



What Quality Means to California Child Care Providers and Families

Forward by Keisha Nzewi

When I ponder my early childhood, I remember the love and safety I felt in my grandmother's arms, a woman who also cared for other children. She owned her own family child care business, but she retired when I was a toddler. However, she continued caring for my oldest childhood friend, a little white girl whose mom needed to go back to work as a teacher. Her mom convinced my grandmother to again care for a young child when her sister was born 7 years later. Her mom trusted no one else to care for her infant child. Had they been asked at the time,

my mom and my friend's mom would have agreed that my grandmother's care was high quality. But was it?

My grandmother had no formal education beyond high school. Her qualifications were that she raised three children, and like most women of her time, gladly watched other children when their family's needed help. Nonetheless, her lack of education alone would limit her quality rating in the Quality Rating Improvement System, established some 30 years ago. Mostly driven, designed and influenced by highly educated white women, QRIS resulted in tools and a system that uplifted a eurocentric view of care, while diminishing the expertise and value of care that Black women had provided for centuries—first as enslaved caregivers, then domestic workers, and now as child care program owners, directors, teachers and assistants. If we were to depend on the traditional QRIS alone, most of us received our early care and education in low quality settings. While I think our families would disagree, QRIS takes into account few aspects families would use to define quality care. This results in the care mostly provided by Black, Indigenous, immigrant, multi-lingual and other women of color, and by default, home based care, being characterized as lacking quality.

QRIS, though good in its intentions, has caused much harm since its inception, driving many talented and skilled caregivers from the profession. Because the majority of care in the U.S. is provided by BIPOC women, the workforce is severely underpaid and undervalued. In turn, families have fewer options for child care that affirm their home language, culture, food, or even just their work schedules. When families chose my grandmother as their caregiver for their children, it was because she was warm and caring, provided homemade food, and provided care right in the neighborhood when they needed it most. If I've learned anything over the past few years, and especially being able to talk with these parents and child care providers, quality is truly in the eye of the beholder.

What's QRIS got to do with it?

Over 30 years ago, in order to “assess, improve, and communicate the level of quality in early care and education settings,” **quality rating and improvement systems (QRIS)** were developed across the United States to increase the likelihood that child care subsidies would support high quality care for young children. These systems were built in response to the notion that most child care in the U.S. is low quality, and “children from low income families and minority families are more likely to be in low quality care.”¹

QRIS are intended to help parents know the level of quality of the child care programs they are considering. QRIS provides professional development opportunities to providers such as coaching or mentoring, technical assistance, and training. Each state was tasked with establishing their own system. In California, our QRIS is called Quality Counts California.

¹ <https://www.americanprogress.org/article/qr-101-fact-sheet/>

Quality Counts California (QCC) is a statewide system implemented at both the county and regional level. QCC allows providers working in all child care settings to participate, providing opportunities for professional development through coaching and mentorship, training in the community, and access to higher education. QCC programs also help parents understand the importance of identifying a quality child care environment. ²

But what is “quality”? Who decides?

In most QRIS, quality is determined by a number of factors, including but not limited to the education level of the caregivers, school readiness of the child, child to adult ratios, and other measures using standardized tools. Child care programs are rated by professionals in the field who may or may not have direct experience caring for young children in the setting they are rating. While using standardized tools to measure program quality is more likely to prevent bias in rating practices, it also tends to remove human discernment that is often important within the context of real life.

Child care programs in California’s QCC may currently choose not to be rated, but participate in the improvement activities their local QCC offers. As it is now, quality ratings are determined by the QCC rating matrix. But does it capture what child care providers and parents see as high-quality child care?

Why do people choose child care and early education as their career choice?

When asked, providers’ faces light up in joy and delight.

“I just hope that I can change someone’s life. That I can help a parent go to work, who might not be able to find someone to watch their child, and that their child has a safe place to, to learn and grow.”

Among home-based providers, it was common that they established their licensed family child care home, or provided care for a relative, friend, or neighbor, because they had children of their own. They needed a way to both care for their own children, and bring in money to their household. But while necessity may have been the initial motivator, their love of children made them stay.

“I just loved kids.”

