, and decreasing availability of vouchers as financial obstacles.

Finally, some programs appeared relatively comfortable financially but did not charge among the highest fees. In those cases, it appears that directors were able to substitute some revenue from parent fees with careful financial management, full enrollment, and support from in-kind or other financial sources. Also, these programs tended to feel less concern over being able to find qualified staff and therefore less pressure to raise additional revenue to maximize staff wages and benefits.

Access to in-kind or “other” funding

Many centers that were most financially comfortable could access substantial resources beyond parent fees or subsidies covering tuition. As described earlier, some centers in the sample viewed in-kind resources as critical for meeting their programmatic goals. One of the most common and most important in-kind resources was space and space-related costs. Some programs were receiving assistance with space costs from churches, others received assistance with space costs from school districts, and still others were private for-profit programs that had finished paying for their buildings. A director of a faith-affiliated program explained,

Well, the church is very supportive. Part of the reason that we can do this in the way that we do it, and at the rate that we do it for parents, is because the church pays for water and power and facilities and the whole shebang. And we do pay for some cleaning services but not what we would have to pay, and we don't [pay for rent on] the space or anything... So the church is a key element.

Another director noted that a key support for her program was space from the school district, saying,

The land that we are on belongs to the elementary school district so that's how they help us.... So they give it to us, basically [free]... because we're on their land and they could be using it for something else, but they're not.... At that time [when the space agreement was renewed], there was a superintendent that was very pro-early childhood education. And he liked the center being here.

Beyond help covering space costs, some faith-affiliated centers received additional supports that appeared to help their financial position. These supports included donations from church members and accounting and payroll support. A handful of other nonprofit programs managed by larger organizations reported similar support as well as supplemental funding from other grants, contracts, and resources awarded to the larger organization.

Finally, many programs reported fundraising to supplement program revenue. Some programs had small-scale fundraising efforts, but some of the most financially comfortable programs reported raising tens of thousands of dollars annually. One director gave the following description of fundraising to supplement a state-funded preschool contract:

We have to have at least \$50,000 a year in donations to run our program. So part of our board's function is raising that every year... Some years we raise the \$50,000, some years we raise \$100,000... We had one donor this last year who is a friend of a board member who came and looked at the center. And he said okay, make me a wish list. He wanted actual things out of actual catalogs that we needed that he could buy for us. Well that got to be... \$20,000.

This director's ultimate goal is to use these funds and savings that result from the donations to expand the number of months of service beyond what is funded through the contract and to increase the quality of services.

Another way to look at these issues is to see them as a function of community norms. The most financially comfortable directors described community values and norms promoting child well-being as a factor contributing to the availability of additional in-kind and financial support for their centers.

Yet, programmatic support from a sponsoring organization may suppress innovation for at least some programs. One director who relied on the church with which she was affiliated for financial backup appears to have accepted a smaller voice in budgeting and financial decisions in exchange for that backup. Despite counting on the church to cover large, typically unexpected expenses that could not be covered through monthly intake of revenue, the director was reluctant to ask for what she needed to enhance day-to-day operations.

Program size and economies of scale

Another factor that emerged from the interviews as an important determinant of a center's financial position was whether the program was operating at a size that took advantage of economy of scale. Several directors felt that, because their programs were small, they were limited in making certain decisions. For example, some directors did not want to be involved with voucher or contract programs because their centers were not large enough to hire staff to cover the necessary paperwork or other requirements. Others felt their small size was an obstacle to additional training and education, either because the director had sole responsibility for a number of tasks (and therefore had little time) or because teachers were already stretched thin and the center could not hire staff to offer some relief. These directors implied that if they were larger, then there would be sufficient overhead to make different decisions regarding resource allocation.

In contrast, one director, who indicated she did not to have make difficult trade-offs in deciding how to allocate additional revenue, explained that a recent expansion brought the center to a different level of financial stability:

We expanded [from serving 45 to 75 children] just because we needed bigger rooms for our threes and fours, and the demand was there.... I knew it would bring in more money, but I didn't realize [it would] make a big difference. Much better as far as being able to pay [staff] better.... In the beginning [when I started as a family child care provider], it was very hard.... I had six kids.... When it was so small, we could only buy whatever we needed. And we had to budget extremely, even food.

Some directors we spoke with managed to make small programs work. One director who was among the highest quality, and financially comfortable, had a very small program (she was the director and one of two teachers). Her operating decisions were structured around minimizing the time she spent on activities she didn't like (paperwork and payroll) and maximizing the time she could spend with the children. She used her flexibility as a owner/director/co-teacher to create an environment in which she really enjoyed being. This director reported that her enrollment had fallen, and that she wanted it to stay there because that made it easier to remain connected to each family involved. However, this director also noted that, although she had personal income from the program, she could not sustain those choices if she was the sole earner in her family.

Allocation of program earnings

Another factor that appeared to affect how extensively directors struggled with revenue was whether they were expected to generate income for certain individuals or organizations not directly involved in day-to-day program operation. Again, we did not ask about this issue specifically, but when it was a major factor for a particular director, it came out during discussion of obstacles or challenges the director faced.

One director explained that she believed both the church with which her program was affiliated and the program's administrative director relied on her program for income that should have instead been used for program operation. When asked about the biggest barriers she faced in achieving her programmatic goals, this director said,

My boss... Because certain things I might want to do, they don't see where it's necessary. And goals that I'm looking at, they're not looking at. They're looking at the money, you know, and I'm trying to look at the education of the kids.

Centers affiliated with faith-based organizations divided sharply in this area. In some programs, the church was clearly interested in realizing earnings from the child care program. In others, the church had no interest in realizing earnings. A director in one such program described it this way:

We [and the church with which we're affiliated] do have separate budgets, which is good for us. Not all church-run preschools are done that way. So when we fundraise, those are our funds to decide how to spend.... We definitely have transparency. They see what our budget is and how the money gets spent. But they're not making those decisions. The board, which is a church board, is making those decisions. So, to me, that's great. I know other church preschools where the tuition goes into one giant fund, and the preschool can say what they want, but they don't necessarily get what they want.... It gives us some autonomy.... It's still the connection to the church board but... I see those directors [where the church is more involved in budgeting] struggling... You know, maybe [the child care revenue the church uses] is going to missions. Maybe they need to pay their staff. But then the church needs to look at itself.

This “profit motive” also appeared to contribute to the financial challenges faced by three directors operating centers on behalf of an absent co-owner or owners. In these cases, the directors were not as explicit about having to allocate some program earnings to absent owners. However, because the centers appeared to have extremely low resources and ongoing financial struggles, combined with minimal director involvement in budgeting and budget-related decisions, profit may have played a role in shaping the resources available for program operation.

One director described her observation of other centers in this regard, saying, “If your goal is to make money—which our goal is not to make money—but if you have to have money to go to a corporation, or you have to have money to go to an owner that is not working on site, you’re going to have to take it from somewhere.”

Director authority for budgeting and other financial decisions

Because directors can influence at least some factors that can constrain, or increase, center resources, how extensively programs were struggling with revenue also appeared related to how involved directors were in financial decision making for the center. Most directors in this study held primary responsibility for financial decisions, from setting parent fees and staff wages to budgeting.

However, in some programs, directors had very little budget authority. In those cases, directors often expressed frustration at not having the ability to make certain operational decisions and about having to fight for what they thought the program needed.

I might say that I need bicycles and tricycles or coloring books... and [the administrators] might be saying “What do you need this for?” Then my hands are tied. If it's something that I really need, I have to get it approved. ... I would love to be able to have a budget that I can just [use] if I need a little paste, paint, whatever I need.... If we had [an administrator] who was more concerned about the day care center, it would be a better day care center.... I can be concerned. I can [be] think-

ing about what we could do [to improve] or what we need, but it won't do me any good if I can't get what I need to run the place.

Programs receiving funding through the Abbott Preschool Program in Hudson County, New Jersey, also described constraints on their decision making. Some directors who had negotiated line-item budgets felt that limits on moving funding across items over the year diminished their ability to provide even higher-quality services. For example, one director wanted to move funding from supplies into field trips. This director also had concerns about not being able to add staff to classrooms with children who had special needs. Several directors lamented having to return benefit funding that went unspent because staff did not need the benefits (such as teachers who receive health insurance through a spouse).⁸

Approaches to fee setting and collection

In setting parent fees, all directors with revenue from parents reported considering market prices, which are influenced by what parents can afford, or are willing, to pay. Similarly, all the directors expressed understanding of the difficult financial circumstances among at least some parents of children in their care. However, fee-setting and fee-collection approaches varied in important ways that ultimately appeared related to centers' financial security. Some directors seemed to concentrate almost exclusively on parents' ability or willingness to pay. Other directors sought a balance between their program's funding needs and parents' ability to pay.

Setting parent fees

Directors who considered budget needs in tandem with parent ability or willingness to pay described their fee setting process as follows. (The quotes below are from four different directors.)

We try not to be the very most expensive. But we are not by any means the cheapest. Don't want to be, because cheapest is not going to be the best quality.

We're at the bottom tuition-wise.... All of us [in this part of the county] have lower fees. So we stay within each other. Budgeting's always a challenge. You know, the cost of care for young families versus getting quality care. And that's staffing, because quality comes from staffing and your environment. Then there's the juggling the needs, what staff needs, what family needs, what... the church board is asking for.

We don't want to out-price ourselves in the community for the kind of program that we are, but we have to get enough to pay the teachers... we have to take in enough tuition each month to meet our payroll. And then we have a supply fee that helps cover other expenses.... I was joking [when I said "We charge as much as we can get"] because there are programs that charge more than us. But in the

other sense, we are not a money-making program [so we can charge slightly lower fees than other programs].

If my husband did lose his job, then yes, I probably would have to raise rates to help support ourselves. But I don't. I guess I don't need it.

Other directors described setting their fees primarily based on what parents can afford to pay. One director of a financially struggling program explained it this way:

I probably could go up. Most of the [other area] day cares charge about \$130 a week. I charge \$100. And I know I probably could go up, but my parents are struggling just to pay \$100.

Another director, also struggling financially, successfully argued against a board recommendation that the program raise parent fees:

I said, "It's unfair. They're having a hard time now..." I had to interject for the parents... I just couldn't do that to them.

Collecting parent fees

We observed similar differences in approaches to collecting fees. Although most directors viewed discontinuing services to families that did not pay their fees as unfair to children, detrimental to families, and generally painful, directors who struggled less with resources tended to set these feelings aside to avoid having to compromise the program. One director explained it this way:

Time and time and time again, when I thought there was no way I could meet payroll... all of a sudden, just enough is there. Not too much, but just enough.... It's a struggle sometimes to get parents to pay.... I'll be honest... I sent out seven suspension notices that if they did not pay me by [a certain date], I was going to have to suspend their children.... Sure enough by [that date], that money was all in. And it was over \$5,000.... It's business... but I hate to do it.... Most parents want to keep their children here. And so when it comes down to it, they're borrowing money... I don't know where they get it... And I don't even want to know where they get it.... I hate seeing a convenience check... you know, on the credit card... But I'll cash it. I have to, because the practical side comes out where I know I have to meet the bills.

For another director, this philosophy evolved over time:

We try to be as fair as possible with people. But we have also found that you need to protect yourself as well. So we set up policies that are fair but don't leave us holding the bag. I used to be so trusting... somebody would come to me with a hardship story. And I'd say okay, all right, that's fine. You know, I don't want to

take it out on the child. You know, he can come. And then I'd see them coming out of the gym.... I've learned.... And we do work with families. We try to make sure that we are being fair. But we don't want to be taken for a ride because what that means is that it reduces the money that we can put in the program to keep the quality the way it should be.

In contrast, other directors placed a higher priority on continuing to serve children and families, regardless of their ability to pay fees. The director who had to meet payroll from personal savings explained,

We've got so many families that are just having a hard time. And you know, I'll work with them. I've got one mother that's supposed to pay me \$200 a week. She does very, very well if she can come up with \$60 a week. Her hours got cut back at work. Her husband left her. He's not paying child support. She can't get help from the state because she makes too much. And when I look at what she's got, she's just paying her basics.... We've got a lot like that. And then we've got some that just won't pay. I've got several that owe me more than \$4,000 in back services. But if I quit keeping the kids, these parents [won't] have a job. If they don't have a job, they don't have a roof over their head, they don't have food to put on the table for the kids.

This director reported that her program was nearly fully enrolled. Given other comments she made, it appears that part of this director's decision to take on the financial burden also had to do with concern that any attempt to increase revenue—either by raising fees or demanding payment from parents in arrears—would lead to under-enrollment.

Most directors recognized that, at some point, fees have to be raised and collected in order to meet the programs' needs. However, directors expressed differences in how much—both in terms of the program and their personal financial security—they were willing to sacrifice before raising fees. Programs that were not struggling financially were willing to sacrifice less before raising fees; these directors tended to report raising fees in response to increasing program costs or annually (or almost annually). Programs that were struggling financially made substantial programmatic and personal financial sacrifices to avoid raising fees; these directors reported they did not raise fees until, as one director said, it “just gets to where we can't make it.”

Thoughts about sliding-fee scales

One potential solution to the problem of setting fees at levels that parents can pay while maximizing program revenue would be to implement a sliding fee scale or scholarship program. Many of the most financially stable programs did so, while programs that were struggling financially did not. For example, the director who let some parents slide when they could not afford to pay also thought an explicit sliding-fee scale would not be fair, saying,

You've got some parents... like my single mom... she supports the two [children] and she pays the full fee. Where you've got another mother that maybe she's made some wrong choices or her husband's made some wrong choices then they're not paying, but they're driving new vehicles. So you just kind of, it's not fair. But I've got some doctors and lawyers that have their kids here. And I know they could probably afford to pay more. But then you've got the ones that just because they didn't have the opportunity to go to college, maybe they don't have a better-paying job.... You just have to charge one price. I just don't think it's fair to change because maybe it's different circumstances.

Careful financial management

A final element that appeared to be associated with programs' financial stability or comfort was the emphasis that directors placed on thoughtful financial management. One director explained the importance of this, saying,

I have goals [related to administration].... You're financially stable. It's very, very frightening to be hearing that programs are struggling. And when programs are struggling, if you haven't set out your financial goals and have your plans, then you're looking at maybe leaving a lot of people in trouble.... We don't have a lot of child care. And so when we have even less quality child care, if you are a mom, and all of a sudden your center or your family child care provider has to shut down because they can't afford to keep going, we're just going to domino down the road again. Mom's not going to be able to work.

