

# Identifying profiles of quality in home-based child care <sup>[1]</sup>

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## AVAILABILITY

Full report in pdf <sup>[2]</sup>

Excerpts from the executive summary:

The majority of research on the quality of early care and education arrangements focuses on center-based arrangements, yet over half of young children in non-parental care spend time in home-based child care settings each week (Iruka & Carver, 2006). Furthermore, at-risk families, including those with low incomes, single-parent families, and parents with limited education, are more likely to use home-based care (Boushey & Wright, 2004; Snyder & Adelman, 2004). Existing literature on home-based providers suggests that they tend to be sensitive, engaging, affectionate, and responsive towards children; but offer fewer instructional supports than center-based programs (Porter et al., 2010). Additionally, studies using global quality ratings that assess the environment, interactions, routines, and materials of a setting have found regulated family child care providers to be, on average, lower quality than center-based arrangements (Porter et al., 2010).

The purpose of this research brief is to provide information that can be used to target and guide content for professional development efforts designed for home-based child care providers. To do this, home-based providers who participated in a large multi-state study were grouped into three quality categories according to their scores on observational measures of teaching and interaction, tone/discipline, provisions for health, instructional supports for literacy, and caregiver sensitivity. We also examined how providers in the three groups differed in their professional characteristics, their attitudes and supports, and the composition and characteristics of their home-based care settings.

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Findings from this study suggest that home-based providers who are seeking professional development are fairly consistent in their practices across different aspects of quality. Specifically, providers who scored higher on measures of global quality also scored higher on measures of instructional supports for early literacy and caregiver sensitivity. Likewise, providers who scored low in one of these quality dimensions also tended to score low on the other aspects of quality.

Only 12% of providers demonstrated above moderate levels of quality across measures. This finding underscores the need to raise the floor of quality in home-based child care settings. Methods to improve quality among home-based providers may include both expanding current professional development systems to be more accessible, and targeting the content of professional development to the unique needs of home-based providers. Additional research on the effectiveness of different modes of professional development is needed. The salience of beliefs, attitudes, and motivation in distinguishing among the quality groups suggests the use of strategies that are effective in modifying beliefs and attitudes.

**Region:** United States <sup>[3]</sup>

**Tags:** quality <sup>[4]</sup>

regulated family child care <sup>[5]</sup>

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