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Bringing It All Home

Problems and Possibilities Facing New York City's
Family Child Care

by KENDRA HURLEY
WITH JANIE ZIYE SHEN

CENTER FOR NEW YORK CITY AFFAIRS AT THE NEW SCHOOL

July 2016



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Bringing It All Home

Problems and Possibilities Facing New York City's Family Child Care

EXECUTIVE SUMMARY

Both nationwide and here in New York City, “home-based” family child care¹ is the most pervasive form of care for babies and toddlers from low-income families; it’s where these very young children most commonly spend their time when they’re not with their parents. Spanning everything from informal arrangements with grandparents to signed contracts with licensed providers who run school-like programs out of private homes, family child care is, simply put, a child care arrangement provided within a caregiver’s own home.

In New York City’s five boroughs, almost 70 percent of children younger than 3 years old who receive income-eligible government-subsidized child care—or nearly 16,000 children—are in such home-based programs.² In some residential working-class neighborhoods outside of Manhattan, you can frequently spot several “regulated,” or licensed,³ child care providers on a single block. They often appear, from the outside, to be child care centers, with professionally printed signs on brownstones and clapboard houses displaying their names and phone numbers.

There’s good reason these programs appeal to parents on limited budgets juggling the demands of their often high-stress lives. They’re usually conveniently located, and for parents paying privately or with vouchers, they’re typically more affordable than child care centers and more flexible about their hours. Many parents prefer their small, often homey feel, and that they can choose a provider who shares their language, culture and child-rearing beliefs, and with whom they might establish trusting bonds.

But nationwide, home providers are often isolated, have less formal education than center-based caregivers, and the quality of their programs has been found, on average, to be wanting.⁴ Despite how ubiquitous these home-based programs are, research and policy regarding quality improvement in early education often focus primarily on what’s known as “center-based care,” the group care that takes place in school-like settings. Only rarely is the topic of home-based family child care brought to the table. Partly as a result, scant evidence exists on what works to improve family child care’s quality. The vast majority of such efforts are based on what’s been found to work in centers; after some tweaking it has then been transferred to the home environments, with mixed results.

“You’re trying to take a curriculum that works in a classroom and put it in a home, and it kind of works but it kind of doesn’t,” says Lisa McCabe, director of Cornell Early Childhood Programs at Cornell University.

A NEW VISION FOR CHILD CARE

In 2012, when New York City launched EarlyLearnNYC, an ambitious overhaul of the nation’s largest subsidized child care system (with a \$486 million annual budget), it also borrowed heavily from what’s known to work in center-based care to improve its contracted family child care programs (with an annual budget of over \$9 million.⁵) EarlyLearn “was an opportunity for us to be able to translate what we’ve been doing in the center-based programs to other children in the community as young

In New York City, nearly 70 percent of children younger than 3 years old who receive government-subsidized child care are in home-based programs.

as 2 months old,” explains MARC Academy and Family Center’s executive director Anna York in a promotional video that appeared on the website of the agency administering EarlyLearn, the city’s Administration for Children’s Services (ACS).

EarlyLearn aimed to place 3- and 4-year-olds in the city’s contracted child care centers, but relied on homier and less expensive licensed “home-based” family child care programs for infants and toddlers up to the age of 3. It simultaneously attempted to raise the quality of these programs, expecting contracted family providers to offer child care that is not merely custodial or loving, but also developmentally aligned to the needs of very young children.⁶

But three-plus years after its launch, a Center for New York City Affairs investigation found that EarlyLearn has floundered when it comes to improving the quality of its subsidized family child care programs. Its essential shortcoming is that EarlyLearn fails to articulate a clear vision of what such quality home-based care looks like for babies and toddlers, and how to support that quality. Instead, standards for care more appropriate to child care centers and older children are grafted onto family child care. Some of these new requirements, while noble in intent, are insufficiently tailored to the realities and limitations of who family care providers are and what they can do, nor do these requirements recognize what the providers do well. Providers frequently experience them as simply more paperwork rather than real supports that enhance the qualities—small, warm, nurturing, home environments—that are unique strengths of this model of care.

“EarlyLearn for family child care is a new concept,” explains Charmaine Swearing, an EarlyLearn coordinator at Women’s Housing and Economic Development Corporation (WHEDco) in the Bronx. “No one at ACS has a clear idea of what it should look like.”

“EarlyLearn is excellent for centers, but I don’t see it working in the homes,” says Isabel Quintana-Eddy, the family child care director at Hamilton-Madison House in Manhattan’s Chinatown area.

A SHARPER FOCUS ON QUALITY

Most practitioners and observers agree with EarlyLearn’s vision: That all children in contracted child care should get more than a safe space while their parents work. EarlyLearn aimed to take advantage of that finite time when a child’s brain develops most rapidly, catching delays early and setting the stage for lifelong cognitive, social, emotional and physical gains.

This goal reflected fast-growing knowledge of the importance of high-quality early education, which research has linked to a myriad of benefits—everything from helping mothers remain stably employed, to bridging the classroom achievement gap, to improving the life prospects of babies born into poverty.⁷

It also acknowledged the significant limitations of family child care, the quality of which has long left a lot to be desired, particularly for minority and low-income children. In one massive dataset published by the National Center for Education Statistics,⁸ 90 percent of home-based daycare arrangements rated as poor or mediocre. For children living in poverty, only 4 percent of home-based daycare arrangements rated as high-quality.

With EarlyLearn, the city would raise the bar for its family child care programs. It asked its home providers, like preschool teachers in full-staffed child care centers, to begin using a standardized curriculum and write lesson plans and child observations, among other new requirements. The city continued to contract with “network” organizations to recruit, monitor and support family child care programs, as well as to help the providers meet these new quality standards.

With more than 1,700 home-based programs across the five boroughs looking after more than 7,300⁹ children enrolled through EarlyLearn, as well as hundreds more children whose families pay for these programs privately or with vouchers, EarlyLearn is one of the country’s largest experiments in raising the quality of home-based child care. (In addition, over 23,500 children, most older than 3 years old, are in EarlyLearn child care centers. See chart, p. 5.)

“You’re trying to take a curriculum that works in a classroom and put it in a home, and it kind of works but it kind of doesn’t.”