Directors described several specific financial management strategies. One director, when asked what she had to put into place to achieve her goals, replied,

In order to achieve these things, you have to have a good solid budget. You have to have a real solid financial plan in order to achieve anything.... So we have really great financial statements, and we're audited... So we can follow that budget and see how we're doing so that we know we can provide these things.

The program above was in a comfortable financial position. But even directors of programs with fewer resources described the benefits of careful financial planning. For example, a director of a program with relatively modest resources, when asked what she had to struggle with when she expanded her center, said,

Initially, of course, where are we going to get the money to do it?... We tried to get some kind of prediction on growth in [our town].... So we asked the school district.... I had a treasurer and she did the whole spreadsheet on this is how many kids [might enroll if we expand]... and we've saved up this amount of money. Now if we [expand capacity] to this number of kids and we need more staffing and the mortgage, can you afford it? And there was a place that you're

not in a good [position], and then there's the break even, and then there's "Okay, we'll be good." We've got to reach that number. It's, like, ten more kids.

The quote above illustrates a number of characteristics often shared by programs in a relatively comfortable, or pinched but okay, financial position. The centers built a funding surplus, considered the scope of demand (and revenue), and through a budget, had a clear understanding of—and placed limits on—operational costs. Another director summed it up this way:

Again, it goes back to that what I said about financial management. We are, first of all, a not-for-profit. So there's no corporation. There is no owner taking any funds. So all the money that comes in for tuition goes to pay the expenses. We pay our rent. We pay our taxes. We do two fundraisers a year.... We support the ratios by making sure that everybody pays their tuition on time... and by balancing our budget so that we have the funds, and because in the plan, we always have that little bit of cushion just in case.

Avoiding or limiting financial risk was another strategy that directors of more financially comfortable centers used. A director considering an expansion explained,

With the economy the way that it is and bank loans the way that they are, [expanding] might be a challenge. You know, we could but... it means that we personally put our own homes at risk.... And we're willing to do that, as long as everything works well..... We take it very seriously. We want to make sure that we don't bite off more than we can chew.... we'll do it when it's comfortable for us to do it... but we're not going to put ourselves in a risky situation.

In contrast, directors that were struggling financially typically described no financial planning. One director we asked to explain her decision making about how to allocate revenue across rent, food, salaries, and materials for the classroom said,

Well, when I get the big check [from the voucher agency]... that comes in [the middle] of each month. When that check comes I think, "Wow, I could buy supplies...." So once that check came in, cleared, I went on Saturday, then I bought a whole bunch of stuff for the kids.... So that's basically what I do. I have to wait for that big check to pay my rent and to buy food and to buy whatever supplies are needed. And then the other check that comes in every other two weeks, and whatever I get from the parents, I [use to] pay the staff.

Although it is difficult to plan with insufficient resources, it appears that this check-to-check approach to financial management was contributing to some challenges faced by programs in more precarious financial positions.

Connections to the Conceptual Framework

Another way to look at these findings about revenue is to summarize the discussion above in terms of the conceptual framework guiding this study (see figure 1). The evidence confirms that factors in each ring of the conceptual framework relate to sufficiency of revenue. Findings within each ring are summarized below.

Director and program characteristics

The analysis described above suggests that director and program characteristics were closely associated with whether the centers in this sample were financially struggling or relatively comfortable. Among the important program characteristics were the size of the program, earnings goals of owners or executives (in both for- and not-for-profit) programs, additional revenue or in-kind resources contributed by the organizations with which the centers are affiliated, and the authority for financial and budgetary decision making given to the center director. Among the important director characteristics were the strategies that directors employed to set and collect fees, and the emphasis directors placed on careful budgeting and financial management.

Community and market factors

Similarly, a range of community and market factors shaped revenue patterns. Parent demand and ability to pay for care were among the most important community and market factors associated with variations in financial stress or comfort, at least for some centers. Although most directors described parent ability to pay for care as a financial constraint, the limits of parent ability—and the implications of this—differed across centers. As would be expected, programs experiencing the greatest financial stress tended to depend on parent fees or voucher-based subsidies from lower-income families that directors believed could not afford to pay more for services. Programs that were the most financially comfortable tended to depend on parent fees from middle- or higher-income families or on contract-based subsidies through the Abbott Preschool Program or the California Department of Education.

Additional factors played a more secondary role in shaping financial comfort, and the importance of various factors differed depending on whether programs were struggling with funding or financially comfortable. For example, when setting fees, directors in this study described different considerations. Programs that were more financially comfortable typically considered the fees charged by other nearby programs. In contrast, programs with the greatest financial struggles tended to focus more on parent ability to pay than on effectively competing with other programs in their area. Similarly, the most financially comfortable directors described community values and norms related to child well-being as a factor contributing to the availability of additional in-kind and financial support for their centers.

Federal, state, and local policies and initiatives

According to the chain of evidence in the interviews, federal, state, and local policies and initiatives primarily appeared to shape centers' financial comfort through their effects on parent demand. As described earlier, contract-based funding (including state-funded preschool or prekindergarten) tended to be associated with a higher financial comfort among centers serving low-income families, even in centers that needed to find other funding to supplement the contract-based funding. Although vouchers also help parents who could not otherwise afford care to pay for it, heavy reliance on voucher-based subsidies did not appear to facilitate financial stability. Based on the interview data, this seemed related to differences in the stability of enrollment across these two funding mechanisms.

As will be discussed later, licensing policies and voluntary accreditation could increase financial stress because they impose both direct and indirect (compliance) costs. However, directors mainly discussed the financial implications of these factors in terms of increasing parent demand. Finally, federal, state, and local policies and initiatives—including the Child and Adult Care Food Program, grants for literacy or other classroom improvements, teacher scholarships, and others—offer direct financial support to centers or teachers. Although these initiatives clearly supported centers' financial position, directors mainly discussed the benefits of these initiatives as helping achieve nonfinancial goals.

Wrap-Up

These data provide new insights into how financial and in-kind resources are a vital building block of child care quality. Centers in this research differed in their revenue sufficiency and in their financial strain levels. This distinction matters because financial stress or comfort appeared related to variations in observed classroom quality. Classrooms with the lowest observed quality were typically in centers characterized as struggling with funding. Classrooms with the highest observed quality were all in centers characterized as financially comfortable or in centers characterized as pinched, but with higher resource levels.

In addition, the findings in this section further highlight that various program and director, community and market, and federal and state and local policy factors influence programs' financial stress and how this stress plays out in the classroom. The fifth chapter of this report explores how the findings on revenue, along with findings on staffing and standards, might inform policy and practice.

Standards Guiding Program Practice

Programmatic standards are a key mechanism used to ensure a basic level of care or to help centers improve the quality of early care and education. Various standards mechanisms apply to early childhood programs, and they differ in their purpose and in how voluntary they are. In some cases, such as licensing, the standards are universally (or nearly universally) applicable and are a requirement for operating legally. In other cases, such as contract funding, the standards are a condition of receiving specific funding. In still other cases, such as accreditation, centers voluntarily agree to reach the standards in exchange for recognition that they have done so.

The directors in this research differed in the standards they used to guide programmatic practice and in how the standards affected their programs. These differences were another factor related to variations in the ECERS-R and CLASS scores in the classrooms we observed. This section of the report presents results related to programmatic standards and their relationship to observed classroom quality. It includes the following subsections.

- *Classifying centers according to variations in director's views and adoption of different standards* lays out the different licensing, accreditation, and contract-funded subsidy standards to which centers looked for guidance, and key differences in how directors viewed licensing.
- *Links between standards and observed quality* discusses the association between observed classroom quality and the standards directors used to guide programmatic practice.
- *Explaining variations in views of (and chosen) standards* describes how directors evaluated the benefits and costs associated with different requirements and how this assessment shaped directors' decisions about the use of standards in their programs.
- *Context affecting views of—and chosen—standards* presents additional information about the factors that impede or facilitate the adoption of more comprehensive or stringent standards.
- *Connections to other parameters in the conceptual framework* returns to the conceptual framework to explore how other factors play into directors' thinking about programmatic standards.
- *Wrap-up* briefly recaps the key findings.

Categorizing Centers According to Variations in Directors' Views and Adoption of Different Standards

Directors differed in their views of licensing, accreditation, and contract-based-funding requirements. We categorized centers in this study according to a combination of the standards they adopted and their views of licensing requirements. Centers fell into one of the following categories in terms of the requirements most influencing their programmatic decisions.

- Licensed or license exempt
 - with a generally positive view of licensing;
 - with a mixed (i.e., generally positive with some complaints) view of licensing;
 - struggling to comply with requirements or seeing requirements as unhelpful; or
 - with a neutral view of licensing.
- Voluntarily accredited, no subsidy contract
- Subject to standards associated with a publicly funded contract for service delivery (with or without accreditation) through
 - California Department of Education in San Diego County or
 - Abbott Preschool Program in Hudson County, New Jersey.

In general, falling into one category rather than another reflected variations in how directors evaluated the costs and benefits of the standards within their own centers' operating contexts (i.e., the policy, market, and program/director constraints and supports affecting centers). Each of these categories is explained below.

The sampling approach for this study specifically excluded programs funded through Head Start or Early Head Start. Further, although none of the states included in this study had such a system at the time the research was conducted, many states have implemented tiered licensing systems (quality rating and improvement systems, or QRIS) that, in addition to requiring programs to meet basic standards to operate legally, establish one or more higher levels of standards that programs may voluntarily choose to meet. Although the discussion below addresses directors' thinking about licensing, accreditation standards, and requirements associated with contract funding, the findings are also relevant to better understand how directors may view Head Start and QRIS.

Licensed or license exempt

Licensing requirements were a reality for almost all the directors in this study. Unlike most other policy interventions, licensing is mandatory for most centers. Thus, it is a

potential mechanism for reaching most providers and the children they serve. However, the interviews with directors indicate variation in the influence of licensing on programmatic practices.

Some directors looked to licensing as their primary source of information about good practice and depended heavily on licensing for guidance. Other directors took advantage of regulatory exemptions for faith-based organizations, choosing to take guidance from only some (or no) aspects of licensing.⁹ Some directors clearly viewed licensing as a minimal threshold and supplemented guidance from licensing with ideas from other external standards.

Beyond meeting licensing requirements, centers in most locations were also subject to various building and fire codes. Although some directors commented on the multiplicity of inspectors and challenges in meeting building codes (particularly when starting up), those issues are not explored in this report.

Director perspectives on licensing fell along a continuum. At one end were those who were almost uniformly positive about the role of licensing in helping them achieve their quality-related goals. In the middle were directors who expressed mixed feelings about licensing; these directors found some aspects of licensing important and other aspects problematic. At the other end of the continuum were directors who struggled to meet licensing standards or who did not see licensing standards as helpful in their efforts to provide quality care to children. Finally, one group of directors was neutral about licensing; these directors were often meeting higher standards and described regulatory requirements as minimally affecting their decision making and operations.

Generally positive view

Some directors saw licensing in a positive light, reporting the guidelines generally helped them and their program. Some of these directors described licensing as important in helping improve the quality of care and in ensuring children's health and safety. Directors with this perspective typically noted that licensing is, "there to protect the kids, and I think that's great."

This category of programs with a generally positive view included three centers in Jefferson County, Alabama, that could legally operate without a license but elected to voluntarily undergo regulation. As one of these providers explained,

You need every bit of it. And we needed those visits from the [licensing consultant] assigned to us....You need [somebody to] to pop in. You need [somebody] to just walk in and see how things operate. Because if you're doing what you're supposed to do anyway, you don't have anything to hide.

Although their programs did not have to be licensed, these directors—and many others for whom licensing was required—viewed the requirements and inspections as worth their participation.

However, directors with a generally positive view differed in whether they saw licensing as a minimal floor or as a sufficient indicator of quality. Some directors believed that licensing standards were too low. These directors often mentioned that they found it important to exceed licensing requirements in some areas, such as having teachers obtain additional training or operating with lower child-to-teacher ratios or group sizes.

Mixed view: generally positive but with some complaints

Another subset of the sample can be characterized as more mixed in its reactions to licensing. This group often described licensing as a generally positive influence and an important mechanism for supporting good-quality care. However, this group also emphasized more negative aspects of the regulatory system. This category of centers included one director/owner in Jefferson County, Alabama, who had opted out of licensing because of the stress associated with the inspections. Although this director was not licensed, she also saw value in the regulations; she reported that her program had been voluntarily licensed in the past, that she still referred to the regulations for guidance, and that she still met most of the licensing standards.

This group's specific criticisms of the licensing system varied. Box 3 shows some concerns raised by these directors.

Struggling to comply or seeing requirements as unhelpful

Some providers primarily thought licensing negatively affected their centers. Three of these providers were licensed and seemed to view the system as irrelevant, arbitrary, useless, poorly designed, and/or difficult to comply with. They also explained that the system took valuable staff time away from the children. When asked what she needed to accomplish her goals, one director explained,

I need time. That's what I need. And the state to stop breathing so heavily down my back when you know there's nothing wrong here. And stop changing the regulations.... If the regulations were fine eight years ago, why are you changing them now?

The fourth director in this group was license exempt. This director clearly described her reasons for not seeking a license, saying the paperwork was challenging and the standards would place too many constraints on the program. At least one director in this group did, however, see a role for licensing for *other* centers, saying that it was helpful for centers that "didn't know what was good and bad."

Generally neutral

Finally, some sample members were generally neutral about the role that licensing played in the operation of their centers. These neutral perspectives can be attributed to the contract or accreditation status of these programs. Because they were following more stringent requirements, licensing was not as salient in their decision making about programmatic practice.

Box 3. Concerns Directors Raised about Licensing

Although most directors with whom we spoke generally saw some value in licensing standards and regulation, some shared some specific criticisms of licensing. Some of the most frequently mentioned concerns include the following.

