Erikson Institute

Home-Based Child Care Research

RECONCEPTUALIZING QUALITY IN FAMILY CHILD CARE

Unpacking quality, alignment, and engagement with Quality Rating and Improvement Systems

Executive Summary

Regulated family child care professionals (FCCPs) are a small but essential part of the child care sector in the United States.¹ Quality Rating and Improvement Systems (QRIS) are a popular approach to enhancing quality in center- and home-based programs. QRIS have been critiqued for using standards that were designed for center-based programs and rely on Euro-centric views of quality,^{11,111} for having a focus on structural aspects of quality,¹² and for low engagement of FCCPs.^v This study explored data from 169 FCCPs in California, Florida, Massachusetts, and Wisconsin^{vi} to unpack perceptions of quality and understand how a (mis)alignment in quality priorities may relate to engagement in QRIS.

1 FCCPs identified a wide variety of strengths in their programs, with a strong focus on child and family relationships.

FCCPs talked about quality components ranging from their licensing status and business practices to their personalized approaches to teaching and caring for individual children, families, and communities. More than 2 in 3 FCCPs, including many women of color, balanced professional norms and goals like school readiness with a focus on loving, family-like, and sometimes culturally sustaining relationships with children and their families. FCCPs who delivered public pre-k were less likely to be in this blended quality group, instead prioritizing more structural and bureaucratic components of quality.

2 QRIS standards were not well-aligned with many FCCPs' quality priorities, focusing heavily on structural indicators.

Most FCCPs shared at least one component of quality with their state's QRIS standards (most often related to pedagogy). No state's standards captured the family-like, lasting relationships with children that were highlighted as a strength by 78% of FCCPs. Many FCCPs felt that policy systems place too much weight on structural and bureaucratic indicators instead of nurturing relationships with children and families.

3 FCCPs' decisions about whether and how to engage in QRIS were related to misaligned quality priorities as well as whether they cared for subsidy-eligible children and families.

While a few FCCPs felt genuinely engaged in and satisfied with their QRIS,others highlighted challenges related to the emphasis on qualifications, paperwork, and classroom-like environments. Especially in states where QRIS ratings were linked to subsidy eligibility or reimbursement rates (MA and WI), some FCCPs intentionally stayed at the lowest level that would allow them to be paid in full for serving subsidy-eligible children while others dropped out of both the QRIS and subsidy system entirely when they did not need to care for those children.

These findings have implications for the redesign of early care and education systems to more equitably include family child care settings. This work adds to other research calling for the revisioning of the content, process, and incentive structures of QRIS and other policy systems that seek to measure and enhance quality across settings. As federal, state, territory, tribal, and local governments seek to expand affordable child care and universal pre-k provision, it is essential to value and learn from FCC professionals about how to meet the needs of the children, families, and communities they care for.

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SOMETIMES THE THINGS THAT WE FEEL ARE MOST **IMPORTANT ARE MISSED...THAT** RELATIONSHIP THAT YOU HAVE WITH THE CHILD AND THE **PARENTS AND** THE FAMILY. THAT'S REALLY, REALLY IMPORTANT.

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Introduction

Nurturing, enriching early learning experiences across caregiving contexts are essential for the healthy development of children's brains, bodies, academic skills, and social-emotional well-being. Despite this importance, the United States suffers from a crisis of limited and inequitable access to child care and early education that meets children's and families' needs, a problem that has been exacerbated during the COVID-19 pandemic. Licensed family child care (FCC) is an essential piece of the puzzle to ensuring that all children have access to the high-quality experiences that they need to grow, learn, and thrive.

ABOUT THE FCC PROFESSIONALS

169 FCCPs: 139 current, 30 former

4 states

SELF-REPORTED POLICY SYSTEM PARTICIPATION:

- 91% licensed (vs. registered/certified)
- 66% subsidy

PROGRAM CHARACTERISTICS:

- 66% care for infants
- 56% has assistant
- 50% open for non-standard hours
- 37% multi-lingual are
- 25% accredited

- 47% QRIS (including FL's Quality Performance System)
- 7% public pre-k

INDIVIDUAL CHARACTERISTICS

- 99% female
- 62% professionals of color (POC; collapsed in analyses for power after separate analyses; 33% Hispanic/Latinx, 27% Black/African American, 5% Asian/Pacific Islander, <1% Indigenous, 2% other)
- Mean age of 50 years (SD=11)

Regulated family child care professionals (FCCPs)¹ are an essential part of the child care sector in the United States, yet the national supply of family child care programs has decreased steadily since the early 2000s.ⁱ In response to research highlighting the variable quality of early care and education (ECE) programs, many states and localities have implemented quality rating systems (QRIS), which rate ECE programs against a set of quality standards to both help parents identify and choose quality care and help programs enhance their quality through feedback, technical assistance, and financial incentives. QRIS have been critiqued for using standards and measurement tools designed for center-based settings,ⁱⁱ for relying on Eurocentric norms and values when defining quality,ⁱⁱⁱ and for overemphasizing structural and/or easily measured aspects of quality that are inconsistently associated with child outcomes.^{iv} QRIS have also struggled to engage and sustain FCCPs in quality improvement efforts, suggesting that these aspects of QRIS may be challenging for many FCCPs.^{v,vi}