"This is not a hobby."

"At the end of the day, they (the children) are making my day."

“...this is my career and I love what I do and I have no plans to do anything else.”

² <https://qualitycountsca.net/child-care-providers/>

Providers see themselves as an integral part of building a strong foundation for children, and helping them grow.

But really, what does quality child care look like?

When asked, parents and child care providers alike easily provided answers to a question few had ever been asked before. Nearly everyone responded quickly that a safe environment is essential. Providers described meeting the unique needs of each child as a hallmark of providing high quality care; there is no “one size fits all” when it comes to caring for children. Parents spoke about the importance of being able to trust their provider; high-quality care must be trustworthy care. Both parents and providers shared that wholesome, nutritious food was a sign of a high-quality program.

And, critically, the one attribute of high-quality child care that everyone agreed on: LOVE.

“You have to have the love. First, for me, always just love first...Do whatever it takes. Whatever it takes to make those children happy.”

“You have your whole life to learn and be educated...you want your child to be loved and nurtured.”

“And it's not just high quality child care, it's not high quality providers, but the providers are loving and nurturing and giving them what a parent would give them.”

“I just continue to communicate with my parents. Communication is probably the one thing that my parents absolutely love about bringing their children here and just the safety and comfort that they know that their child is in a loving home environment, and I'm a small family daycare. I always have been for 34 years.”

“What our parents are looking for, that it's a loving environment.”

“Good emotions. And again, loving and safety...but again the nutrition also plays an equally important part.”

“I think that really someone wants a safe, loving environment where a child can grow and have fun.”

Expressed repeatedly, parents and providers felt the most important trait of a high-quality provider is the love they generously share with children in their care. Food is love. Hugs and kisses are love. Nurturing and providing individualized care is love. Trust is love.

What providers strive for, no matter their setting, and what parents hope for and need to feel confident, is a caregiver who can emulate being with family, if not the parents themselves.

What do providers need to do their very best work?

“You have to have the funds, materials, rest, peace, and love.”

While quality is love, as one respondent said, love doesn't pay the bills. The most important thing providers say they need to be their very best is better pay. Family-sustaining wages would allow them to worry less about supporting their own families' needs, keeping them focused on their jobs. More money would also allow them to seek higher education, which many of them yearned for.

Another commodity that would help them do their very best work is time. No matter the setting, providers work long days and long weeks. This leaves little time to care for themselves and their families, or to pursue their own interests or workshops and classes that would further their knowledge.

“It's very important to take care of yourself...and have enough time to spend with your own family. So, I kind of recharge myself, so that I can go and work with kids and give them everything. You first.”

While love of what they do and the children they care for and their families keep many providers in the profession for decades, respect for their expertise - whether learned in a classroom, at a workshop, from a mentor, passed down through their family, or gained over years of experience - is a simple need so many in the child care workforce are missing. Among those who have been rated in QCC, none felt the process acknowledged their expertise or respected them as professionals and none use their rating to attract families to their program. Some were so discouraged by their rater's first visit that they contemplated leaving the profession.

Despite QCC's gaps and misalignment with parents' and providers' values, child care providers don't let these barriers get in the way of providing high-quality care. They love participating in quality improvement programs. They yearn to feel connected to others in their profession, and participating in their local QCC allows them opportunities for those connections.

Conclusions

- **Love is quality.** Parents and child care providers just want their children to experience the love they experience at home. That comes through trust, food, hugs, and learning.
- **Good wages support quality.** Providers need to be paid wages that allow them to support themselves and their families without worry. When they are concerned about how they will feed themselves or keep their lights on, it makes it hard to show up as their best selves to care for children.

- **Respect supports quality.** No matter the child care setting, everyone who cares for and educates young children, even a family member, deserves respect for the experience and knowledge they bring, no matter the formal schooling they may or may not have.

Recommendations:

- **Executive Function Research and provider input** should influence quality standards.
- **Quality definitions** should be driven by parents and people who care for children. Black, Indigenous, and other People of Color should be intentionally included in the work to define quality.
- **Increase Wages** for the child care workforce.
- **Support** Training and Education in a manner that also strengthens peer support and connection.