- ***Standards are too “nitpicky.”*** One director described licensing as essential because “you want your children to be safe” but she also said centers were “overly regulated.” She indicated that she knows and accepts her center will be found in violation of some rule or another. As much as this director “believes” in safety, and in standards (as evidenced by her center’s NAEYC accreditation), she felt there were too many licensing requirements to realistically and completely meet every one and she preferred to invest her efforts in other areas. On a related point, some directors noted certain requirements that did not make sense or only created unnecessary work.
- ***Standards are overly reactive.*** Some directors described large burdens associated with compliance with new regulations designed to address tragic, but largely isolated, events. For example, directors in King County, Washington, talked about requirements related to cords on window shades, and directors in Hudson County, New Jersey, talked about a costly requirement to complete a comprehensive environmental site assessment and any remediation indicated by the environmental assessment. Although these rules were put into place to prevent child injury or death, some directors felt the regulatory burden was not justified by the real level of risk. Several directors with this perspective also felt that the risk could be more effectively—and more economically—reduced through better supervision and care on the part of the caregivers.
- ***Inspections are misfocused.*** Directors also mentioned concerns about the quality of the licensing inspections. Some felt that the inspectors focused on unimportant issues, sometimes to the exclusion of issues that posed dangers to children. Some directors mentioned training of licensing consultants. Finally, some directors also had concerns about different licensing inspectors applying regulations inconsistently.
- ***Insufficient integration of licensing with other standards.*** Finally, a few providers generally viewed licensing as an important and necessary system in principle, but expressed concern about integrating requirements across different standards systems. For these programs, which were typically accredited or providing subsidized care under a contract, licensing was only one of several layers of requirements.

Voluntarily accredited

Licensing regulations are often seen as a tool for ensuring every child care program maintains a floor of health and safety. Some licensing requirements also address developmental needs beyond health and safety. However, because licensing is often viewed as

a minimum threshold, parents, programs, policymakers, and advocates sometimes look to standards beyond licensing. Consequently, several accreditation programs to shape and evaluate early childhood programs have been developed over the past several decades.

In general, accreditation is a voluntary process in which child care centers meet standards set and verified by the accrediting body. All three accrediting bodies that directors mentioned required a course of self-study and an on-site validation visit. The American Montessori Society (AMS) (undated) describes its accreditation process as follows.

AMS Accreditation is a voluntary process undertaken by schools that are committed to continuous school improvement. Through a documentation of compliance with AMS Standards and a comprehensive self-study process, a school defines itself in terms of strengths and areas that need improvement and validates that the school is what it says it is and does what it says it does. However, the real value resides in the good things that happen to the school as it achieves and maintains accreditation. The self-study process is one of discovery and empowerment.... It results in strong self-evaluation and a strategic plan that fosters continuing school improvement.

While various organizations accredit child care facilities, directors in this study most often referred to NAEYC accreditation. Although the specific content of requirements for NAEYC accreditation differs from AMS accreditation, the philosophy and process illustrated in the quotation above is similar across the accreditation systems. Because accreditation is voluntary, and because other factors were clearly more salient for some centers, we only discussed accreditation with about half the directors in this study, including directors of 6 centers that were not accredited and all 10 that were. It is also notable that, at the time of the data collection for this study, centers were subject to relatively new standards and documentation requirements for NAEYC accreditation.

In the study sample, 10 centers were accredited, 2 were in the early stages of pursuing accreditation, and 26 were not accredited. (This does not represent the rate of accreditation in the population of centers nationally or in the study sites.¹⁰) Among currently accredited programs in the study sample, nine were NAEYC accredited and one was accredited by the AMS. Among the two in early stages of accreditation, one had previously been accredited by NAEYC and was now considering accreditation through the National Accreditation Commission of Early Childhood Programs (NAC); the other was working toward meeting the NAEYC accreditation requirements.

Additional results related to directors' views of accreditation are presented throughout the sections below.

Subject to standards associated with a publicly funded contract

Many states offer free or low-cost child care or preschool programs to parents through contracts with early care and education providers. Centers in which services are funded through these contract-based programs are typically subject to additional standards beyond what is required by licensing. In this study, centers met additional requirements associated with the following contract-funded programs:

- Abbott Preschool Program in Hudson County, New Jersey
- California Department of Education State Preschool and General Child Care in San Diego County
- Early Childhood Education and Assistance Program (ECEAP) in King County

The requirements associated with each of these contract-funded early care and education programs differs but, in general, centers must (among other things) meet lower child-to-teacher ratios than required by licensing, implement specific curricula and procedures for assessing children's development, and employ teachers who meet additional educational requirements. Further, the Abbott Preschool Program requires certain classroom materials and curricula (specified by local school districts), and it requires programs to pay lead teachers according to the salary scale for public school teachers.

Information about directors' views of requirements related to contract funding is presented throughout the sections below.

Links between Standards and Observed Quality

Combined with the other key factors described in this report (directors' views of quality, sufficiency of revenue, and expectations and supports for staff), the standards used to guide programmatic practice were associated with some of the variations in observed classroom quality:

- All centers relying on Abbott Preschool Program standards had classrooms with among the highest observed quality.
- All centers that were struggling to comply or did not see the value in licensing (and did not meet any additional standards) had among the lowest CLASS and ECERS-R scores.
- A positive view of licensing (with or without complaints) was typically associated with better-than-low scores on the CLASS and ECERS-R, but other factors mattered in determining where (above that) a program fell.

- Accreditation—whether NAEYC or AMS—and/or reliance on California Department of Education standards, when combined with other key factors, appeared to help programs achieve higher quality. However, unlike Abbott Preschool, these standards were insufficient on their own to ensure that programs in the study sample achieved the highest scores on the CLASS and ECERS-R.

Explaining Variations in Views of—and Chosen—Standards

Differences in the category of standards to which directors referred were ultimately related to how directors viewed the costs and benefits associated with each system of standards. Although few directors explicitly talked about evaluating the costs and benefits of different systems, most directors clearly considered the following benefits (at least implicitly) when choosing one set of standards and rejecting another.

- Do the standards support the director’s view of good program practice and good child outcomes?
- What is the availability and nature of technical assistance associated with the standards?
- Are the standards associated (either explicitly or implicitly) with funding opportunities?

In light of the questions above, the subsections below detail how directors described considering the benefits associated with different standards. Following that discussion, a final subsection offers information about how directors weighed those benefits against the costs of complying with given standards. Again, a key theme throughout the findings is that the context in which the centers operated was important to understanding directors’ viewpoints. Additional information on that topic appears in the “Context affecting views of—and chosen—standards” section.

The benefits of different standards discussed below have a potential relationship to quality beyond their effect on directors’ perceptions and choices. The differences in the benefits across systems of standards appear to also contribute to the effectiveness of the standards in supporting higher quality as measured on the ECERS-R and the CLASS. That is, the extent to which certain standards support good programmatic practice, include technical assistance, and are associated with funding seems to affect not only whether directors choose those standards, but also whether those standards effectively improve the child care environment.

Do directors believe the standards support good programmatic practices and child outcomes?

During the interviews, we asked many directors about licensing, accreditation, and the requirements associated with subsidies funded through contracts. In response, many directors talked about how the applicable standards supported good practice or about how the standards conflicted with—or failed to support—their ideas about good practice.

Directors who viewed licensing positively described several different aspects of the regulations they found helpful. In general, these directors appreciated having guidelines to help them identify practices supportive of healthy child development and to help shape their day-to-day operating procedures. For example, directors relied on maximum child-to-staff ratios as they determined how many children to enroll in the program and the number of teachers and children in each classroom.

A number of directors also saw staff training requirements as important licensing guidelines. One director, who could have operated legally without a license but chose to pursue one, explained that the requirements were a “tool” that helped her motivate staff to engage in training; she said it was helpful to have “someone behind me” in setting the expectation. Similarly, some directors felt that licensing requirements helped them justify and explain good practice to parents who might otherwise have inappropriate expectations.

Likewise, most directors of accredited programs said they decided to pursue or maintain accreditation because it served as a resource and motivation for a higher goal. One director explained her choice to be accredited by saying, “I always like to know where I am and where I can improve.” Another said that maintaining accreditation kept her center “marching on the path” and “on our toes.” These directors also thought accreditation facilitated continuous improvement. For example, one director described accreditation fitting into her broader goal to “get better” rather than remaining “stagnant.” She saw accreditation as offering a step-by-step framework and guidelines for improvement. She also noted that before the staff began working toward accreditation, the children were “happy” but “we weren't... actively teaching them.” Others—such as the director who said it is “a good opportunity for introspection”—seemed to appreciate the nudge toward self-evaluation that accreditation offers. In general, accredited programs viewed it as a valuable system for quality assurance and for supporting a sense of professionalism among staff.

In contrast, other directors’ comments suggested that they did not feel particular standards supported their program goals or child development. Some directors rejected licensing standards as irrelevant, overly costly, or too burdensome. These directors instead relied on their own beliefs—or their organization’s beliefs—to guide program practice. One director of a faith-affiliated program indicated that her center was not

licensed because of certain conflicts with her program's goals; the board of directors wanted to minimize government involvement in their day-to-day operations and to ensure that they could continue using a Christian-oriented curriculum.

Likewise, some directors believed that accreditation did not sufficiently support quality. These directors explained that their view of quality differed from how the accrediting bodies defined it. Or, directors mentioned that they did not view accreditation as a reliable indicator of quality. At least one director mentioned seeing programs that were accredited and thinking they were not as good as they "should be." Another believed the accreditation standards were worthwhile but she also said that because programs were not adequately monitored, they did not necessarily meet the standards and she did not "want to be a part of that."

What type of technical assistance is associated with the standards?

Another factor differentiating the three types of standards is the nature and level of technical assistance associated with the standards. Some directors described technical assistance as a benefit of the requirements that guided their program. That is, the technical assistance was directly valuable to the program. Other directors had a similar viewpoint but explained it slightly differently, saying that technical assistance was important for helping them meet the standards.

Some directors described the licensing agency and individual licensing consultants as a key source of technical assistance or as a key support. For example, one director explained that she worked with her licensing inspector to expand her center to include services for toddlers. The inspector walked through the physical space with the director so, together, they could identify the physical and practice changes needed for younger children. Other directors talked about the importance of their relationships with the licensing consultants. Directors who viewed licensing consultants as a valuable source of support tended to also rely on licensing regulations as a guide to programmatic decisions. In contrast, those who viewed licensing consultants or inspections as a burden were more likely to be struggling to meet the standards or to view the standards as unhelpful.

One director explained how her view of licensing as a support had developed over time, saying,

A lot of the time, people think "Oh, the licensor is coming," and they get intimidated by it. But they're only here to help us. They're here to help us. They really are.... I didn't [view it as a help] at first because I didn't completely understand.... Over time,... I saw that she's on our team. They're not out to get you. They're helping you to promote a better program. So I had to get that insight. I had to learn that.

In terms of technical assistance tied to accreditation, directors who relied on accreditation standards tended to view the self-study process, and activities related to meeting the standards, as self-directed technical assistance. Beyond that, when asked what needed to be in place to achieve their accreditation goals, a number of directors mentioned different forms of technical support and assistance.

For some directors, accreditation assistance initiatives operated by local resource and referral agencies prompted their initial interest in accreditation. One of these directors said the accreditation assistance had been “wonderful” and had encouraged her to make several specific changes such as implementing weekly lesson plans and adding storage space. A few respondents mentioned other center directors as a key source of support when they were preparing their centers for the validation visit. For example, one director described participating in an accreditation support group that offered mentoring and coaching throughout each stage of the process. Finally, other directors relied on technical assistance offered by the accrediting organization through conferences, web sites, and printed information.

By far the most systematic and comprehensive technical assistance tied to standards was reported by directors of programs caring for children funded through the Abbott Preschool Program in New Jersey and Department of Education contracts in California. Center directors invariably mentioned technical assistance as a key benefit of the funding sources. Centers involved with the Abbott Preschool Program funding described mentor teachers who observed classrooms several times a year and provided guidance to classroom staff. Centers receiving funding through the California Department of education similarly described onsite technical assistance as well as training and materials associated with the funding stream.

Are the standards associated with funding?

A final key difference across the three types of standards to which program directors in this research referred was in whether funding was tied to the requirements. Again, although directors did not usually discuss their assessment of the costs and benefits associated with different sets of standards in an explicit way, it was clear from the interviews that directors considered the role that their choice of standards played in supporting revenue.

Acceptance of licensing (when voluntary) or accreditation standards may or may not be associated with increased revenue. When licensing and accreditation do affect revenue, the director comments suggest it is typically an indirect connection, either through

- increased parent demand and willingness to pay for services,
- higher reimbursement rates for voucher-based subsidies, or

- access to additional funding sources such as grants that are conditional on being licensed or accredited.

Some directors' thoughts about how standards were associated with funding are presented below.

In Jefferson County, Alabama—where there are a relatively large number of legally unlicensed centers—some directors noted that being licensed helped them market their program. For example, directors described their decision to be licensed as something they could “hold out” to prospective families to help them “feel good” that the center is evaluated by an external organization. These directors believed that, by attracting more families, licensing indirectly increased revenue, thus supporting the directors' vision for the program.

Marketing the program to parents was also a factor that directors of accredited programs saw as a benefit of meeting those standards. Although directors mentioned financial and human resource costs of accreditation, they often noted at the same time that these costs were worthwhile because the community's perception of their center mattered for both center esteem and center revenue. For example, one director jokingly described the process of accreditation as “voluntary torture” but said it was worthwhile to show the community—including parents and competing centers—it was a high-quality program. Another director said that accreditation “gives you more credibility.” One director explained that when the center's accreditation lapsed for a year, enrollment dropped. This director attributed the drop in enrollment to not being able to advertise that the program was accredited. Another director suspected that at least some parents did not understand everything that accreditation entailed but nonetheless looked for accreditation when choosing a center. This director also thought parents would not be willing to pay her center's relatively high fees if the center dropped its accreditation.

Beyond its role in supporting demand for care, directors described accreditation—and sometimes licensing—as facilitating access to additional funding. Some directors had received grants to help with the implementation of new licensing requirements. Some directors who were participating in initiatives to assist with accreditation also received grants to help implement changes to meet the standards. One provider viewed accreditation as attractive to potential funders, saying that part of the reason the center was accredited was to “continue receiving all the funding we receive.” Another director explained that accreditation was a requirement for serving families receiving military-funded voucher-based subsidies and indicated that this was one incentive her program had for pursuing accreditation.