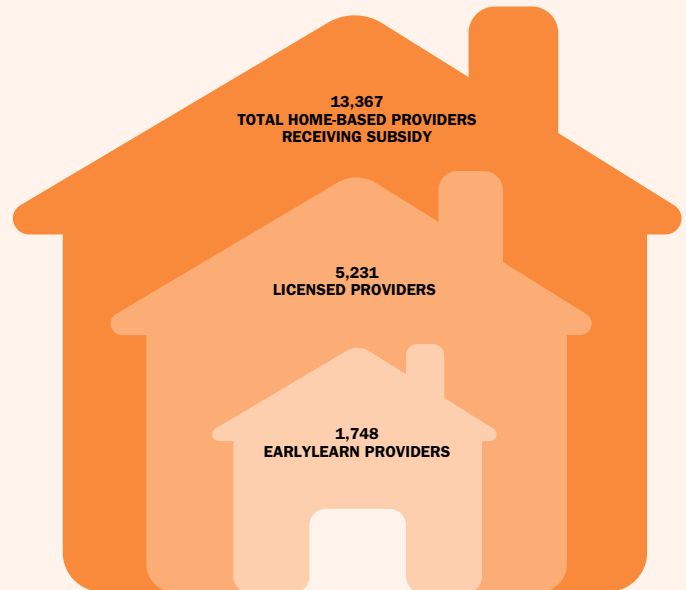
SUBSIDIZED FAMILY CHILD CARE SYSTEM IN NYC

New York City's contracted, EarlyLearn family child care programs make up about one-third of the city's total number of licensed (also called regulated or registered) providers and about 13 percent of the City's total family child care programs providing subsidized care, which includes informal (also called unregulated, informal or family, friend and neighbor) providers.

EarlyLearn providers receive six professional development days a year and at least six annual site visits from the staff of network organizations they affiliate with, as well as additional monitoring visits each year to insure compliance with the state's Child and Adult Care Food program, which reimburses them for meals served to children. This is typically far more support and services than given other home-based providers in New York City.

Many of the city's other active 3,483 licensed home providers receive periodic training largely focused on considerations of health and safety, with little attention to early childhood development issues.

Many of New York City's informal, or unregulated, providers receive no training, though, like the licensed providers, they can participate in the state's Child and Adult Care Food program.



SOURCE: ACS March 2016.

CNYCA'S INVESTIGATION

The Center for New York City Affairs set out to assess what has worked, and what hasn't, in improving family child care. With the recent federal reauthorization of the Child Care and Development Block Grant Act, which calls for increased oversight and training for subsidized family child care providers, among other things, we hoped that the lessons learned from EarlyLearn could inform the broader world of family child care.

From September 2015 to March 2016, we interviewed family child care providers, dozens of staff at 14 of the 31 network organizations, researchers, advocates and others. We also collected extensive data from ACS and shadowed network organization staff, attending training sessions for providers and joining them for what are known as provider "home visits"¹⁰—visits network staff pay a home program to provide technical assistance, support and oversight.

We found pockets of important work throughout the city, and we saw the pride that providers feel as they begin to view themselves as educators. For some, EarlyLearn truly has deepened their understanding of early childhood development, including the value of identifying and addressing developmental delays early. Many also say they appreciate the camaraderie at EarlyLearn trainings and that these, coupled with visits from network staff to their homes, have instilled new energy in their programs and added to their repertoire of activities to do with children.

A REFORM THAT MISSED ITS MARK

But we also found many problems, including a misfit between what EarlyLearn providers can do and many of the reform's requirements. EarlyLearn's paperwork requirements, in particular, are described universally as unwieldy and intensely time-consuming. These requirements frequently cut into the time providers spend with children.

Moreover, we heard examples of missed opportunities. ACS requires the networks to give family child care providers professional development days and make home visits intended to improve the quality of care. However, ACS provides little guidance about what these supports should look like. In practice, they too often merely focus on trying to get providers up to speed with EarlyLearn reporting requirements.

In short, our findings were mixed. Children and programs have experienced gains in some areas, setbacks in others. Our key findings include:

- Most networks interviewed for this report estimated that about half of their home-based programs are where they want them to be in terms of their quality, as well as meeting EarlyLearn’s reporting requirements. That adds up to hundreds of providers who, more than three years into the reform, are still not up to speed.
- EarlyLearn puts unrealistically heavy instructional and reporting compliance burdens on family child care providers who often have limited formal education and, in this ethnically diverse and heavily immigrant city, may struggle with proficiency in either English or Spanish. Regardless of these factors, providers are, for example, typically required to employ an early childhood education curriculum written in English and a computer program, Teaching Strategies Gold, that

SUBSIDIZED CHILD CARE IN NYC

TYPES OF SUBSIDY	WHO IS ELIGIBLE	HOW IT WORKS	CHILD CARE OPTIONS
VOUCHERS	Families receiving public assistance (as mandated by federal law) as well as a small number of low-income families who do not qualify for public benefits	Legally, parents may use their vouchers to pay for any child care arrangement they choose.	<p>Child care centers that accept vouchers (including EarlyLearn centers as well as some private and preschool programs)</p> <p>Licensed family child care programs, including EarlyLearn programs</p> <p>Informal—but unlicensed—family child care (also called friends, family and neighbor care)</p>
EARLY LEARN	<p>Low-income working families</p> <p>Families must earn no more than 275 percent of the poverty line and either:</p> <ol style="list-style-type: none"> 1. work 20 or more hours per week; 2. have a child receiving protective or preventive child welfare services; 3. attend an approved school or training program 	ACS contracts with community-based organizations to directly fund a network of providers that have child care and early education programs. Many have center based care as well as family child care networks, which recruit providers to care for small groups of children in a provider’s own home. Families can enroll children in EarlyLearn programs.	<p>EarlyLearn center-based programs (these blend three types of programs: child care, Head Start, and universal pre-kindergarten)</p> <p>EarlyLearn family child care programs, including group family child care programs, where a provider has hired an assistant</p>
UNIVERSAL PRE-KINDERGARTEN (UPK)	All 4-year-olds	The Department of Education funds these programs. Parents can apply through the DOE.	UPK programs in public schools or in community-based organizations, including child care centers

expects them to make detailed observations and analysis of each infant and toddler’s educational needs and progress. (See “Paperwork vs. Board Books,” p. 26.)

