

you bet **I CARE!**

Caring and Learning Environments:

Quality in Regulated Family Child Care Across Canada

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Executive Summary

Canadian experts in diverse fields ---for example, health,¹ education,² economics,³ crime prevention⁴--- as well as people concerned about social justice,⁵ have identified quality child care as a crucial component in addressing a variety of broad societal goals. These goals include: (1) promoting the optimal development and school readiness of all children, (2) supporting economic productivity and labour force attachment, and (3) promoting social cohesion. This report documents the findings of the largest, most systematic and most multi-jurisdictional study ever conducted in Canada to explore the relationships between quality in family child care homes and:

1. provider characteristics and attitudes about family child care provision;
2. provider income levels and working conditions; and
3. the provider's use of support services such as child care resource programs, networking with other providers, and professional development opportunities.

Data were collected from 231 regulated family child care providers across six provinces and one territory followed by observations in each provider's home. The data analyses went beyond simple description of the associations found between quality and the characteristics of the providers and homes to identification of the critical factors that ***predict*** the level of quality in a family child care home.

The scores obtained by the providers as a group on the *Caregiver Interaction Scale (CIS)* indicate high levels of warm, attentive and engaged behaviour with children and low levels of harshness or detachment. The *CIS* scores, along with scores from the *Family Day Care Rating Scale (FDCRS)* indicate that physically safe environments with caring, supportive adults are the norm in the majority of family child care homes in Canada. As indicated by the *FDCRS*, over a third of family child care providers, 36.8%, were also providing activities that would stimulate social, language and cognitive development, thereby setting the stage for school readiness.

Despite the encouraging data from the *CIS*, the results from the *FDCRS*, a measure of the overall quality of the home as a child care setting, are cause for concern. The *FDCRS* is scored on a seven-point scale with scores of 3.0 or below indicating inadequate to minimal custodial care. Homes that score between 4.0 and 4.99 are protecting health and safety and providing some activities that support children's development. A score of 5.0 is considered to be the cut-off between good custodial care and care that includes the deliberate provision of activities to not only support but also stimulate children's development.

The average score on the *FDCRS* obtained by the group as a whole was 4.5. The proportion of providers obtaining scores at each level was:

- below 3.0 = 7.8%
- between 3.0 and 3.99 = 23.8%
- between 4.0 and 4.99 = 31.6%
- between 5.0 and 5.99 = 26.8%
- 6.0 or higher = 10.0%

In summary, only just over a third of providers in our sample were providing care that would stimulate children's development. Children under age 6 enrolled in full-time child care, as were most of the children observed, spend on average nine hours a day, five days a week in the child care setting. Given our knowledge about the importance of developmentally appropriate stimulation for young children, the *FDCRS* findings should be a major concern for the whole society. Our findings represent thousands of lost opportunities to support young children's optimal development. The finding that quality tended to be lower when there was an infant under age 18 months in the home is of special concern.

Statistical analyses identified six key variables that *predicted* the quality in a family child care home as indicated by the *FDCRS* score. These variables were:

1. the provider's highest level of attained education in any subject, with higher levels of education predicting higher quality;
2. whether the provider had completed a formal family child care-specific training course, with completion of such a course predicting higher quality;
3. whether the provider networks with others through an organized association or network, with networking predicting higher quality;
4. the provider's gross family child care income from the previous year, with higher income predicting higher quality;
5. the age of the youngest child present when the *FDCRS* observation was done. The average *FDCRS* score was lower for the group of providers who had at least one child under age 18 months present than for the group where the youngest child present was older than 18 months of age; and

6. the provider's attitude about family child care provision. Higher quality was predicted by providers who stated that they intend to continue providing family child care, enjoy the work and view it as their chosen career.

Part of the data analyses included a strategic policy probe to explore the importance of: (1) family child care-specific training and (2) provider involvement with a child care resource program or a family child care organization. The findings of this exercise underscore the value of providers having completed family child care training and of communities having local organizations that can offer information, training, provider networking and other resources to support family child care providers.

Our findings suggest that methods to support and encourage quality in family child care should include:

- taking steps to recruit well-educated individuals to be family child care providers;
- providing family child care-specific training for people who wish to enter this occupation or are already involved in it and lack such training plus on-going professional development opportunities;
- encouraging and supporting the development of local organizations such as child care resource and referral programs and provider networks to provide opportunities for networking, information sharing and the provision of concrete supports such as equipment loans;
- developing strategies to ensure that family child care providers have a level of income that is commensurate with the knowledge, skills and responsibility associated with providing good child care;
- providing extra supports for people who are caring for infants; and
- promoting and recognizing family child care as a socially important and an enjoyable career option.

Notes

1. National Forum on Health, 1997.
2. Council of Ministers of Education, Canada, 1998.
3. Cleveland and Krashinsky, 1998; Kent, 1999.
4. National Crime Prevention Council, 1996.
5. Jenson and Stroick, 1999; National Council of Welfare, 1999.