This study explored the following research questions, with implications for the redesign of ECE systems to more equitably include FCC settings:

- 1 What components of quality do FCCPs think make their programs great?
- 2 How are FCCPs' perceptions of quality aligned or misaligned with QRIS standards in their states?
- 3 How is mis/alignment between FCCP and state quality priorities related to engagement in QRIS?

ABOUT THE RESEARCH STUDY

Data source:	Erikson Institute's Multi-State Study of Family Child Care Decline and Supply vi
Instruments:	Focus groups, interviews, surveys (conducted in English and Spanish)
Methods:	Inductive coding, descriptive and inferential statistics, latent class analysis, logistic regression

¹ Regulated FCC is here defined as individuals who deliver child care and education services in a home-based setting, typically for pay and for at least one unrelated child, and who are licensed, certified, and/or registered by their state or local government. FCC programs may be small, with a single professional working alone with a small group of children, or large, with multiple providers working with larger groups. Nomenclature and policies vary by state.

Perceived Quality

FCC professionals identified a wide variety of strengths in their programs, with a cross-cutting focus on relationships.

The majority of the [families] I have are because they were interested in [the bilingual English

Spanish curriculum].

FCCPs talked about a wide variety of quality components that make their programs great, from their licensing status and business practices to their personalized approaches to teaching and caring for individual children and their families (see Figure 1).

Almost all FCCPs (93%) gave at least one example of a quality component that was well-aligned with professional norms for early childhood education and care (e.g., NAEYC's Developmentally Appropriate Practice^{vii} and/or widely agreed- upon examples of structural and process quality.

A majority of FCCPs (75%) also gave at least one example of a quality component that focused more on personal relationships, emotional attachments, and culturally sustaining practices that went beyond the language used to describe professional norms and practices in the early childhood field (see examples in the boxes in Figure 1).



FIGURE 1 • QUALITY COMPONENT FREQUENCIES



SPOTLIGHT ON THE BLENDED QUALITY GROUP

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I come from a long background of teaching...I do make sure that the kids stay focused and have their time where they are learning...I'm helping families as far as food and things that they may need because a lot of people are going through a lot of things at this time. And love... by being in a home environment, they still getting this love...When they're here it's like a smooth place, I guess I want to call it. Somewhere where they can be themselves and *love. There's structure of school and* daycare and still have fun and just enjoy each other.



The majority of FCCPs blended professional norms for early childhood pedagogy with building familial, lasting, and culturally sustaining relationships with children and families.

Perceived Quality

When observing how groups of quality components shared by FCCPs clustered together, a group of 52 professionals (31%) focused on more structural and measurable examples of quality (like group size, credentials, environment characteristics, and parent communication), while 117 (69%) blended professional norms and goals like school readiness with a greater focus on loving, family-like, and culturally sustaining relationships and practices with children and their families.

When controlling for other relevant variables², the group of professionals with a structural quality focus were two times more likely to deliver public pre-k than professionals in the blended quality group (p < .10).

Before controlling for other variables, there were also associations between structural quality group membership and:

- Holding a license (versus registration certification; p < .05)
- Operating only during traditional hours (versus any hours outside 7am-6pm Monday to Friday; p < .01)
- Identifying as white (versus POC; p < .05)
- Not having an assistant (versus having an assistant; p < .10)
- Having an Associate's degree or higher (versus no degree; p < .10)

 $^{^{2}}$ The final model regressed the following indicator variables on most likely class membership: white racial identity, licensed, non-traditional hour care, and pre-k delivery. Covariates were selected based on statistically significant (p < .05) Chi Square analyses examining conceptually salient variables.

Quality Alignment

QRIS standards were not well-aligned with many FCCPs' quality priorities, focusing heavily on structural indicators.

79% of FCCPs mentioned at least one component of quality that was aligned with their state's quality standards.

The most aligned components were related to structural indicators and professional norms. Only MA and WI had any alignment related to communal and relational ways of working with families.

Most frequent area of alignment:

• Pedagogical approach (mentioned by both FCCPs and quality standards, especially in WI and except in FL)

Least frequent areas of alignment:

- Peer interactions (rarely mentioned by either FCCPs or quality standards)
- Program characteristics (rarely mentioned by FCCPs but mentioned by all standards)
- Provider-child interactions (quality standards focused on observed interactions, FCCPs more on familial relationships)

91% of a subset of 64 FCCPs who discussed their perceptions of alignment with state expectations identified at least some misalignment.