- ACS acknowledges that because providers don’t have the capacity to use the Teaching Strategies Gold tool as designed, the data collected is not very reliable or useful. Yet it is the main criteria the city uses to measure child outcomes.
- One result of the intense documentation requirements under EarlyLearn appears to be a high attrition of some providers not linguistically comfortable with the requirements. A CNYCA analysis of ACS data found, for example, that some 30 percent of the family child care providers with Chinese surnames left their service networks soon after the introduction of EarlyLearn. Today there are 40 percent fewer city-contracted home-based providers with Chinese surnames than there were before EarlyLearn.¹¹ (See “Lost in Translation,” p. 33.)
- Some family child care providers have responded to EarlyLearn by overdoing overtly “educational” pursuits in their homes—leading to such developmentally inappropriate activities as, for example, trying to teach an 18-month-old to identify numbers. That sort of thing undermines the unpressured, homelike environment that makes family child care well suited for very young children.

**EARLYLEARN SYSTEM
TOTAL ENROLLMENT: APPROXIMATELY 30,000 CHILDREN UNDER AGE 5**

NYC ADMINISTRATION FOR CHILDREN’S SERVICES CONTRACTS WITH COMMUNITY-BASED ORGANIZATIONS (CBOs)



SOME CBOs HAVE ONLY EARLY EDUCATION CENTERS

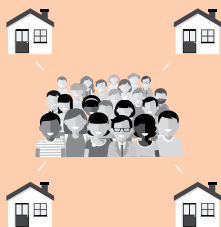
Early education centers look after close to 24,000 children (most 3 and older) enrolled through EarlyLearn



OTHER CBOs HAVE BOTH CENTERS AND FAMILY CHILD CARE (FCC) NETWORKS

Family child care networks work with 1,748 child care providers that look after more than 7,300 children (most 3 and younger) enrolled through EarlyLearn

FCC NETWORK



EarlyLearn family programs typically look after children younger than 3 years old.
Average cost per child in family child care in fiscal year 2015: \$8,577



CENTER



When children turn 3, under EarlyLearn’s vision they soon transfer to the early education centers

EarlyLearn centers typically look after children 3 years and older.
Average cost per child in child care centers in fiscal year 2015: \$14,896

SOURCE: ACS January 2016 enrollment data; Preliminary Mayor’s Management Report 2016.

REINVENTING THE SYSTEM: THE VISION OF EARLYLEARN

EarlyLearn attempts to improve quality throughout the city's child care system. By imposing more rigorous program requirements, it aims to leverage low-income parents' need for daytime care as an opportunity to provide their kids with rich learning experiences that can have lifelong benefits. Many of its standards come straight from the Head Start model and are intended to provide programming that responds to children's individual and developmental needs. Under EarlyLearn, child care centers and family child care homes are held to newly uniform standards:

- All programs, including in-home family child care programs, must use a scientifically tested curriculum.
- All programs must formally screen children for developmental and mental health impairments within 45 days of beginning care.
- All programs must conduct formal assessments to track children's developmental and educational progress.
- Teaching staff at center-based programs must receive 12 days per year of professional development services. Staff in family child care networks receive six days per year.
- All programs must provide support services to children's families.
- All programs must run for eight to 10 hours per day and 12 months per year.
- All family child care programs, which serve the majority of EarlyLearn's babies and toddlers, are connected to center-based programs where children can move when they turn 3.

- EarlyLearn constrains network organization staff. Staff devote large chunks of their time to giving providers remediation on completing forms and reports instead of guiding them in improving care—for example, offering new ideas about activities to do with children. At the same time, some report feeling marginalized within their own organizations, often without access to the consultants and other resources that the child care centers in their networks have. (See “In the Shadow of Centers,” p. 20.)

- Networks say their contracts with ACS don't cover the costs of administering home-based care. Many networks pass some costs to providers in the form of administrative fees that vary widely from network to network and, thus, lead to different net rates of pay among EarlyLearn family child care providers. ACS, which issues contracts to the network's organizations, does not track or regulate these fees. In addition, many networks find they must subsidize the costs of delivering services with other grants or organizational resources. Some network providers are stepping away from this work, saying it is underfunded.

- Under EarlyLearn, family providers feel they are being asked to do more work but, in many cases, are bringing home less pay per hour than before the reform. They must work longer hours to complete paperwork and must also pay for liability insurance and, if they have an assistant, worker's compensation under EarlyLearn—expenses that increase the overhead for what are already typically very low-income operations. (See “Scraping By,” p. 31.)

- In tandem with such rising expenses, EarlyLearn's expectation that family providers exclusively look after very young children also puts a squeeze on provider

income. Infants require more intensive care than older children, and state regulation consequently reduces the number of children a person can care for. Modestly higher payment rates for infants do not offset the resulting reduction in number of kids and total earnings.

- Group family child care programs—where a provider hires an assistant to help and, as a result, takes in more children—appear to have an easier time operating under EarlyLearn's new requirements. Between January 2015 and 2016, the number of children enrolled in family child care settings with a single provider declined by 14 percent, according to CNYCA's analysis of data provided by ACS. Meanwhile, the number of children enrolled in EarlyLearn group family child care rose by 9 percent. (See “Seeking an Early Education,” p. 24.)
- This comports with an overall trend in subsidized family child care toward group care. Today more than 80 percent of the children in the city's contracted EarlyLearn family child care program are in group-based family child care, according to data from ACS. For children enrolled in child care programs using vouchers, the proportion is more than 90 percent. This prevalence of group care has important implications for how the city and state should use their resources and support the subsidized family child care programs.

- A key strength of EarlyLearn is that it enlists network organizations to work with the city’s hundreds of family child care programs. A number of studies have found that such affiliations are associated with higher-quality care. However, EarlyLearn provides few guidelines for how networks should be structured and how they should achieve quality. The result is wide variations in staffing, training, supervision and other areas.
- In interviews, support staff at network organizations consistently identified “home visits” from a trusted coach as holding great potential for improving program quality. New research on family child care echoes this finding. However, EarlyLearn provides very little guidance on who should provide home visits, how many each staff person should be responsible for, what the goals of a home visit are, or how they should be carried out. As a result, the quality and types of support that EarlyLearn family providers receive vary from network to network and even staff member to staff member. (See “The Struggle to Improve Quality,” p. 37.)