For centers receiving funding through the Abbott Preschool Program or California Department of Education contracts, receipt of funding is conditioned on meeting the requirements. In the case of the Abbott Preschool Program, which is free for parents and

universally available in the Abbott districts, most centers serving age-eligible children have no choice but to pursue the funding and meet the requirements if they are to continue serving that age group. Very few centers serving 3- and 4-year-olds in the Abbott districts are funded through parent fees or voucher-based subsidies, rather than through the Abbott Preschool Program. In the case of the California Department of Education contracts, centers may have more options in the population they serve (and therefore among funding sources), but funding still appeared to be a central factor in the choice of those directors to meet the standards associated with the contract.

Considering the benefits in light of the costs of compliance

Beyond considering the benefits of various sets of standards, directors appeared to weigh the costs and feasibility of complying with the standards. Costs of implementation, and the ability of programs to bear the costs or otherwise meet the requirements, were a key factor affecting directors' perspectives on the different systems of standards. For example, two directors may have shared a positive view of certain standards, but because they faced different constraints—or had differing capacity to bear the associated costs—they reached different conclusions about the standards they would use to guide their programmatic decisions. As they described their thinking about the costs and feasibility of meeting standards, directors mentioned both monetary outlays and opportunity costs associated with using programmatic resources to meet the requirements instead of using them for other things.

Because most programs in the research sample were required to have a license, the costs of compliance with regulatory standards were generally unavoidable. In these cases, directors described certain operational trade-offs they made to cover the costs of compliance. Among programs that could (and did) legally operate without a license, costs of compliance were sometimes offered as one reason behind that decision. The director who cited the stress involved in inspections is one such example. Others described opportunity costs of licensing, explaining that meeting licensing requirements took scarce time away from other valuable management or teaching activities.

Of the three types of requirements, costs and feasibility of compliance were most often mentioned in the context of accreditation. Although some directors mentioned the ratio and group size or teacher qualification requirements as unaffordable or unfeasible, they more often stressed the time involved in documenting compliance with required classroom practices. For some directors, the benefits of accreditation did not justify the costs. One director summarized this perspective of accreditation by describing it as “too complicated, too expensive, [and] too challenging.” Another director who reported her center met many of the requirements said the staff was not pursuing accreditation because the time needed to show that they meet the requirements was “just overwhelming.”

Directors of centers receiving a majority of funding through contract-based sources added yet another consideration to the evaluation of costs and benefits of various systems of standards. These directors sometimes discussed the costs of compliance in light of the amounts covered by the contract. In centers funded through the Abbott Preschool Program in New Jersey, it appeared that, with few exceptions, the funding level was sufficient to cover the mandated services. In California, several directors with Department of Education contracts explained that the reimbursement level was not sufficient to cover the costs of meeting the required standards. In those cases, directors who served children through contract-based funding sources expressed commitment to the standards and consequently supplemented the contract funding with other resources (and typically managed to remain in a relatively secure financial position).

Context Affecting Views of—and Chosen—Standards

The interviews with directors highlighted a number of key factors that obstructed the adoption of higher programmatic standards. They also highlighted several key factors that could support or encourage the adoption of higher standards. These elements of the context appeared to shape directors' evaluation of the costs and benefits associated with different systems of requirements. Some of these factors are described below.

Alignment between directors' vision of quality and the standards

An earlier chapter of this report explored differences across directors in how they defined, or thought about, quality. That analysis showed some directors had definitions of quality that focused more on children's safety and sense of belonging, while others focused more on children's esteem and cognitive needs. Further, directors differed in whether their views of quality were primarily based on intrinsic beliefs or on extrinsic knowledge integrated with intrinsic beliefs.

The different standards, to a certain extent, line up with these differences in directors' views of quality. For example, licensing requirements tend to focus on safety and consistency, while accreditation and contract-funded program requirements extend into more of the environmental elements affecting cognitive and social-emotional development. Similarly, it is possible to comply with most licensing standards regardless of whether an understanding of the requirements is successfully integrated with intrinsic beliefs. However, at least some accreditation and contract-funded program requirements can only be successfully implemented when understanding the intent behind the requirements. Thus, we would expect to see a connection between a director's ideas about what quality is and the standards on which the director relies to guide her program.

The relationship between directors' beliefs about what is important and choices of standards can flow both ways. In some instances, the directors' comments suggested that the chosen standards were influencing their beliefs about what is important. In other

instances, beliefs about what is important appeared to affect the selection and implementation of certain standards.

Early childhood labor pool

The supply of teachers was another important contextual factor that we observed influencing directors' choices about the standards on which they would rely when making programmatic decisions. Directors expressed this in terms of the important role that staff played in helping the center achieve accreditation and in terms of the obstacles that staff presented in meeting licensing and accreditation standards.

Several directors described their staff as a valuable asset during the accreditation process, explaining that getting their teachers involved was essential for meeting the requirements. For example, one director said that her center failed at its first accreditation attempt because she did not delegate enough of the process to the teachers. The next year, the center was successfully accredited because the director had given the teachers more responsibility. Another director said that her staff were initially reluctant to take on the work of accreditation but eventually decided to do so because they "like being on the cutting edge."

Other directors described teachers as an obstacle to reaching for accreditation. Like the directors above, these respondents noted the importance of making sure their staff was "on board" with the accreditation process and requirements. However, despite working to "sell" the concept to staff, some directors were unable to convince their teachers of the value of the process. For example, one director said that she had described accreditation to the staff but did not receive any indication of interest. Although the center had other resources in place to pursue accreditation—and the director thought "it was needed"—the center was not doing so because "a lot of people don't want to go through that."

Many directors also—either directly or indirectly—referred to the supply of labor as an obstacle to meeting staff education and training requirements associated with licensing, accreditation, and contract-funded assistance programs. When talking about licensing, some directors said it was difficult to find teachers with the necessary educational background, and sometimes noted they could not afford the wages necessary to hire or retain qualified staff. Directors also explained that after they pay for the required training or education, teachers leave for higher-paying positions, sometimes in other centers, sometimes in elementary education.

The disconnect between the qualifications in the labor pool and educational requirements was one of the most frequently mentioned challenges of pursuing accreditation, in both in accredited and unaccredited centers. Sometimes directors expressed this by disagreeing with the requirement, such as one director of an accredited center who thought certain candidates without degrees might be qualified but said the

hiring standards (requiring that a certain share of teachers have degrees) are “not my choice, that’s NAEYC’s choice.” Another director explained “There isn’t always the pool of folks” who have the right qualifications. To overcome this obstacle, this center put resources into training and education so teachers could work toward the requirement.

Not all directors felt they could successfully address the barrier to accreditation posed by the teacher education requirements. Another director explained that her staff was very experienced but they did not have the “right degrees” for accreditation. This director viewed the accreditation standards for teacher education as unrealistic, especially because, in her view, full-time staff did not have time to obtain college credits.

Board or owner mandates/decisions

In some centers, boards of directors or owners had some (or total) influence over decisions about the standards that would be used to guide program practice. Boards and absent owners or co-owners appeared to have the greatest role in deciding whether programs would pursue licensing (in Jefferson County, Alabama) and accreditation (in all the study sites).

One director of a faith-based program suggested that she might be interested in being licensed but this was something that would not be considered—even remotely—by the board of directors overseeing the center. Other centers experienced a more indirect influence as a board or corporate office made decisions (such as about child-to-teacher ratios, budget, or revenue targets) that ultimately prevented the program from seeking accreditation. In general, accreditation was not a consideration in centers with absent owners or co-owners. On the other hand, for some directors, governing boards were a key factor behind the decision to pursue accreditation or funding through contract-based assistance programs (with the associated standards).

Resources available to program

A final key contextual factor that appeared related to directors’ evaluations of the costs and benefits of different systems of standards was the financial resources generally available to the program. Three aspects of the relationship between standards and resources came out during the interviews. First, some directors flatly explained that they did not have the funding needed to meet certain requirements. Second, directors described the importance of strategically reallocating resources to meet the requirements and of having the necessary funding. Third, directors of programs involved with the Abbott Preschool Program discussed how funding for the time not covered by the contract and its requirements affected their centers.

The earlier discussion about directors’ assessment of costs of complying with different standards focused on how directors considered whether the costs were worth the benefits. This appeared an especially salient consideration in the decision to pursue ac-

creditation. To a certain extent, this consideration seemed mediated by how much funding the program had to work with. One director reported that she did not have the money to pay the fee required by the accrediting body. Another mentioned a concern that increasing accreditation fees are a factor discouraging other centers from pursuing accreditation.

The most common—and sometimes largely intractable—concern related to covering the costs of accreditation, however, revolved around staffing costs. One director thought it would be “crazy” to require teachers to have a bachelor’s degree if a center could only afford to pay them \$10 an hour. Another director described the challenges she faced in continuing to meet ratio requirements associated with accreditation as enrollment, and the size of her staff, fell. Another director illustrated the importance of having sufficient resources as she described working toward meeting the staff education requirements by adjusting the pay schedule to reward staff that pursues education.

One characteristic shared by many of the directors who sought accreditation was a willingness and interest in making decisions to reallocate resources in order to help the program meet the standards. Directors described implementing staffing structures that integrated well-qualified and regular substitutes so teachers would have time to complete accreditation planning and paperwork. In some cases, directors allocated their own time as coverage for release time.

Directors in centers with contract funding faced two unique resource-related issues. First, directors in both New Jersey and California mentioned frustration with specific “unfunded mandates.” In New Jersey, several directors mentioned concerns about children with special needs. Ratios and group sizes are budgeted at the start of the year. As a result, directors explained that they faced challenges in adjusting when a child needing additional attention or support enrolled in a classroom. In California, one director explained that the time for conducting required child and self-assessments is not built into the contract funding. Consequently, the center is forced to find cost-free solutions to covering that staff time.

The second issue was unique to Hudson County, New Jersey. Despite receiving relatively high per child revenue through Abbott, the centers we visited that were receiving Abbott funding still depended on some expenses being covered through revenue for wraparound care. Many of these directors described how a recent shift in the system for covering wraparound hours led to a dramatic decline in that source of revenue and how that was causing a financial pinch. Consequently, directors in many Abbott-funded centers reported having to cut back on line items they would have ordinarily covered through revenue from wraparound care (such as paying for field trips or training beyond what was covered by Abbott funding). Further, because Abbott funding depends on a prorated budget for overhead expenses (such as space and utilities), centers were facing a financial strain as they did not have sufficient enrollment to cover the share of

overhead allocated to the wraparound program. This issue highlights the importance of considering other funding streams that support centers supplying contract-funded services. These other funding streams can influence programs' abilities to meet contract-related requirements. Further, at least one director of a center with Abbott Preschool Program funding mentioned concerns about being able to continue operating under the new funding context.

Connections to Other Parameters in the Conceptual Framework

The previous sections outlined the factors that directors appeared to consider in determining the standards to which they would look to guide programmatic practice as well as some primary aspects of the context that further influenced director decision making. Additional elements in the conceptual framework appeared to have some associations with the choice of different systems of standards. Those findings are discussed below, in terms of the innermost and middle circles in the conceptual framework.

Key director and program characteristics

Beyond the issues discussed above, several director and program characteristics appeared related to the adoption of different standards. Directors who adopted standards beyond licensing tended to express an inherent interest in ongoing growth and development for their programs, their staff, and themselves. Further, many directors who adopted standards beyond licensing emphasized the importance of good financial planning and management. In turn, these director practices and characteristics were related to how the directors thought about, and used, some key community and market factors affecting their centers.

Key community and market factors

Directors who adopted standards beyond licensing tended to view this choice as helping increase their ability to make the best of the supply of child care labor and demand from parents. Several directors mentioned that certain standards made for better working conditions, which helped them attract more qualified staff. Similarly, reaching for higher standards was something that directors described as helping ensure that parents would be willing to pay a sufficient amount for the services. In some cases, directors' decisions to operate with contract-based funding (and to meet the required standards) were related to the nature of parent demand (eligibility of families for those programs and potential lack of families willing and able to pay for services out of pocket). Of course, directors facing larger constraints in the available labor supply or parent demand for care may not have an option of using standards in this way.

The nature of competition with nearby centers and family child care homes may also play a role in the choice of standards. In some cases, it appeared that directors who, for

example, relied on licensing standards to guide programmatic practice were fitting their centers into a specific niche, supplying care that families could count on at relatively lower cost than, for example, accredited centers. In other cases, directors were clear about wanting to position themselves at the top of the market for care; one way that directors accomplished this was by maintaining accreditation. For some programs choosing voluntary accreditation, community values and norms appear to have also played a role in this decision; in one county, it was common for directors of accredited centers to make comments suggesting they liked being part of a group of directors among whom the norm was to reach for higher standards.

Finally, resource and referral agencies, and other local organizations supporting providers, may affect the standards to which directors look. For example, in Jefferson County, where centers were operating with relatively fewer resources, several directors mentioned the importance of the local resource and referral agency in supporting centers' efforts to become accredited and in otherwise supporting centers in meeting licensing standards.

Wrap-Up

Mandatory and voluntary systems of standards—including those associated with licensing, accreditation, and programs funded through a contract mechanism—are a key mechanism through which public policies, initiatives, and organizations help child care centers ensure they are delivering services that meet children's developmental needs. As such, it is not surprising that we found the systems of standards to which directors looked to guide programmatic practice, and directors' view on those standards, one factor associated with classroom quality as measured by ECERS-R and CLASS scores. And, although no counties included in this study had a tiered licensing—or quality rating improvement—system, the findings in this section also have relevance for this expanding policy approach to shaping quality.

With one exception, all the programs with the highest ECERS-R and CLASS scores relied on external standards that exceeded licensing requirements. In contrast, programs with the lowest ECERS-R and CLASS scores relied on licensing requirements to guide programmatic practice, struggled to meet licensing requirements, or wanted to do better than licensing requirements but described other constraints that limited their ability to achieve higher standards. The role of external standards varied in centers with classrooms with middle or mixed scores on the ECERS-R and CLASS. In some centers, the interview evidence suggested that a lack of reliance on external standards may have been contributing to lower scores. In other programs, it appeared that despite looking to external standards that exceeded licensing, other factors impeded the successful achievement of those standards.

The directors in this study identified with a range of different standards, from directors who did not see any external systems of standards as useful, to directors who relied on licensing to guide programmatic practice, to directors who met systems of standards that exceeded licensing. It was rare for the directors we interviewed to explicitly state they weighed the perceived benefits against the costs of compliance when deciding about whether to embrace certain requirements. However, these types of trade-offs were evident as directors answered questions related to their views of, and decision making around, various standards and related requirements.