FCCPs experienced an overemphasis on more measurable, bureaucratic, or school-like elements (like educational qualifications, completing paperwork, or the layout of the home environment) instead of their relationships with children and families or the ways they teach.



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THEY DON'T ASK US ANYTHING **ABOUT ALL** OF THIS. THEY DON'T ASK US, FOR EXAMPLE, WHETHER WE COMMUNICATE WITH THE PARENTS, HOW WE TREAT THE PARENTS. THEY DON'T ASK US WHETHER WE **TEACH THE** CHILDREN, WHETHER WE HAVE SUPPORT FROM AGENCIES. THEY ARE MORE FOCUSED ON WHETHER WE ARE COMPLYING.

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• A 40-year-old Hispanic/Latina woman FCCP from an urban CA community, licensed ten years, works with an assistant, did not share her QRIS rating, participates in CACFP but not subsidy, and does not offer nontraditional hour care

QRIS Engagement

A subgroup of 42 current FCCPs (primarily in MA and WI) talked about their experiences engaging in their QRIS. Almost all (40 of the 42) respondents also had at least one aligned quality component. Four themes of QRIS dis/engagement emerged (Figure 2): Some FCCPs referenced the misalignment between their quality priorities and their perceptions of state expectations in their decisions not to move up in their QRIS

FIGURE2 • PROPORTIONS OF QRIS (DIS)ENGAGEMENT THEMES



FCCPs Engaging in QRIS

- 8 FCCPs (19%) felt genuinely engaged in and satisfied with their QRIS, saw its benefits for children and for themselves, and were able to move up in the system.
- 11 FCCPs (26%) faced challenges in the QRIS, especially around education and training requirements, but remained engaged in moving up in the system.

FCCPs Disengaging from QRIS

- 16 FCCPs (38%) were minimally engaged and intentionally stayed at lower rating levels of their QRIS. They often made surface-level changes to reach the rating levels that would allow them to care for subsidy-eligible children and families.
- 7 FCCPs (17%) dropped out of their QRIS entirely, largely because they felt ratings did not capture quality and when they did not need to serve subsidy-eligible families to have a financially sustainable business.

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It's actually doing the opposite of what they're trying to achieve, almost. They're saying they want better quality of care, but then they're implementing these things that are actually pulling you away from the kids even more... I don't care anymore because I'm in this business for a reason. And it's not to please, you know, the paper pushers, if you will.

• A 38-YEAR-OLD WHITE WOMAN FCCP FROM A SUBURBAN MA COMMUNITY, LICENSED TEN YEARS, WORKS ALONE, RATED 3 OF 4 IN QRIS, PARTICIPATES IN CACFP BUT NOT SUBSIDY, AND DOES NOT OFFER NON-TRADITIONAL HOUR CARE.

Policy Implications & Conclusion

IMPLICATIONS FOR STATE, TRIBAL, LOCAL AGENCIES

- Revising QRIS content and measurement to better align with the FCC context and to center cultural and linguistic justice
- Expanding QRIS incentives to cover the full, up- front cost of quality improvements and revisiting the ways ratings are linked to payment rates
- Investing in the equitable inclusion of FCC into mixed-delivery ECE systems

This timely study adds to a growing body of evidence for the need to reconceptualize our understandings of "high quality" in ECE to be more responsive to and inclusive of both the FCC context and the racially, ethnically, culturally, and linguistically diverse ECE workforce that cares for young children across the United States.

The findings from this study indicate that not only do FCCPs appear to hold visions of quality that are aligned with many of the professional canons of ECE practice that support child learning and development, but they also have additional strengths—particularly their close, lasting, and often culturally sustaining relationships with the children, families, and communities they care for—that broader ECE and education systems may be able to learn from.

IMPLICATIONS FOR FEDERAL POLICY MAKERS

- Increasing state capacity to reconceptualize quality and redesign QRIS
- Carefully considering unintended consequences of guidance that suggests linking QRIS ratings to ECE system participation
- Expanding national research capacity around FCC and home-based child care



Yet, the QRIS in this study's four states largely hold FCCPs to quality standards that do not measure or reward many of these strengths. Findings indicate that some FCCPs do not have the capacity to meaningfully engage in expensive, intensive, and unresponsive changes to their programs and remain disengaged in QRIS and other policy initiatives such as licensing and subsidy as a result. As of 2021, 20 of 45 state and local QRIS require participation for subsidy eligibility, and as many as 34 provide tiered reimbursement rates based on rating level,^{viii} extending the national significance of these findings.

At a time when federal, state, and local commitments to ECE are expanding with the essential role of caregivers at the center, it is more important than ever to value and learn from FCC providers to envision and ensure more equitable opportunities for young children and their families.

Endnotes

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The information in this brief report summarizes the following dissertation study:

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