Emerging research on home-based child care offers new ideas about how to effectively support providers and the children they care for, as well as for a sharper vision of what quality can look like in these programs that is distinct from the more school-like environment of child care centers. In the next section, we draw from this research to outline a series of recommendations that could build on EarlyLearn’s strengths and help resolve some of the challenges our reporting has identified. ✨

CHANGES IN ENROLLMENT BY PROGRAM TYPE AND AGE

This table shows five categories of subsidized programs and the change in enrollment between January 2012 (before EarlyLearn) and January 2016.

Two major changes occurred in the city’s early care and education system after January 2012 that are not accounted for in this table and that impact enrollment numbers for children 3 and older: Head Start programs serving over 5,000 children switched from city contracts to Direct Federal Funding and oversight, so these are not included in the 2016 numbers. Moreover, due to the expansion of Universal Pre-Kindergarten, many 4-and 5-year-olds are now served in prekindergarten programs that are overseen by the Department of Education.

Nonetheless, this table shows the substantial shifts in the system since EarlyLearn, including an overall decline in enrollment in subsidized care, a steep decline in the use of vouchers for informal care with family, friends and neighbors and a significant rise in the use of contracted family child care for children under 2 years old as well as in voucher-regulated family child care for all ages.

	INFANTS AND TODDLERS 0- to 2-YEAR-OLDS*		PRE-SCHOOL 3- to 4-YEAR-OLDS		5-YEAR-OLDS		SCHOOL-AGE 6-YEAR-OLDS AND UP		TOTAL ALL AGES	
	JAN. 2012	JAN. 2016	JAN. 2012	JAN. 2016	JAN. 2012	JAN. 2016	JAN. 2012	JAN. 2016	JAN. 2012	JAN. 2016
CONTRACTED CENTERS	3,314	3,041	33,874	19,615	270	917	22	0	37,480	23,573
CONTRACTED FAMILY CHILD CARE	4,358	5,229	2,616	2,069	402	7	839	93	8,215	7,398
VOUCHERS CENTERS	4,543	4,226	6,992	6,470	28,40	2,821	12,212	14,212	26,587	27,729
VOUCHERS FAMILY CHILD CARE	6,908	7,538	4,157	4,921	1,535	2,054	5,784	8,864	18,384	23,377
VOUCHERS INFORMAL CARE	6,133	3,129	3,324	1,900	2,199	1,211	16,052	9,428	27,708	15,668
TOTAL	25,256	23,163	50,963	34,975	7,246	7,010	34,909	32,597	118,374	97,745
% CHANGE SINCE JANUARY 2012										
CONTRACTED CENTERS		-8.2%		-42.1%		239.6%		-100.0%		-37.1%
CONTRACTED FAMILY CHILD CARE		20.0%		-20.9%		-98.3%		-88.9%		-9.9%
VOUCHERS CENTERS		-7.0%		-7.5%		-0.7%		16.4%		4.3%
VOUCHERS FAMILY CHILD CARE		9.1%		18.4%		33.8%		53.3%		27.2%
VOUCHERS INFORMAL CARE		-49.0%		-42.8%		-44.9%		-41.3%		-43.5%
TOTAL		-8.3%		-31.4%		-3.3%		-6.6%		-17.4%

SOURCE: ACS

THE PREVALENCE OF HOME-BASED CARE IN NYC'S SUBSIDIZED CHILD CARE SYSTEM

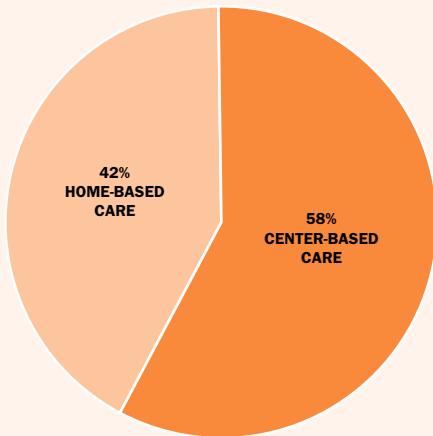
Home-based child care is the most common form of care for infants and toddlers receiving subsidized child care. For the nearly 67,000 children under 5 receiving subsidized child care in New York City (including both child care through the city's contracted EarlyLearn program as well as that paid for with vouchers) in June 2015, about 42 percent were in some form of home-based child care. But for children under 3, 69 percent were in home-based child care.

In the city's contracted child care system, EarlyLearn, the rates of very young children in home-based care are especially high. Of the 6,710 children under 3 enrolled in EarlyLearn in June 2015, 71 percent were enrolled in family child care settings, and 86 percent of the 1,376 children younger than 18 months were enrolled in family child care.

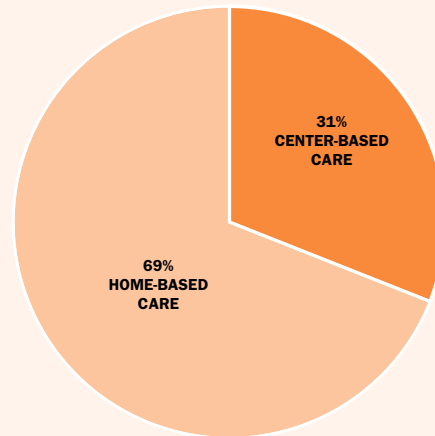
This high prevalence of infants in home-based settings is partly due to parent choice. For babies, some parents prefer the intimate, homey settings that family child care can provide to the more institutional feel of many child care centers. But logistics are also at play: the city has always had a dearth of child care for babies and toddlers, and there is especially little capacity for very young children in child care centers. Providing center-based child care for infants is costly, requiring programs to have dedicated rooms equipped with fire sprinklers and a relatively low staff-to-child ratio. Partly as a result, EarlyLearn aims to place babies and toddlers in home-based settings, and older children in centers.