Looking across cases, three factors seemed most important in directors' evaluation of the potential benefits associated with different types of standards. These included whether the directors saw the standards as supporting good quality or good child outcomes, whether the standards were associated with funding, and the level of technical assistance related to different standards. Each factor seemed associated with directors' perceptions of the benefits associated with requirements.

A number of contextual factors appeared related to directors' perceptions of the costs and benefits of different programmatic standards. In general, centers facing more constraints or conflicts with standards had directors who targeted lower standards. Centers with fewer constraints had directors who targeted higher standards. Specific constraints included those from boards of directors, resources, views of what children need, and the supply of labor to which the center had access.

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Chapter Five

Discussion and Implications

All the directors who agreed to participate in this research showed a strong commitment to meeting the needs of children and families. They had definitive ideas about their programmatic goals and clear opinions about the definition of good-quality services. Most directors specifically mentioned a strong desire to ensure that children were prepared for school. Despite these shared goals, the classrooms we observed were delivering services of vastly different quality as measured through the ECERS-R and CLASS. This finding is not new; it is generally understood that the quality of care varies widely across centers. Consequently, this research project was designed to enhance our understanding of the range and diversity of factors that come together to facilitate—or obstruct—the production of quality in child care centers.

This final chapter presents two overarching themes that emerge from the study. It also includes a discussion of implications of the study for policy and practice.

Overarching Themes

In exploring the factors that underlie the quality of care in the centers visited for this research, two broad themes run through the findings and their implications.

Many Factors Are Involved in Producing High-Quality Care, and the Relevant Factors Differ across Centers

The interviews with directors highlighted the complexity behind the successful production of high-quality care. The interviews indicated that many factors in the conceptual framework are important in shaping quality. The interviews further underscored that each program faces unique constraints and barriers. Based on that evidence, we concluded that different personal, programmatic, community, market, and policy factors

were interacting to shape the capacity of individual directors to deliver services that are most likely to support good child outcomes.

Although the specific combinations of constraints and factors influencing quality varied greatly across the centers in the study, it was possible to identify certain factors that had reasonably consistent associations with observed classroom quality. Among the centers, variations in the following four areas emerged as the most consistently and commonly related to having a classroom with either the lowest, or the highest, scores on the ECERS-R and the CLASS.

- ***Beliefs about the definition of quality.*** Classrooms in centers with directors who emphasized programmatic goals and decisions related to meeting children’s safety and belonging needs—as opposed to children’s esteem or cognitive needs—tended to have the lowest ECERS-R and CLASS scores. Further, classrooms in centers with directors who relied primarily on intrinsic beliefs to shape programmatic practices—contrasted with directors who successfully integrated new learning with their intrinsic beliefs—also tended to have lower scores.
- ***Staffing.*** Classrooms with the highest quality tended to be in centers with directors who had relatively high expectations for staff and emphasized allocation of resources to staff wages, benefits, and professional development.
- ***Level of financial stress.*** Classrooms with the highest observed quality were all in centers characterized as financially comfortable or as financially pinched but with comparatively more resources than other centers in the sample (i.e., those classified as financially struggling or pinched with comparatively fewer resources).
- ***Standards.*** Classrooms with the lowest quality were in centers whose directors relied only on licensing standards to guide practice. In contrast, classrooms with the highest quality were in centers with directors who looked to other standards (beyond licensing) to guide programmatic practice.

Underlying these general trends, however, is a substantially more complicated explanation about why some programs successfully deliver high-quality services while others struggle to do so. Each of the 38 centers in this study had its own story behind observed classroom quality. For each key element listed above, some directors described additional factors that seemed prevent the production of high-quality care. In other cases, directors described factors helping them overcome a dynamic that otherwise could limit observed classroom quality.

This overarching finding has a number of implications for policy and practice. First, the range of factors that influence quality indicates a number of largely untapped opportunities for better—and more broadly—supporting child care quality. In particular, the

findings underscore the importance of thinking more comprehensively about the supports centers need to deliver higher-quality services. The findings also underscore the importance of considering the specific combination of factors that individual centers experience to develop more appropriately targeted strategies.

Second, this overarching theme highlights the importance of identifying the obstacles that may be limiting the ability of some initiatives to successfully address quality. It is possible that quality improvement initiatives might be strengthened if additional key underlying obstacles are simultaneously addressed.

Finally, this finding suggests that there may be benefits from additional research on the confluence of factors that allow or prevent particular centers from producing care of sufficient quality.

Improving Quality Is a Developmental Process

Despite its original conception in terms of human needs, Maslow's hierarchy may also contribute to understanding organizational development. Though that lens, centers as organizations might also be conceived as moving through a developmental process. That is, centers must first address their own safety and survival needs by being financially stable enough to keep the doors open and meet basic licensing and safety standards. From there, centers can address more complex organizational needs related to staff and client belongingness, esteem, and so forth.

Directors of the highest quality centers in this study appeared to have solved the challenges related to keeping their doors open and meeting licensing standards (the organization's safety needs). Directors in these centers also addressed belongingness needs, with an emphasis on creating an environment in which the center had a role in the community of staff and families. The esteem needs of the highest quality centers were also met as directors introduced programmatic factors that yielded real capacity and achievement in meeting the centers' goals. Finally, these centers were characterized by an acknowledgment of the cognitive needs related to ongoing acquisition of knowledge related to good practice.

In contrast, directors in some of the lowest quality programs in this study were struggling to keep their doors open, to understand and meet basic licensing standards, and to set high expectations for staff. Given that some of these programs were fully enrolled—suggesting that parents cannot find, will not use, and/or cannot afford alternative arrangements—there may be value in better understanding and addressing the fundamental developmental obstacles these organizations face in improving quality.

Unfortunately, many public policies and initiatives designed to address quality are aimed at “higher-level” organizational needs that, in Maslow's view, are very difficult to

meet until the “lower-level” needs are satisfied. For example, directors struggling to meet payroll—and to find teachers with a high school diploma who can pass a drug and criminal background check—are unlikely to conceive of taking advantage of scholarship programs; that would require the center to shift out of a survival-and-safety mindset to a mindset with higher expectations of, and investments in, teachers. Directors’ views may also play a role; when a director’s intrinsic beliefs about good child development and care contradict the objectives associated with children’s or staff’s higher-level needs, it is likely that this conflict must be addressed and acknowledged before quality improvement efforts can be successful.

The history of one center—described briefly earlier—offers some reason for optimism that helping centers address their basic needs may help them subsequently take advantage of initiatives targeting higher-level needs. At the time of our visit, the classroom we observed had one of the lowest scores on the observation measures. However, unlike many other centers in the study that were experiencing a financial pinch attributed to the economy, this center had recently turned a corner, and the director felt financially stable. In addition, the center staff had recently engaged in an initiative designed to help them move toward national accreditation; the initiative included on-site technical assistance, funding for classroom improvements, and connecting teachers to scholarships to pursue coursework for a CDA credential. Despite the low scores on the quality measures, it was evident that the center was examining its practices, deepening its understanding of child development and children’s needs, and already making changes in classrooms that improved the quality of their services. With time, and ongoing assistance, this center had strong potential for improvement.

This case underscores organizational improvement as a developmental process involving various stages. Further, navigating each stage requires specialized knowledge, time, and, resources. This theme runs through the implications for policy and practice discussed below. Many suggestions that emerged from this research depend on better understanding and addressing the whole range of organizational needs and phases of organizational development that are found in the early care and education system.

Implications for Policy and Practice

The interviews with directors, and the findings regarding the interactions among factors that seem to support and inhibit the quality of care, suggest a number of opportunities for public policy and practitioners working with child care programs to more effectively support the quality of early care and education. Some of the opportunities we see are discussed below.

Address Multiple, Rather Than Single, Quality-Related Factors

Given the wide range of factors that seemed to support or inhibit the production of quality among programs in this research, the data collected for this study underscore the importance of thinking comprehensively about quality. The findings in this report also suggest that a comprehensive approach is especially important if the goal is to improve quality across a broad range of providers. Many quality enhancement initiatives tend to focus on a single factor or perhaps on a small number of factors that can support good quality. For example, initiatives may target centers with technical assistance, or with resources, without addressing the underlying obstacles some centers face in taking advantage of that assistance.

The centers receiving funding through the Abbott Preschool Program, in particular, offer strong evidence that the more comprehensively an intervention addresses key factors affecting quality, the more consistently the intervention can achieve its goals across a broader range of providers. Among the centers visited for this study, the centers funded through the Abbott Preschool consistently had among the highest scores on the classroom observations.

This is despite the fact that the Abbott-funded centers we visited did not consistently have directors who articulated a definition of quality that addressed children’s cognitive or esteem needs, and some directors appeared to make programmatic decisions based primarily on intrinsic beliefs. Both these factors were associated with the lowest classroom observation scores in other centers participating in the research. However, the Abbott Preschool Program, at least for the centers in this study, appeared to have established conditions that helped centers overcome these factors.

Specifically, the Abbott Preschool Program includes much higher funding than is commonly seen in early childhood education (thus facilitating financial stability), coupled with strict standards and extensive technical assistance. Further, because of its universal availability, the Abbott Preschool Program has apparently shifted demand for care in a way that required most centers serving 3- or 4-year-olds to comply with Abbott’s mandates or to face insufficient demand for 3- and 4-year-old care. This combination of factors appears to have helped centers achieve consistently high quality that we did not observe among other groups of centers.

Develop Mechanisms to Identify and Address Individual Directors’ Obstacles to Quality

The directors we interviewed suggested that interventions targeting quality from one particular angle—such as teacher scholarships or technical assistance to pursue accreditation—can be useful. However, in some cases, the directors most able to take advantage of these opportunities clearly did not face other large obstacles in motivating

organizational change. The findings from the interviews indicate that improving quality on a wider scale may require interventions that address the underlying obstacles directors face in taking advantage of quality enhancement opportunities.

This task is further complicated by the reality that different directors face different primary obstacles. In some centers, the struggle for resources and to keep the doors open precluded much thinking about how to take the center to the next level. In other centers, directors wanted to (and possibly even had the resources to) change but could not take advantage of certain opportunities because interventions were not effectively reaching other decision-makers such as boards and/or absent owners. In other centers, the director's vision of quality and what she was trying to attain was based on beliefs different from what many others propose as best practice. And of course, some programs face multiple barriers. In each case, effective interventions must consider and work to address the program's key obstacles. (Some sections below contain ideas about the specific obstacles that might be useful to address.)

Expand Efforts to Address Resource Constraints

The resources that directors have to work with are an obvious but inescapable aspect of understanding and improving quality. Despite our interest in seeking opportunities for improving quality that were not funding related, resource constraints appeared a pervasive obstacles to quality among the centers in this research. Financial stress not only constrained what directors were able to implement, it also appeared related to constraints in directors' *thinking* about quality. Some directors facing the largest resource constraints were also those whose vision of quality was mainly limited to meeting children's safety and belongingness needs. On the other hand, an absence of resource constraints did not guarantee that a classroom would score among the highest quality. Thus, adequate resources appear necessary—but not sufficient—in supporting good-quality services.

Although the directors we interviewed discussed resource constraints both in terms of limiting classroom supplies and materials and in terms of staffing, directors' comments indicated that resource constraints played a larger role in shaping quality through their association with staffing (in expectations and supports for staff). Thus, although quality initiatives offering grants for classroom materials (for example) may help by serving as an incentive to engage in quality improvement and by covering certain one-time costs, further programmatic enhancements are likely to require a more sustained improvement in programs' financial positions.

This suggests that continuing to work on increasing the funding generally available to early childhood education is important. However, the interviews also pointed to some innovative ways in which resource constraints might be addressed at the margins. Two of these ideas are presented below.

- *Provide technical assistance related to financial management.* Directors in this study differed in their approaches to financial management. Those with more strategic accounting and budgeting practices tended to describe less financial strain and were also more likely to describe planning for program improvements over the long term. Thus, helping directors implement stronger approaches to financial and/or resource management may increase their capacity to successfully plan for and implement quality improvements, independent of their resources.
- *Help directors implement strategies related to maximizing revenue.* Directors who felt less financial stress also tended to explicitly focus on maximizing their revenue and/or in-kind resources. Thus, some directors might benefit from technical assistance designed to help them explore opportunities for maximizing revenue. Strategic fee setting is one area in which directors in this research differed in their approach to revenue maximization. Another area of difference was in how directors viewed the optimal balance between the parents' needs when they had difficulty paying and the centers' need for revenue.

Focus More on Directors' Leadership Skills and Belief Systems when Shaping Efforts to Support Quality

One new contribution of this research is the additional evidence of how a director's characteristics—the innermost rectangle on the conceptual framework—affects a center's ability to deliver good-quality care. In particular, this research highlights several ways that a director's leadership style and belief system relate to key programmatic decisions and the ways that directors interact with the various contextual factors they face. As such, the findings suggest some strategies related to director leadership and belief systems that could be useful for efforts to improve quality.

Develop a better understanding of the role that leadership plays in high-quality care

The interviews with directors suggested that director leadership and management skills—which are closely related to the motivations and beliefs of directors—are in turn related to whether directors overcome severe revenue constraints, have high expectations for teachers, and look to external standards beyond licensing to guide programmatic practice. Given the association between these factors and the quality observed in classrooms, it seems useful to continue to build on efforts to understand and support leadership development in child care.

Recognize the reality of cognitive dissonance and design interventions with features that break through the dissonance

Perhaps the most difficult aspect of the interviews conducted for this study was that directors were generally reluctant to discuss the weaknesses of their programs. Although directors were not reluctant to describe funding as a major obstacle or to describe teacher wages as lamentably low, it was much more difficult for directors to be forthcoming about the effect these issues had on the quality of services they were able to offer. This is not surprising—it reflects a fundamental truth of human nature—but it highlights a key challenge that policymakers and others face in helping to improve the quality of early childhood programs. Programs that cannot see—or that cannot admit to—a need for major (or minor) improvements seem less likely to improve. In fact, many directors who were the most forthcoming about their weaknesses, and were most open and eager to learn from others, had classrooms with among the highest scores on the classroom observations.