ENROLLMENT IN NYC'S SUBSIDIZED CHILD CARE SYSTEM BY AGE AND SETTING (BOTH EARLYLEARN AND VOUCHER)

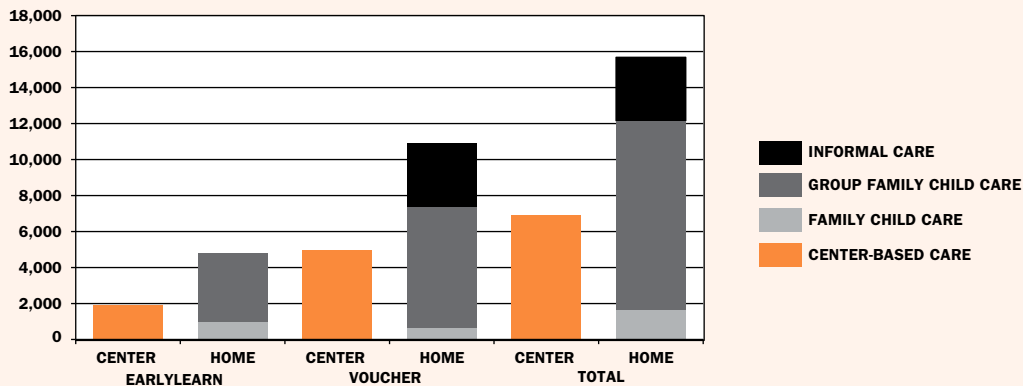
ALL 66,674 CHILDREN IN JUNE 2015
YOUNGER THAN 5 YEARS OLD



ALL 22,611 CHILDREN IN JUNE 2015
YOUNGER THAN 3 YEARS OLD



ENROLLMENT OF THE 22,611 INFANTS AND TODDLERS RECEIVING SUBSIDIZED CARE



A GROWING PREFERENCE FOR LICENSED PROGRAMS

Parents with very young children who would prefer child care centers but cannot find such a spot often opt for licensed group family child care programs, say staff members of the Center for Children’s Initiatives (CCI), an advocacy organization that, among other things, fields calls from parents seeking child care. Increasingly, New York City families seeking subsidized child care choose these more regulated and structured programs over informal arrangements with family, friends and neighbors.

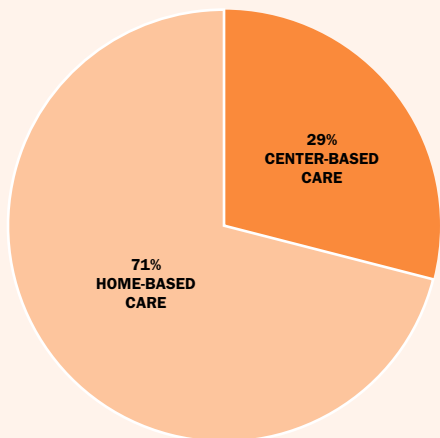
THE RISE OF GROUP FAMILY CHILD CARE

CCI has identified licensed group family child care programs—where a provider hires at least one other assistant typically to be able to care for more children at a time—as one of the fastest-growing pockets of capacity for young children. When the city first conceived EarlyLearn, it wanted no more than half of all children in its home-based programs to be in group family child care. But by January 2016, over 80 percent of children in home-based EarlyLearn settings were in group family child care, according to data provided by ACS.

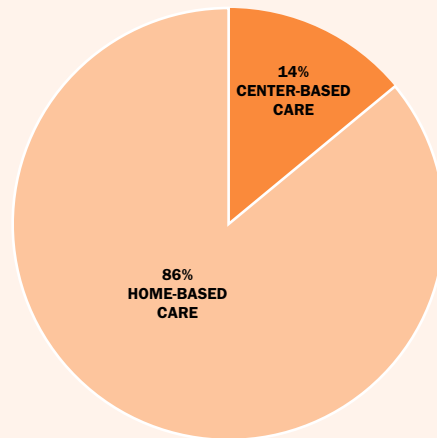
The lone family child care provider is becoming less common in all of the city’s subsidized child care arrangements. Between fiscal years 2013 and 2015, the number of licensed single family child care providers looking after children with child care subsidies decreased by more than 26 percent, according to an analysis of Office of Children and Family Services (OCFS) data.

ENROLLMENT IN EARLYLEARN BY AGE AND SETTING (JUNE 2015)

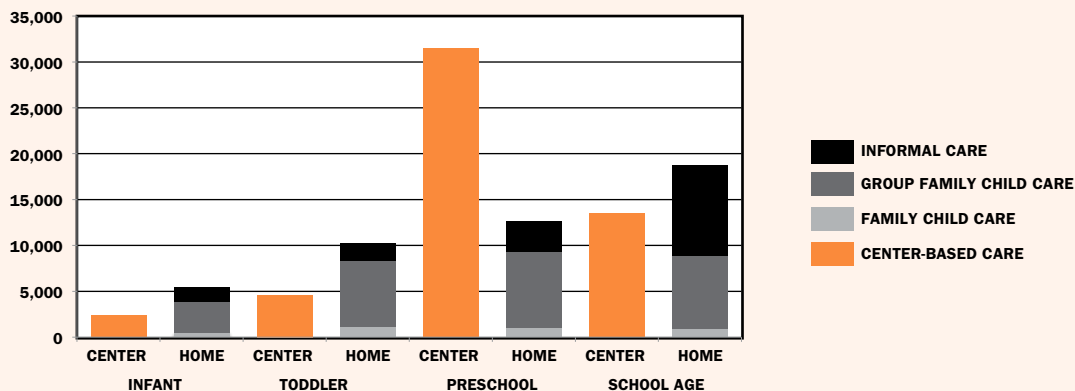
ALL 6,710 CHILDREN YOUNGER THAN 3 YEARS OLD ENROLLED IN EARLYLEARN



ALL 1,376 CHILDREN YOUNGER THAN 18 MONTHS ENROLLED IN EARLYLEARN



ENROLLMENT OF THE 98,893 CHILDREN IN NYC'S SUBSIDIZED CHILD CARE SYSTEM BY AGE AND SETTING (JUNE 2015)



SOURCE: ACS enrollment data for June 2015 provided to the Children’s Defense Fund; ACS enrollment data for January 2016 provided to CNYCA; OCFS “Child Care Facts & Figures” 2013 and 2015.
DEFINITIONS: Infants—a child up to 18 months; toddler—18 months up to 36 months; Preschool—36 months and up to the school year (September) of when a child turns 5; School age—between 5 and 12 years

Recommendations From the Field

The City's Administration for Children's Services (ACS) hopes to forge a new path for family child care. ACS has the opportunity to do so in its coming round of contracting. Its goal, as explained by Lorelei Vargas, deputy commissioner of Early Care and Education, is laudable: "To ensure that every child who is in any of our child care programs is safe and being cared for by a nurturing adult and being supported to develop healthy executive functioning skills." For that to happen, the city needs to be very clear on its aspirations for the network organizations that support the programs, and to provide the funding as well as access to technical assistance and support for networks to meet those goals.

Emerging evidence suggests that quality improvement in home-based programs stems from strong, reciprocal relationships between providers and network support staff.¹² In particular, "home visits" by network support staff to family child care programs provide immense potential for customizing instruction and support to a diverse group of providers.

An emphasis on relationship-based support services has two important implications for New York City's EarlyLearn program:

- First, instead of borrowing primarily from what's known to work in center-based care to inform home-based programs, the city should look for promising practices in the home-visiting field, where the crux of the work stems from carefully forged, supportive relationships with caregivers.
- Second, instead of layering more requirements on the city's hundreds of EarlyLearn family child care providers, quality improvement efforts could be more specifically targeted to network support staff, including framing their roles as both coach and monitor with clear expectations and ample resources.

The following recommendations—put forth by an advisory board of experts and stakeholders in family child care—draw from these ideas to provide concrete suggestions for improving quality.

ENHANCE THE FINANCIAL VIABILITY, STRENGTH AND TRANSPARENCY OF EARLYLEARN NETWORKS

RECOMMENDATION 1: The city should raise the rate paid to providers caring for babies and toddlers. The city's decision to reserve family child care primarily for the youngest children makes sense. But high-quality care for infants and toddlers cannot be done cheaply in any setting. It hinges on nurturing and responsive interactions with a consistent caregiver, which requires low child-to-caregiver ratios, low turnover among providers and their assistants and ample time and resources for caregivers to focus on children. All of these things cost money. Yet because infants require lower child-to-provider ratios, as specified by state guidelines, providers who specialize in infants actually make less overall income. Raising the rate for programs that focus on the city's youngest children would help to offset this financial penalty.

RECOMMENDATION 2: Funding for networks needs to be commensurate with expectations. Network organizations say that because of insufficient funding from ACS they must supplement their budgets with private fundraising, or skimp on staffing and other resources, or charge providers administrative fees, or a combination of all of these things. To provide the support that babies and toddlers in family child care need, ACS should calculate the average expense per provider for networks and create a new administrative fee based on these findings.

RECOMMENDATION 3: Track the fees that different networks charge providers and make this information available to providers and the public. These fees significantly impact a provider's take-home pay. ACS needs to understand the range of fees and consider regulating them.

DEVELOP A SET OF BEST PRACTICE STANDARDS FOR EARLYLEARN NETWORKS

RECOMMENDATION 4: Provide networks with benchmarks that guide service delivery and that provide a clear vision of the family child care networks' many roles, especially involving quality improvement. One of EarlyLearn's key strengths is that it enlists network organizations to work with the city's hundreds of family child care programs. However, ACS provides little guidance around how networks should achieve quality. This leads to wide variation in network operations and other areas. ACS needs to articulate the roles of the networks and establish clear goals for what high-quality networks should do.

STRENGTHEN AND INVEST RESOURCES INTO RELATIONSHIP-BASED AND RESPONSIVE SUPPORT SERVICES ACROSS EARLYLEARN NETWORKS

RECOMMENDATION 5: Provide more guidance to networks around home visits, including what they should entail and qualifications of site visitors. Emerging research from the Herr Research Center for Children and Social Policy at Chicago's Erikson Institute suggests that a key to improving program quality in family child care is relationship-based support services. "Home visits"—or visits that network support staff pay to the family child care programs—offer an important opportunity to nurture this kind of support.

ACS currently requires networks to conduct six home visits in each family child care program a year but provides little guidance around these visits, including what their purpose should be. Too often they focus primarily on issues of compliance and monitoring, and miss the opportunity to address program quality. ACS should establish standards concerning home visits that focus on program quality, including that a large part of such visits should focus on the providers' own needs and their work with children. Visits that "facilitate provider-child interactions" have been shown in home-visiting studies to be linked to positive outcomes. Good visits also help facilitate provider-family or parent relationships as well.

RECOMMENDATION 6: Formal trainings for providers should be done at the network organizations whenever possible (as opposed to at ACS or another outside organization). This gives providers further opportunity to build the types of relationships with network support staff that can lead to improved program quality.

RECOMMENDATION 7: Track relevant demographics of the EarlyLearn family child care providers, including languages spoken and highest education level attained. This information can help inform what types of supports and trainings are appropriate and likely to be effective.

RECOMMENDATION 8: Create networks that specialize in working with non-English and non-Spanish speakers. Networks have limited resources and face difficulties when supporting these providers. The city should consider consolidating networks that serve a significant non-English- or non-Spanish-speaking immigrant community. Trainings, home visits and paperwork should be done in the language that the providers are most comfortable with.

DEVELOP AND INVEST IN TRAINING AND PREPARATION OF NETWORK STAFF TO WORK WITH FAMILY CHILD CARE PROVIDERS

RECOMMENDATION 9: Networks should hire staff whose education or training includes work specific to infant and toddler caregiving. For network staff to help providers improve the quality of their programs, they must themselves understand how to effectively support the development of very young children, including how to facilitate strong, nurturing bonds between young children and the caregivers and families.

RECOMMENDATION 10: In line with findings of the Erikson Institute and other researchers, ACS should arrange training for support staff around how to offer culturally competent relationship-based support to home-based providers, including:

- The importance of focusing a large part of home visits on providers and the children;
- How to create open communication and trust with providers;
- How to provide culturally competent support for providers from a broad range of cultures and backgrounds; and
- How to differentiate supports for providers with different abilities and knowledge sets.