Given this, it seems that effective interventions will confront the reluctance of directors to look for and address the weakest aspects of their program. One approach may involve supporting the need for directors to feel successful while at the same time, encouraging them to see and reach the next level of service. One director we asked for ideas about how programs might be motivated to view professional development as valuable described it this way.

I'm going to talk just a little bit [about] what I've learned in working with other centers. You don't know what you don't know. And when the centers or programs are all isolated from each other and in competition with each other, there is very little that is helping them learn what they need to know. We all started banding together and working together. And people are saying "Oh, I didn't even think of that." In this group we have, we brought in several other people who had their CDAs and who are now working toward degrees because they saw a need for it. Everybody does everything right and that's one of the problems is that [idea that], "I am the best." That ego part has to be overcome.

Address the challenge of integrating evidence-based knowledge with intrinsic beliefs

One factor contributing to the difficulty of acknowledging programmatic shortcomings is the inherent challenge of integrating new ideas about child development with intrinsic beliefs. New knowledge and intrinsic beliefs both have value in guiding programmatic practice but there is a growing body of evidence that good quality depends on successfully integrating the two. Efforts supporting the implementation of "evidence-based practice" can especially benefit from more carefully considering the role of intrinsic beliefs in shaping practice.

In this study, several directors described visiting other programs and not finding it helpful because it only showed “what not to do.” However, many of these were centers with classrooms that had the greatest potential to benefit from seeing examples of what is possible in a high-quality classroom. Although we do not know the quality of the centers the directors visited, other aspects of the interviews indicated that, in part, the effort was unhelpful because the directors were not able to integrate what they saw with their previous beliefs about good practice.

Consequently, it seems imperative that systems of training and technical assistance systematically address the importance of belief systems in shaping programmatic practice and affecting the acceptance of new ideas or information. Trainers and providers of technical assistance need to be able to help directors and teachers use both their intrinsic beliefs and new knowledge about supporting healthy child development. Additional attention to this topic in training curricula could greatly increase training effectiveness.

Acknowledging the importance of belief systems in shaping services also suggests that efforts to help centers improve quality may require a long-term commitment to working closely with directors and teachers so there is time to build relationships and trust. Further, recognizing the role of beliefs underscores the idea of quality improvement as a developmental process for centers as organizations. As such, some centers and staff will need sufficient time to move through successfully integrating new ideas with their inherent beliefs.

Address Staffing and Labor Pool Shortcomings

As noted earlier, the highest quality classrooms tended to be in centers with directors who described setting high expectations for staff and allocating resources to support staff. Challenges around staffing, and the ability of directors to overcome these challenges, clearly relate to directors’ leadership, motivation, beliefs, and ability and creativity in accessing and managing resources. Beyond this, however, other staffing-related issues might be targeted through efforts to improve the quality of care.

- ***Establish and improve supports that build the pool of qualified labor.*** Some directors in this study clearly felt they did not have access to a qualified labor pool. Examining and improving initiatives designed to build a qualified early childhood labor force (such as college curricula and articulation efforts, career ladders, high school recruitment, and training initiatives for early childhood professionals and others) can help address this key obstacle to improving the quality of care.
- ***Help directors shape the pool of qualified labor they can access.*** Directors themselves help shape the teacher labor force. The directors in this study with the means and desire to find and hire the most qualified staff were generally able to do so.

Other directors seemed to be settling for the staff they could get easily and saw themselves as having little, if any, capacity to influence the labor pool. Initiatives that help directors stretch their staff expectations, and identify and implement strategies to find and retain more skilled staff, could further address shortcomings in the supply of teachers.

- ***Continue promoting early childhood teachers as professionals.*** Several directors in this study mentioned that one obstacle to achieving their goals is the persistent failure of society in general—and policymakers specifically—to view early childhood teachers as professionals. The directors we interviewed felt that this view of teachers limited the quality of the labor pool, motivation for growth among those employed in the field, and funding for early care and education. Thus, efforts that generally help to develop and promote a view of early childhood teachers as professionals may benefit early childhood programs.

Build on Systems of Standards

The directors with whom we spoke typically appreciated and used systems of standards to shape programmatic practice. Although they complained about certain aspects of the standards, most directors viewed their chosen standards as positively influencing their own and other centers. Directors liked having standards to facilitate programmatic decision making, to help explain decisions to parents and staff, and to level the playing field among centers. Based on the discussions with directors, licensing and other standards often set a baseline of acceptable practice.

Because of this role, standards and enforcement systems are one avenue to reach centers with quality improvement efforts. To the extent they do not already do so, enforcement systems might consider reaching out to programs struggling to understand or accept standards with technical assistance that goes beyond enforcing the requirements to helping centers identify and address any obstacles to meeting the standard. In particular, programs struggling with licensing compliance could be targeted with the comprehensive approaches to quality improvement discussed throughout this chapter.

Although none of the states included in this research were doing so, increasing numbers of localities are implementing quality rating improvement systems (QRIS) within their licensing systems. In their most basic form, QRIS involve multiple levels of standards and can address many recommendations that stem from the findings in this study. Box 4 presents an overview of QRIS and summarizes potential implications of this research in relation to QRIS.

Box 4. Implications for Quality Rating and Improvement Systems

According to Mitchell (2005), quality rating improvement systems are “a method to assess, improve, and communicate the level of quality in early care and education.” She further notes that QRIS include five components: standards, accountability, program and practitioner outreach and support, financing incentives linked to the standards, and parent education. States are clearly recognizing the potential of QRIS to address quality in early care and education from a multifaceted perspective; as of March 2010, 20 states had implemented QRIS that included all five components (NCCIC 2010).

Although states in this study did not have QRIS when data were collected, the research findings nonetheless offer evidence about how QRIS can effectively support early care and education. Further, the findings offer information that can help shape QRIS implementation and refinements. Key aspects of QRIS are listed below in light of the research findings.

- ***Clearly specified, meaningful, measurable definition of quality.*** This research suggests that many directors view systems of standards as useful for facilitating programmatic decision making and for setting a baseline for acceptable classroom practice. Further, the research provides evidence of ongoing challenges related to defining—and developing a shared understanding of—practices that facilitate healthy child development, as well as challenges related to helping directors address their cognitive dissonance so they can see key areas for improvement.

QRIS—with their transparent, measurable indicators based on the best available evidence regarding good practice—are a key device for supporting the early childhood system needs identified in this research. This study also underscores the importance of helping teachers and directors integrate a comprehensive understanding of QRIS standards with their prior beliefs about good classroom practice

- ***Sequenced system for quality improvement.*** The centers included in this study varied tremendously in the quality of the classrooms we observed, and directors varied their apparent capacity to undertake organizational changes to improve quality. QRIS—with multiple rating levels—help address this challenge by offering directors a mechanism for making incremental changes.
- ***Comprehensive view of quality.*** This research suggests that a range of factors are important in supporting good care. In particular, this study supports that (among other things) strong supports and high expectations for staff, director leadership, good financial management, and so forth relate to good classroom practice. QRIS that include measures of these external factors can help directors understand a need for, and implement, organizational structures that offer a good foundation for quality.
- ***Incentives and support for quality improvement.*** QRIS typically include systems of support and incentives tied to the achievement of different levels of quality. This study suggests that these incentives and supports—from technical to financial assistance—are an important element of QRIS. Further, the findings offer ideas for refining these supports to ensure that they identify and address the specific constraints particular programs face in meeting certain QRIS indicators.

Consider Other Strategies to Support Quality

Finally, several other strategies seemed to emerge from the findings that could be valuable to explore.

Reach out to center stakeholders not involved in day-to-day management

Some centers in this study were owned or overseen by individuals or boards of directors that were not involved in day-to-day management. In some cases, directors reported these boards or individuals insisted on a high level of quality. In other cases, director descriptions suggested this decision making was an obstacle to reaching a higher level of quality. Reaching out to center leadership beyond the director may be an important strategy for increasing quality in some programs. For example some areas have implemented initiatives targeting church leadership interested in operating early care and education programs.

Refine the message about school readiness

A “school-readiness” message has clearly permeated society. Many child care directors with whom we spoke indicated that preparing children for school is a key objective for their program. They also explained that parents seeking services are often interested in ensuring that the program will prepare their children for school. Directors varied widely, however, in their thoughts about the child outcomes that signal a readiness to enter kindergarten. Further, many directors raised concerns that parents had inappropriate expectations about the skills their children needed to be ready for school. Thus, although the message that school readiness matters is reaching both parents and programs, more can be done to ensure that this message is clearer and more effectively yielding positive outcomes for children. In particular, parents and directors both need much more information about the early childhood outcomes that predict future school success and about the environments that support the desired outcomes.

Conclusion

The ability of child care center directors to produce good care is shaped by different contextual factors ranging from a director’s leadership style, management skills, and belief system to parent demand, labor supply, public funding and standards, and access to resources. While the confluence of external factors can make it extremely challenging for directors facing multiple obstacles, a wide range of strategies might be considered as policymakers seek to support higher quality programming. To improve the quality of the largest number of programs, it is important that initiatives take a comprehensive—and a flexible and individualized—approach. The directors with whom we spoke were clearly all committed to doing their best to support children and families. Initiatives to support early care and education can build on this fundamental strength. At the same time, the results indicate that initiatives must address the context facing each center as the director and staff work to provide the best possible care to the children they serve.

APPENDIX A

Director Interview Guide

Interviews with directors were based on the semistructured interview protocol shown below. The interviewer used the guide to ensure that all relevant topic areas were addressed and to assist with consistency of question wording across interviews. Although each interview began with the questions about overall goals and definition of quality, and ended with the center demographic and wrap-up questions, the order of the questions in the middle sections varied according to the flow of the interview as established by directors' responses to earlier questions. Also, not every question in the middle of the interview was asked directly. In some cases, directors spontaneously covered the issue in their response to another question. In those cases, the question was skipped. Finally, the interviews typically included a number of probes that are not shown in the guide below; in general, the interviewer asked enough additional questions to sufficiently understand and document the director's views on particular topics. For example, a director who replied she wanted staff that had "good experience" would have been asked how she defines "good experience."

INTRODUCTION

Let me start by giving you an overview of what we're hoping to achieve today.

In this study, we are trying to better understand what center directors like you are trying to achieve in your program, what you think defines quality, what helps directors offer high-quality care, and what is standing in the way of improving quality.

We'll use the information from interviews like this one to write a report targeted at policy makers, training organizations, advocates, and others who shape policies and programs that could affect centers like yours. We want the experiences and views of center directors to affect what is implemented

INFORMED CONSENT

Before I begin my questions, I want to remind you about our study procedures. All of our procedures are enforced by an institutional review board or IRB. The IRB is charged with protecting the interests of the people from whom we collect data. Any

information you share with us will be published anonymously. We may use some direct quotes in our reports but those quotes will not be attributed and most information will be combined with responses from others before we report it. We will not report names or any other information that could allow you or your program to be identified as a participant in the research. I would like to tape our discussion but I'll be happy to turn off the recorder at any point if you ask me to. Having a tape just helps us make sure that we capture your responses completely and accurately.

Do you have any questions about the research or our procedures?
May I have your consent to participate in the research and your permission to tape the conversation?

If not done in advance, discuss/sign informed consent.

I'm going to turn the tape recorder on now. While the tape is running, could you just confirm that I explained our study procedures to you? And that you have consented to participate in the research? And that you have consented to tape our conversation?

PROGRAM GOALS

- Would you please start by telling me a little bit about your program?
- What would you say are your program's primary goals?
 - Mission
 - What your program hopes to achieve
 - *(If difficult for respondent)* That's okay, why don't you tell me about what you are trying to achieve for children or families in your program?
 - I'd like to know more about XXX. Could you tell me a little bit more?
- *(Optional, if appropriate, may be moved to later part of discussion.)* Many directors don't mention finances when talking about their program's goals. But directors typically *do* have to consider money in one way or another when thinking about their services. This is kind of an odd question that you may not have considered in quite this way, but could you try to describe your program's financial objectives?
 - *The purpose of asking about financial goals is to better understand the extent to which providers feel budget constraints (goals may express just getting by versus carefully balancing costs and revenues); and the extent to which they view revenue or profit maximization as goals—either in and of themselves or as a means to an end.*

VIEWS OF QUALITY

As I'm sure you know, there are a lot of different opinions out there about how to define quality in *(child care/preschool/early childhood programs)*. Part of what we want to accomplish in this study is to understand how directors define quality and to bring that viewpoint into the policy discussion.

- *(If applicable)* It seems like you've already started telling me about your definition of quality in talking about your program's goals.
 - Could you tell me about (other) program characteristics that form your image of quality?
 - Is there anything else that you think defines quality in *(child care, etc.)*?
- What is your vision of a high-quality program?
 - We're don't want to test you or find out if you know how NAEYC or somebody else defines quality. As I mentioned, there are lots of different opinions out there but you're doing this work every day... which means your ideas about what quality is are a really important perspective.
 - What would you point out to me in a program to show me what is being done so that...?
 - Could you describe a little bit more about... ?
 - Could you tell me what the structure of a program doing X looks like?
 - How would you know _____ when you see it?
- We are also interested in understanding the different ways that directors get their ideas about quality. As you think back over your career, what are some of key things that have shaped your ideas about what quality is?
 - Where have you gotten ideas about changes you might make in your program?
 - Where do you go for ideas when you have a problem that you need to solve?
- How do you think that parents of children in your center define quality?
 - What are parents looking for when they come to your program?
 - What aspects of your program do you think that parents value the most?
 - What effect does this have on what your services look like?