The city might consider working with proven programs like the Parent Child Home Program (PCHP) and All Our Kin to develop trainings for EarlyLearn support staff.

PCHP is an evidence-based home-visiting program for parents of young children that also works in family child care programs. All its home visitors are carefully trained to be culturally sensitive.

All Our Kin, a nonprofit organization in Connecticut, provides intensive strength-based coaching and consultation to family child care providers. Its providers have been shown to be of significantly higher quality than those that are not part of its network.

Networks should also consider choosing curricula to guide network staff in their visits to provider homes. The Parents as Teachers program, for instance, has been used with promising results in several family child care studies.

RECOMMENDATION 11: Network staff as well as ACS staff who support the networks should receive professional development specific to family child care. Quality in family child care can look very different from quality in child care centers. To provide useful support to the home-based programs as well as to understand how to assess quality in these programs, it is important that the organizations and staff supporting the family child care programs value family child care and recognize quality in all its iterations.

RECOMMENDATION 12: Identify the various supports available to networks. Network directors say that training their family child care support staff as well as providers is expensive, that they have minimal resources to do it and that they receive little guidance on what that training should encompass.

There are, however, many potential training resources throughout the city that could provide free or low-cost trainings to network staff and providers. These include the New York Center for Child Development (NYCCD), the United Federation of Teachers (UFT) and the city's five "child care resource and referral" organizations that receive state funding that can be used for training and technical assistance to networks and providers. The city should identify such organizations and make this information available.

IDENTIFY COST-EFFECTIVE AND PROVIDER-FRIENDLY TOOLS FOR MEASUREMENT OF PROGRAM QUALITY AND CHILD OUTCOMES

RECOMMENDATION 13: Simplify paperwork for both providers and network staff.

Under EarlyLearn, caretakers looking after infants and toddlers in family child care programs, like teachers at child care centers, must follow a curriculum, create lesson plans, and frequently assess and document children's skills and development, among other requirements. Networks, staff and providers alike say that the accompanying paperwork requirements take too much time away from direct work with the children and providers. ACS should streamline and reduce paperwork requirements.

RECOMMENDATION 14: Replace Teaching Strategies Gold with a more effective, simpler tool to assess child outcomes. Our reporting suggests that this computerized tool for assessing children, which is tied to the standardized Creative Curriculum that most home-based providers are required to use, is time-consuming, costly to the city and ill-suited for the vast majority of home providers. Networks devote significant resources to training providers how to use Teaching Strategies Gold. ACS acknowledges that because providers don't have the capacity to use the tool as designed, the data collected is not very reliable or useful. Yet they also say this is their main method for measuring child outcomes.

There are other tools to assess children's progress that are simply based on provider or teacher reports. These include the Work Sampling System, the Ounce Scale, the Hawaii Early Learning Profiles (HELP) and the Focused Profiles, all of which are reported to be fairly easy to complete.

Alternatively, an assessment tool that looks at adult-child interactions—something key to high-quality care for infants and toddlers—might be more appropriate for family child care. CLASS, PICCOLO, the Quality of Caregiver-Child Interactions for Infants and Toddlers (QCCIT), and the Child Care Assessment Tool for Relatives (CCAT-R) are potential assessment tools to consider.

ACS should also consider tracking other criteria to measure program quality and child outcomes, including children's attendance in particular programs or how long children stay with individual providers. *

The Context: Upheaval in Family Child Care

In the fall of 2012, New York City put into action a plan that would upend the nation's largest subsidized child care system. EarlyLearnNYC, a reform of New York City's \$486 million system for providing child care to working class and low-income families, would impact hundreds of child care centers. It also marked an upheaval for over 2,000 subsidized family child care providers, most of them low-income women of color, many who had run small child care programs out of their homes for decades. Under EarlyLearn, it would no longer be enough for them to provide care that is merely loving or custodial; like educators, they would also be expected to articulate how they're meeting the developmental needs of the children in their care.

THE EARLYLEARN VISION

The new system aimed to place 3- and 4-year-olds in school-like child care centers, while relying on the homier and far less expensive city-contracted home programs for infants and toddlers. It simultaneously aimed to raise the bar for these programs. Under the EarlyLearn vision, babies and toddlers would get more than a safe space while their parents worked. The new approach would take advantage of that finite time when a child's brain develops most rapidly, catching delays early and setting the stage for lifelong cognitive, social, emotional and physical gains.

Early education stakeholders across the board praised EarlyLearn's aspirations. "You can't not want this because you want the best quality of care for young children," says Diana Perez, director of home-based child care services at Women's Housing and Economic Development Corporation (WHEDco). "Conceptually everybody agrees that you want to increase the quality."

Improving program quality is, nevertheless, an inherently daunting undertaking in a highly decentralized system relying on hundreds of independent contractors. Complicating matters, unlike center-based child care, there's scant evidence on how to improve family child care's quality. The vast majority of such efforts are based on what's been found to work in centers; after some tweaking they've then been grafted onto the home environments.

For example, under EarlyLearn, like licensed teachers at fully staffed child care centers, family child care providers would now be required to follow a standardized published curriculum, provide developmentally appropriate lesson plans and routinely assess and document children's skills and development. Providers would be expected to organize their homes to have "learning centers" similar to those in centers—areas set aside to explore specific subjects like music, dramatic play or science.

These new requirements represented a sea change for EarlyLearn family care providers, some of whom do not hold high school diplomas, many of whom speak English as a second language or not at all.

To help get the providers up to speed, ACS continued to rely on contracts with family child care networks. These umbrella organizations, in turn, select, train, monitor and pay individual licensed family child care homes. They also enroll EarlyLearn children in the home programs.

Under the EarlyLearn vision, only organizations with EarlyLearn child care centers are eligible to run a family child care network. This requirement, which in part was intended to help children smoothly transition from family child care to child care centers at age 3, radically altered the number and nature of networks.

"EarlyLearn disrupted a lot of the community-based organizations that had grown up in response to a community and were anchors in the community."

It made the networks, in essence, subentities of child care centers. The network's finances, missions, leadership and futures would now be inextricably linked with—and in some cases eclipsed by—the center-based programs.