DECIDING ON SPECIFIC ASPECTS OF QUALITY

- You mentioned XX *(e.g., have developmentally appropriate activities, warm staff, consistent, stable staff, work well with parents)* as part of your definition of quality. One goal of this study is to really explore how programs achieve their goals.
- Could you tell me about the pieces of the puzzle that have to be in place so that you can achieve that goal??
 - What are some of the key operational decisions you have to make to make sure you achieve that goal?
 - What are the things that you have to juggle in order to XX *(e.g., have developmentally appropriate activities, warm staff, consistent, stable staff, work well with parents)*?
 - Did anything else factor into your decision? Anything else?
- Center policy/practices on the criterion including:
- How director decided on desired level
 - How did you decide *(if mentioned about center policy/practices—e.g., on those education qualifications)*?
 - Did anything else factor into your decision? Anything else?
 - *Or, walk me through the process of how you decided on...*

- Are you where you want to be with XX *(based on director's specific goals/indicators—e.g., reaching the child/teacher ratio you have, ensuring your staff had X educational qualifications, implementing curriculum)*?
 - If yes, could you tell me what you had to do to get there or about the process you used to reach your goal?
 - If no, what is standing in the way of reaching the goal?
- Challenges/obstacles
 - What are the challenges obstacles you faced in XX??
 - How about challenges in or obstacles maintaining XX?
- Have you considered *(an improvement on indicator that director values and/or that might push program to higher level—e.g., reducing number of children per teacher, increasing educational qualifications of your staff)*?
 - Could you tell me a little bit more about...
- Have you ever considered *(a reduction on indicator director values—e.g., increasing number of children per teacher, reducing educational qualifications of your staff)*?
- Can you think of a worst-case scenario, something that would force you to make a compromise on this goal? Tell me about it.
- Trade-offs that director would have to make to do better on factor *(should help bring out how factors in framework play in and help us understand how directors balance competing priorities, along with which priorities compete with each other)*.
 - What would you have to give up or do to *(e.g., increase educational qualifications of teachers, reduce number of children per teacher)*?
 - Could you explain why that trade-off isn't worthwhile?
- How factors in framework play into decision *(as seems useful/feasible)*
 - In your state, licensing requires XXX.... Does that factor into your decision at all? How? If not, why not? OR does licensing in your state address this issue? How?
 - Certain professional associations, such as NAEYC, recommend.... Does that factor into your decision at all? How? If not, why not?
 - In your state, the Z program does YYY.... Has that program influenced your program at all? How? OR Why not?
 - How does XXX in your center compare to other centers near you? How do their choices about XXX affect your decision for your center, if at all? If you found out that all those programs did YYY, would that affect what you were doing? Why or why not?
 - Does a budget constraint factor into decision? How?

FACILITATORS

I'd like to shift gears now and go back to the big picture that you have in mind for you center, both in terms of overall goals for your program and in terms of the quality of care. I would like to understand more about the factors that affect your ability to create and sustain good-quality services.

- *(We've talked about some of this but I want to make sure that we are not missing anything important.)*
- What are the most *(some of the other)* critical elements that are supporting your efforts to provide high quality services?
- What about things that *could support* your efforts?
 - Factors within, and outside, program
 - Other than money, what are some of the things that would help the most in realizing the dreams you have for your program?
- When you think about the difference between your program and others that are not as good, what is it that makes you able to provide good services and others not?
- *If not mentioned:* Are there any community or state programs or initiatives on which you rely to help your program achieve its goals?
 - *If yes:* Which programs have been most helpful in either getting your program to where it is now or keeping it there?
 - *If no:* Are there any programs you have tried but that haven't met your needs?
 - Could you tell me more about that?

BARRIERS

- We also know that every director faces certain constraints or barriers that they must overcome to reach their goals.
- *(We've talked about some of the barriers that you face but, again, we'd like to make sure we're not missing anything.)*
- What are some of the *(other)* key barriers or constraints that you face in achieving what you want to with your program?
 - *Probe if needed:* I'd like to understand a little bit more how that barrier affects you.
- *Follow-up:* What steps have you taken *(could you take)* to overcome that barrier?
- *(Or, Are there some programs that do not face that barrier? What is different about them?)*
- *(Or ask follow-up questions specific to staff, regulations, or revenue).*
- *Follow-up:* What do you think could be done to reduce that barrier or help you get around it?

STAFFING

Hiring

- How do you decide who you will hire as a lead teacher?
 - Do you have certain criteria?

- Do you have specific educational and ongoing training requirements for lead teachers?
- How were these requirements established? (*who decided, why not lower or higher?*)
- Is it typically easy or difficult to find staff you feel good about hiring for open positions?
 - Could you tell me about the reasons you think it is *easy/difficult* to find staff for open positions?

Retention

- Is it typically easy or difficult to retain staff who are doing a good job?
 - Could you tell me some of the reasons it is *easy/difficult* for you to retain staff?
 - *If needed:* What does your center offer to staff that makes it an attractive place to work?
 - (*Or, Is there anything your center could do to make it a more attractive place to work?*)
 - *If no,* probe for whether director thinks higher wages, benefits, time off for training would help.

Wage Setting

- Could you describe how you determine the wages that you will pay teachers and assistants?
 - Starting
 - Over time

LICENSING

- How does licensing play into what your services look like?
- Either positively OR negatively?

VOUCHERS/SUBSIDIES

- *If applicable,* How do (*specify relevant voucher and/or contract funding*) play into what your services look like?
- Either positively OR negatively?

REVENUE SOURCES

Revenue Challenges—Price setting

- How do you determine your parent fees?
 - What are the factors you take into consideration in setting your fees?
 - How often do you raise your fees?
 - What is the process you use to determine when and by how much to raise your fees?
- Do you know what other child care centers in your area charge?
 - Do you take this into account when setting fees?

- Do you try to set fees that are about the same, or higher, or lower than other centers? Why?
- Which centers do you look at when comparing fees? (*any centers or centers that offer comparable services?*)

Revenue—Enrollment Challenges

- Over the course of last year, how much of the time would you say you had openings for children?
- What kind of measures do you take in response to not being filled to capacity? Or, what measures do you take to make sure that you are generally filled to capacity?
 - Probe for measures related to finding clients.
 - Probe for measures related to reducing costs in response to reduced revenue.
 - Probe for other measures (perhaps they raise rates/engage in other fundraising later in order to cover a budget shortfall).
 - If they don't need to take any measures, probe—why do you think there is such strong demand for your program?

COMPETITION WITH OTHER PROVIDERS

- How would you describe your relationship with other nearby child care centers?
- How do you differentiate yourself from other child care programs?
 - Probe—why do parents choose your program over the alternatives?
 - Earlier, you mentioned that your fees are generally *higher/lower* than other centers in your area. How do you manage to *charge/set higher/lower* fees than others in your area?
- Do you feel as though you are competing with these other programs in hiring teachers?
 - If not, what are the differences in staff that apply to your center as compared to others?
 - If so, are there any steps you take to make your center more attractive to potential staff?

CENTER DESCRIPTION

Before we wrap up, I have a few quick questions about you and your center.

- What age groups do you serve?
- How many children age 5 and under (not yet in kindergarten) can your program serve at one time?
- How many of those are infants under 12 months old?
- How many of those are toddlers 12 months up to 2 years old?
- How many school-age children can your program serve?

- About what percentage of children have their fees paid in whole or in part with child care assistance?
- Is your program independent or is it affiliated with, or operated by, a larger organization? (*describe*)
- Do you have a for-profit or nonprofit tax status?
- How long have you been the director at this center?
- Do you have any other experience as a center director? How much?
- Do you have any other experience in ECE? (*describe*)
- What is the highest level of education that you have completed? In what field(s) is(are) your degree(s)?

WRAP-UP

- Finally, I just have a few wrap-up questions and then a quick written questionnaire.
 - If I were to give you magic wand that would allow you to make one change that would get rid of the biggest obstacle you face in trying to provide the best care possible, what would you use it to get rid of?
- OR*
- If I were to give you the opportunity to tell policy makers what they should do to allow or facilitate more progress in providing the best care you can for children, what would you tell them?
 - Is there anything else you would like to tell me about based on what we are trying to understand in this study? (*If needed*) I would summarize these as our goals for this study.
 - First, we want to understand what you think are the most critical components of good (*child care, early childhood education, preschool*).
 - Second, we want to understand what kinds of things make it easier or harder for you to provide the kind of care your want to provide.
 - Finally, we want to understand how you choose to improve your care, and what kind of trade-offs you make.

APPENDIX B

Obtaining Nominations for High-Quality Centers to Include in Sample

The sampling approach for this study was designed to allow us to interview and observe centers in the target communities that represented a broad spectrum of quality. Our primary sample for the interviews and observations was drawn from centers responding to an earlier survey. However, we were not confident that this sample would include a sufficient number of centers that provide very good quality, as these are generally scarce. As a result, we decided to talk to knowledgeable individuals in each community and ask them to identify the best centers so we could draw a small number from this group to interview and observe. The intention of this process was to increase the likelihood that high-quality centers would be included in the sample.

Identifying Nominators

To collect nominations, we aimed to identify individuals with as broad as possible exposure to varied programs in the community. Ideally, we sought individuals whose ideas would not be influenced solely by the services they delivered in their current professional capacity, but also by other professional or volunteer experiences with programs.

The professional affiliation of the nominators—and how we identified them—varied. In some sites, we spoke with individuals we knew well and with whom we had worked closely over the years. In other cases, we identified nominators using other mechanisms such as references from other experts or community contacts. In each community, we identified one or two primary nominators and two or three secondary nominators. The purpose of having multiple nominators was to protect the confidentiality of sampled programs and nominators, to increase the pool of nominated programs to ensure the availability of a sample with the desired mix of characteristics, and to identify programs viewed as among the highest quality by multiple key informants.

Protecting Confidentiality

Although asking individuals for their opinions about good quality programs may not seem overly sensitive, we were aware that the nominators might have professional obligations or personal relationships that made it important that they not appear to endorse or recommend certain centers over others. As a result, we took steps to prevent the disclosure of their suggestions. Additionally, to protect the centers and directors participating in the research, it was important to ensure that the nominators were not aware of which programs ended up participating in the research and that the nominators did not disclose to others the names of programs they recommended for the study.

Consequently, we took several measures to protect the respondents (nominators and nominated programs from which we collected data). No one outside the study team was aware which programs were nominated as high quality. Nominators were also asked for more recommendations than were needed, in part to make it unclear which centers participated in the research. When recruiting center directors to participate in the study, if asked, we explained (without identifying specific individuals) that we consulted local leaders in early childhood for suggestions.

Nomination Discussion Guide

Hello, my name is _____. I am calling from the Urban Institute. We'd like to get some ideas from you for a study we are doing on child care in _____ (insert community name).

(If we worked with respondent before) As you may remember, we have worked with you before in other studies we have done on child care in _____ (insert community name).

(If we haven't worked with respondent before) We are a nonprofit research institute located in Washington, D.C., and have done a number of studies about child care in _____ (insert community name).

Is this a good time to talk briefly?

(If they say no) Could we schedule a time to call you back?

(If they say they only have a few minutes) Let me give you a little background on the study, and then we can hopefully schedule a time to talk.

We are now doing a study on child care centers in _____ (*insert community name*), as well as in three other communities around the country. This study focuses on understanding what child care providers really need to provide high-quality care. We want to

understand more about the various personal, community, and policy factors that may affect whether they can provide quality. In the next several months, we will be visiting a number of providers in _____ to interview them about their perspectives on quality, how they make decisions about quality for their programs, and how various factors affect their decisions and their ability to provide quality care.

We have two ways to identify which providers we want to talk with. First, we are building on data that we collected a few years ago for another study to identify some providers. However, we want to make sure that the group of providers that we talk with in _____ includes at least some providers who are managing to really make this work... are providing excellent care to their families. So in each community, we have decided to talk to a few people like you who we think really have a good sense of the provider community to ask them to point us toward what they see as being the best programs in their community. And we were hoping that you would be willing to help us with this. Does this seem like something that you are able to do? (If not, do you recommend anyone else?)

Do you have time to talk with us now? We estimate that it will take about a half-hour of your time.

Let me assure you that this information is absolutely confidential. We will not tell the programs who told us about them, will not share the lists of nominated programs or nominators with anyone outside of our small study team, will not tell anyone that we talked with you, and will not discuss with you who else in your community we have talked with or who they suggested. If you agree to talk with us, we'd also like to ask you to keep this information confidential, and to not share this discussion with anyone else.

Do you have any questions about the study?

Would you be willing to give us your ideas about this? Obviously your involvement is completely voluntary.

Are you willing to keep this confidential? *Get answer*

If yes:

Question 1: We want to interview the directors of some of what are—in your opinion—the highest quality, or best, child care centers in your county. We have a few criteria for the kinds of centers we are interested in. Specifically:

- We are particularly interested in child care centers that serve at least some children from private-paying families or from the child care subsidy voucher system.

- Offer full-time care (at least 40 hours a week) to at least some children younger than age 5.

We are not looking for centers that exclusively serve special populations (such as homeless children, children with special needs, or backup care when regular arrangements fall through) or that are exclusively funded through subsidies administered using a contract funding mechanism (such as General Child Care or State Preschool in California), or from Head Start. We also do not want to include programs that are operated by the public schools.

So could you give us the names of the 4 or 5 best quality centers in higher-income communities, and 4 or 5 best quality centers in lower-income communities in _____ county? If you have an idea for a program, but aren't sure whether it fits our criteria or is in a higher- or lower-income community, please just tell us about it and where it is located, and we'll figure it out. If you would rather take some time and think about this, just let us know. We could call you back after you have given it some thought.

Possible talking points for respondent questions:

What do you mean by higher-income and lower-income communities?

Answer: Obviously, there are a lot of different ways to define lower-income and higher-income communities, and we aren't asking you to be precise. We are interested in interviewing center directors in neighborhoods where there is a stronger ability of parents to pay for care AND in neighborhoods in which parents might be less able to pay for care. You might think of areas with higher and lower rates of child poverty, or where a large versus small share of parents would qualify for subsidies or a school lunch program. Again, if you have an idea for a program, but aren't sure how to classify what kind of community it is in, please just tell us about it and where it is located, and we'll figure it out.

What do you mean by best quality?

Answer: We really want programs that meet what you define as good quality when you are thinking about their early care and education services. Obviously, there are a lot of ways to assess quality, but we are contacting you because we think that you have experience to be able to tell what a good-quality program is. We will also, however, ask you to tell us what you are thinking of when you tell us that these programs are good quality... (segue into next question)

Question 2: Could you tell me a little bit about what it is about these programs that made you choose them as being on your "best" list? What, in your judgment, makes them so good? What characteristics are you considering?

APPENDIX C

Sampling Steps

After constructing the two sampling frames (one based on the full population of centers in each county and one based on the centers nominated by local informants), we purposively selected centers for the sample using the following procedures. The procedures were designed to maximize variation in key parameters such as quality, for-profit and nonprofit status, accreditation and licensing status, economic conditions of the neighborhood, program size, program goals, and others. The procedures involved four steps:

- ***Defining geographic clusters of providers.*** Centers in both sampling frames were geocoded and located on county maps. These maps were overlaid with census-block-group-level data on two measures of demographic variation related to child care demand and ability to pay: population density and poverty rate. Using those maps, centers were grouped into geographic clusters that differed according to poverty rate (of children age 5 and under) and population density (which served to distinguish areas that would be considered urban, suburban, and rural).
- ***Selecting 10 clusters from which to sample.*** After clustering centers geographically, we selected 10 clusters in each county from which centers would be sampled for this research. When choosing clusters from which to sample, we aimed to maximize geographic cluster variation on various demographic characteristics. Specifically, we considered the following characteristics of the communities surrounding the centers: child poverty rate, population density, median and mean family income, and racial or ethnic diversity.
- ***Identifying programs to recruit for study within clusters (six centers per county from survey sampling frame).*** Once the clusters from which we intended to sample were identified, we compiled survey results from the *Child Care Providers and the Child Care Voucher System* study to further prioritize programs to be recruited for this research. In this stage, we sought to maximize variation in program characteristics that were likely to indicate key differences in program structure or goals. Survey variables that we used included for- or non-profit status, licensing and accreditation status, affilia-

tions with other organizations, program size, share of children the director estimated as living in low-income families, teacher wages, share of teachers in the center with a college degree, and teacher turnover rates. Based on that analysis, we identified a primary and two back-up centers (with similar characteristics) to be recruited from each of six clusters.

- *Identifying programs to recruit for study within clusters (four centers per county from nomination sampling frame).* Although we had less data about the characteristics of the centers that were nominated for the research by local informants, we undertook a similar process (using data we gathered from the nominators or publicly available information about the programs) to identify a primary and two back-up centers to be recruited from each of four clusters.

APPENDIX D

Additional Details on CLASS Dimensions and ECERS-R Items Used in the Research

CLASS

The Classroom Assessment Scoring System (CLASS) is made up of 10 items, or dimensions, sorted into three domains. Each domain and its corresponding items are briefly described below.

Emotional Support

The emotional support domain of the CLASS is designed to capture aspects of the classroom environment that are thought important for supporting children's social and emotional functioning and development. The emotional support domain, as described in the CLASS Manual (Pianta, La Paro, and Hamre 2008), includes the following dimensions.

- *Positive climate* involves the extent to which teacher and students have “warm supportive relationships,” demonstrate “positive affect,” offer “positive communications, verbal or physical,” and “demonstrate respect for one another.”
- *Negative climate* involves whether teacher and students display “strong negative affect,” “negativity,” “sarcasm or disrespect,” and how often the teacher relies on “punitive control” expressed as “yelling, threats, physical control, or harsh punishment.”
- *Teacher sensitivity* involves how consistently the teacher is “aware of students who need extra support, assistance, or attention,” responsive to children's needs providing “comfort and assistance” and “individualized support,” effective and timely in “addressing student problems and concerns,” and whether children are comfortable enough to “seek support, share their ideas with, (and) respond to questions from the teacher.”
- *Regard for student perspectives* involves how effectively the teacher “shows flexibility, incorporates students' ideas, and follows students' lead,” “supports student auton-

omy and leadership,” offers “opportunities for student talk and expression,” and allows “freedom of movement and placement during activities.”

Classroom Organization

The classroom organization domain looks at classroom procedures and management strategies that are related to maximizing time and opportunities for learning and that are thought important for developing children’s self-regulatory skills. As described in the CLASS Manual (Pianta et al. 2008), the domain includes the following dimensions.

- *Behavior management* involves how consistently the teacher enforces the “rules and expectations,” is “proactive and monitors the classroom to prevent problems from developing,” and how effectively the teacher “redirects misbehavior by focusing on positives and subtle cues.” It also involves the number of “instances of student misbehavior” and how often student behavior “take[s] time away from learning.”
- *Productivity* involves how well the teacher maximizes “learning time” by providing activities for the children and dealing “efficiently with disruptions or managerial tasks,” establishes routines so the “classroom resembles a well-oiled machine,” makes “quick and efficient” transitions between activities and lessons, and is “fully prepared” and ready to implement activities and lessons.
- *Instructional learning formats* involves how well the teacher “actively facilitates students’ engagement,” uses a “variety of modalities” to “effectively interest students and gain their participation,” and “focuses students’ attention toward learning objectives.” It also reflects children’s interest and participation in activities and lessons.

Instructional Support

The instructional support domain of the CLASS is designed to capture certain types of teacher-child interactions that are thought important for supporting children’s cognitive and language development. The instructional support domain, as described in the CLASS Manual (Pianta et al. 2008), includes the following dimensions.

- *Concept development* involves how often the teacher “encourage[s] analysis and reasoning,” “provides opportunities for students to be creative,” and “links concepts and activities to one another,” to previous classroom topics, and to “students’ actual lives.”
- *Quality of feedback* involves how much the teacher offers “scaffolding” and “feedback loops,” “prompts students to explain their thinking and rationale,” expands on students’ understanding or actions through “providing additional information,” and provides encouragement that “increases students’ involvement and persistence.”

- *Language modeling* involves how frequently the teacher uses “open-ended questions” and “advanced language” when talking with the children, “repeats or extends student responses,” and “maps” his or her own or children’s actions “through language or description.” It also examines the number of conversations between and among children and their teachers.

ECERS-R

This study used 22 items from the Early Childhood Environment Rating Scale, Revised (ECERS-R), comprising three subscales. The subscales and their corresponding items, as described by Harms et al. (2005) and Cryer et al. (2003), are detailed below.

Space and Furnishings

The space and furnishings subscale reflects aspects of the physical environment that support child safety, comfort, learning, and development. The items also consider whether the physical environment permits adequate supervision and addresses children’s special needs. It encompasses eight items:

- *Indoor space* examines the amount and adequacy of the indoor space used by the group for most of the day. Aspects such as ventilation, lighting, temperature and sound controls, and accessibility are considered.
- *Furniture for routine care, play, and learning* examines the sufficiency, safety, and repair of the classroom’s furnishings. Sturdiness, convenience, and presence of adaptive furniture (if needed) for children with special needs are among the characteristics observed.
- *Furnishings for relaxation and comfort* considers the amount, cleanliness, and accessibility of “softness provided for children during learning and play activities,” including soft toys, cushions, rugs, and furniture.
- *Room arrangement for play* examines the number of “interest centers,” or areas within the classroom where “children will find all the materials they need for a particular kind of play and an appropriate play place in which to use the materials.” Aspects such as supervision, organization, and protections from interruptions are also considered.
- *Space for privacy* considers the ability of children to “find or create space” that provides “relief from pressures of group life” within the classroom. It also considers the supervision of these spaces.

- *Child-related display* examines the number and content of materials displayed on the walls and other surfaces of the classroom. This item considers whether the materials are age-appropriate and related to or produced by the children, among other aspects.
- *Space for gross motor play* examines the provision, accessibility, and safety of indoor and outdoor spaces that are regularly used for gross motor play by the children. Safety standards are drawn from the U.S. Consumer Product Safety Commission guidelines.
- *Gross motor equipment* examines the amount, repair, age-appropriateness, and safety of “anything provided for or regularly permitted by the staff to be used for stimulating gross motor activity.” Other aspects considered include the variety of skills the available equipment stimulates, as well as differences in levels in skills.

Activities

Each item in the activities subscale captures information about a specific type of activity available in the classroom. The activities covered by the various items—from fine motor to block play—are considered important experiences for supporting a broad range of child skills, knowledge, and development. For each activity area (item), the measure includes indicators that address (among other things) the variety of materials offered to children, the amount of time that children can choose to use the materials, and whether children can access the materials on their own. The subscale includes ten items:

- *Fine motor* assesses the extent to which fine motor materials are available and accessible to children, are in good repair, are organized, and vary by type, skills stimulated, and difficulty level, among other aspects.
- *Art* assesses the extent to which art materials are available and accessible to children, are in good repair, are organized, vary by type, and allow for “individual expression,” among other aspects.
- *Music/movement* assesses the extent to which music and movement experiences, activities, and materials are available and accessible to children. Among other aspects, it also considers staff initiation of activities, variety of types of music, and encouragement of creativity.
- *Blocks* assesses the extent to which blocks and accessories for block play are available and accessible to children, and vary by type. It also assesses the space used for block play.
- *Sand/water* considers the provision for sand and water play, the extent to which it is available and accessible to children, the variety of accessories and activities provided, and the location of sand or water play (indoors or outdoors).

- *Dramatic play* assesses the extent to which materials that foster pretend or make believe play are available and accessible to children, are in good repair, are organized, vary by type and theme, and “represent diversity,” among other aspects.
- *Nature/science* assesses the extent to which nature or science games, materials, or activities are available and accessible to children, are organized, and vary by type. Among other aspects, it also includes whether “children are encouraged to bring in natural things” and “everyday events used as a basis for learning about nature/science.”
- *Math/number* assesses the extent to which math or number materials are available and accessible to children, are in good condition, are organized, and vary by type, among other aspects. Materials and activities using “rote counting or worksheets” are not included in this item.
- *Use of TV, video, and/or computers* considers the developmental appropriateness of the manner in which television, videos, or computers are used in the classroom. Accessibility of alternative activities, time limits, staff involvement, and content of materials are among aspects considered.
- *Promoting acceptance of diversity* assesses the extent to which diversity, including differences in races, cultures, gender, ages, and abilities, is visibly represented in the materials and areas available to children in a positive, “non-stereotyping” manner.

Program Structure

The program structure subscale is designed to capture the balance across activities and groupings in the classroom’s daily schedule that is thought to be necessary for supporting young children’s development, as well as provisions for special needs children. It includes four items:

- *Schedule* examines whether there is a “basic daily schedule... that is familiar to the children” and that is neither “too rigid, leaving no time for individual interests, [nor] too flexible (chaotic), lacking a dependable sequence of daily events.” Among other aspects, it also reflects the “variety of play activities,” length and smoothness of transitions between events, and location of play periods (indoors or outdoors).
- *Free play* involves the provision, length, and supervision of periods in which the “child is permitted to select materials and companions, and as far as possible manage play independently” of staff assignment or direction. Among other aspects, it also concerns the location of play periods (indoors or outdoors) and the number of toys, games, and equipment accessible.
- *Group time* assesses how often children are kept together as a whole group throughout the day or allowed to play or conduct activities individually or in small groups. It assesses whether there are opportunities for staff to interact with children indi-

vidually or in small groups, and for children to self-select into small groups, among other aspects.

- *Provisions for children with disabilities* examines the attempts made by staff to “assess” and “meet children’s special needs,” the cooperation between staff and parents for “setting goals,” and the integration of special needs children into the rest of the group and activities of the classroom. This item is only scored if the classroom includes a child “with an identified and diagnosed disability.”

Notes

1. This estimate is based on data from the U.S. Census Bureau's Survey of Income and Program Participation (SIPP), 2004 Panel, Wave 4. The figure reflects children who are in child care centers and family child care. If children cared for by siblings and nonrelatives are counted, the figure rises to over 13 million children under age 5.
2. To minimize the burden on the centers we visited, manage research costs, and maximize the validity and reliability of items collected, we limited the number of scales to be completed during the observations. Consequently, we did not collect data on items related to health and safety, personal care routines, or provisions for parents or staff. Despite considering scales specifically related to early language and literacy, we also did not collect much data on the level of support for early language and literacy in the classroom. Although language and literacy support is an important area of inquiry—and a central aspect of early cognitive development—given this study's focus on understanding what facilitates the best overall quality and the generality of the factors explored in the interviews (i.e., we did not specifically explore directors' views of, and activities to support, early language and literacy), we determined that these items were a lower priority.
3. Each of the three observers for this research reached or exceeded the standard of reliability with master coders for the CLASS. This reliability criterion, as established by the CLASS authors and trainers, is that 8 of 10 dimensions are within 1 point of the master code and no dimensions are more than 2 points away from the master code. In addition, the three observers reached or exceeded this standard of interrater reliability during pilot observations with the CLASS and ECERS-R (scores varied by no more than 1 point across the observers on at least 80 percent of CLASS dimensions and ECERS-R items, and no scores varied by more than 2 points across observers).
4. See note 2.
5. For one CLASS dimension, negative climate, scores are interpreted as "better" when the score is lower. Scores for the negative climate dimension are reversed when calculating the subscale score for the emotional climate domain.
6. Classrooms in this research had a mode score of 2 on the nature/science item. Many classrooms otherwise met most criteria for a higher score but received a score of 2 because they did not meet the indicator related to "children [being] encouraged to bring in natural things to share with others or add to collections."
7. Classrooms in this research had a mode score of 2 on program schedule item. Many classrooms otherwise met most criteria for a higher score but received a score of 2 because they did not meet one of the following two indicators: "written schedule is posted in room" or "at least one indoor and outdoor play period occurs daily." For the latter, special circumstances in two sites affected the classrooms in the study. First, Jefferson County, Alabama, was experiencing unusually cold weather during our visit. As such, some centers were reluctant to take children outdoors. However, the ECERS-R standards had a different threshold than center staff regarding weather conditions that preclude an outdoor play period. Second, Hudson County, New Jersey, experienced an unusually rainy period during our visit. This fac-

tor, combined with the dense urban environment in which many centers used public park playgrounds rather than their own outdoor facilities, led many programs to omit the outdoor play period on the days we observed.

8. Although we did not confirm this information by reviewing written documentation of program rules, our understanding was that this report was accurate; centers could not move unexpended funds from the benefit line item into other line items. One director explained that, because these funds were allocated specifically to meet the needs of each staff member, the funding entity believed it—rather than the Abbott-funded centers—should realize the savings when staff voluntarily forwent their benefits.
9. In Jefferson County, Alabama, and Hudson County, New Jersey, some centers affiliated with faith-based organizations may choose to be exempt from licensing. The two counties differ, however, in the number of centers that can and do take advantage of this exception. In Hudson County, no centers in the study were license exempt (or to our knowledge eligible for license exemption), while in Jefferson County, 5 programs in the sample were license exempt and 2 additional programs were eligible for license exemption but volunteered to be licensed.
10. Our sample design including oversampling of programs which local informants recommended as high quality. These recommendations, and thus our sample, included a disproportionate number of accredited programs

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