A MASSIVE UPHEAVAL

When ACS announced its contract awards in 2012, it became clear that there would be tremendous upheaval among the city-contracted family child care networks. The number of networks with City contracts was cut by nearly 40 percent—from 47 to 29, according to the Urban Institute.¹³ Each was required to serve children in particular geographic areas and in increments of 200—a huge leap in numbers for most networks.

The idea was that relying on fewer but bigger networks would achieve greater efficiency and cost-effectiveness. But it came at the cost of experience in family child care and history in specific communities and cultures.

Many of the family child care networks awarded contracts in 2012 had never worked in family child care before. At least one had no experience in early education. Meanwhile, smaller, freestanding networks that had adapted over the years to serve the needs of particular communities—like the Jewish Child Care Association (JCCA), for instance, which had nourished a large number of Russian-speaking providers and families, but which did not have its own EarlyLearn child care center—lost their contracts altogether. (Funding for some of these networks was later reinstated using City Council discretionary funds.)

The city awarded other organizations with contracts to serve areas in which they had no track record.

“EarlyLearn disrupted a lot of the community-based organizations that had grown up in response to a community and were anchors in the community,” one early childhood advocate observed.

PROVIDERS STRUGGLE TO ADAPT

The city's subsidized families and family child care providers struggled to adjust to these changes. Many providers and families had received little warning about the winds of change, but directly after EarlyLearn contracts were announced, hundreds of home-based programs found themselves to be affiliated with networks that had lost their city contracts, according to the United Federation of Teachers (UFT), the union that represents the contracted family child care providers.¹⁴

Olga Zabrayaska, who helped Lutheran Social Services build a new EarlyLearn family child care network, remembers receiving “hundreds and hundreds” of phone calls each day from providers and families whose networks had lost contracts and now needed a new network to join. “Many agencies lost contracts with ACS at once, and there were so many providers and clients out there who could not find any network,” she says. “It was very hectic. It was overwhelming.”

“Providers were thrust into EarlyLearn,” remembers Anna York, executive director of MARC Academy and Family Center. “It was not an introduction. It was a brand-new world that was thrust upon them.... There were ladies and gentleman who had been doing this for 14, 20 years and suddenly they were in the wilderness.”

Some providers never found new networks to join. Others quit when they learned all that the reform would ask of them. Fifteen of University Settlement's 50 family providers promptly resigned after EarlyLearn went into effect, says the nonprofit's family day care director Carmen Rivera. At Nuestros Niños Daycare network in Williamsburg, about 20 of their 50 providers either quit or retired, says executive director Miriam Cruz.

“I see the providers, they walk with their chests puffed out a little because they're educators, not babysitters. They're doing all these things that normally a licensed teacher would do.”

In some cases, the networks lost competent, loving proprietors. But EarlyLearn also weeded out some of the weaker providers, including those who were burned out or who were not interested in improving their programs. As new networks struggled to pull together cadres of home providers, many took care to recruit only new providers who were willing to at least try to meet the new requirements.

NEW EXPECTATIONS

A number of providers soon found they appreciated the increased trainings and supports. One family child care provider, for instance, told the Center for New York City Affairs (CNYCA) that because of EarlyLearn she now understands the developmental underpinnings behind things she has long done simply instinctively, like hold conversations with toddlers too young to say much back. An assistant provider said that EarlyLearn trainings helped him notice potential developmental delays in babies that he now shares with parents.

A few who are computer-savvy also say they appreciate how EarlyLearn's documentation requirements help them identify how children are progressing and who needs extra help. And many caretakers say they enjoy the camaraderie at EarlyLearn trainings and the chance to learn about new activities to do with kids. "You get stuck in a rut singing the same songs," says Chanda Hill, assistant executive director of early childhood programs at SCO Family of Services.

"I see the providers, they walk with their chests puffed out a little because they're educators, they're not babysitters," says York of MARC Academy. "They're doing all these things that normally a licensed teacher would be doing."

But network staff say that even highly competent providers struggle with some EarlyLearn requirements and regulations that, while well intended, had originated in fully staffed child care centers and feel mismatched for family child care.

EarlyLearn's paperwork requirements loom especially large. Simply finding the time for them posed particular challenges for family providers, many of whom work alone or with only one assistant. "She's preparing meals, taking children to the potty, trying to get the others settled. Finding time to record what's happening with individual children at the same time is challenging at best," says Rhonda Carloss-Smith, associate executive director at the Center for Children's Initiatives (CCI). "How do you do this? How do you attend to the children and then capture these interactions at the same time?"

Some of the new documentation needs to be entered using computer software, and the Creative Curriculum for family child care is in English only. (See "Paperwork vs. Board Books," p. 26.)

"We had people who had been providers since the '70s and it was very difficult for them," remembers Zabrayaska. "Some would sit literally for hours learning how to turn their computers on.... Some hadn't graduated from high school so had issues writing in any language. We didn't want to let anybody go because they were tremendous providers and they were around a long time and they are our history."

Trainings frequently vacillate between English and Spanish, which one network staff described as "a tedious process that took twice as long." Providers who speak neither English nor Spanish are too often left out in the cold, with network staff at a loss for how to help them. (See "Lost in Translation," p. 34.)

INADEQUATE COMPENSATION

And then there is what some in the field consider the central flaw of EarlyLearn: Even as it demands more of its home-based programs, it does not reward them with more money.

"She's preparing meals, taking children to the potty, trying to get the others settled. Finding time to record what's happening with individual children at the same time is challenging at best."

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THE CHANGING LANDSCAPE OF FAMILY CHILD CARE

In June 2012, before the implementation of EarlyLearn, 2,062 family child care providers were part of the city's contracted system. By April 2016, there were 1,782. With the average enrollment of approximately four to five children per provider, looking at the number of providers available in each neighborhood reflects, to some extent, the capacity to serve low-income children in that neighborhood.

Although the South Bronx serves many low-income families, some of the largest decreases in the number of providers occurred here. Many neighborhoods dropped by nearly half. The combined neighborhoods of Soundview and Union Port, for instance, went from 44 to 23 providers. The adjacent neighborhood of Foxhurst dropped from 49 to 28 providers, and West Farms and Van Nest combined went from 38 to 20.

In the Bronx, only the northwestern section of the borough saw an increase in providers, and this was a modest change.

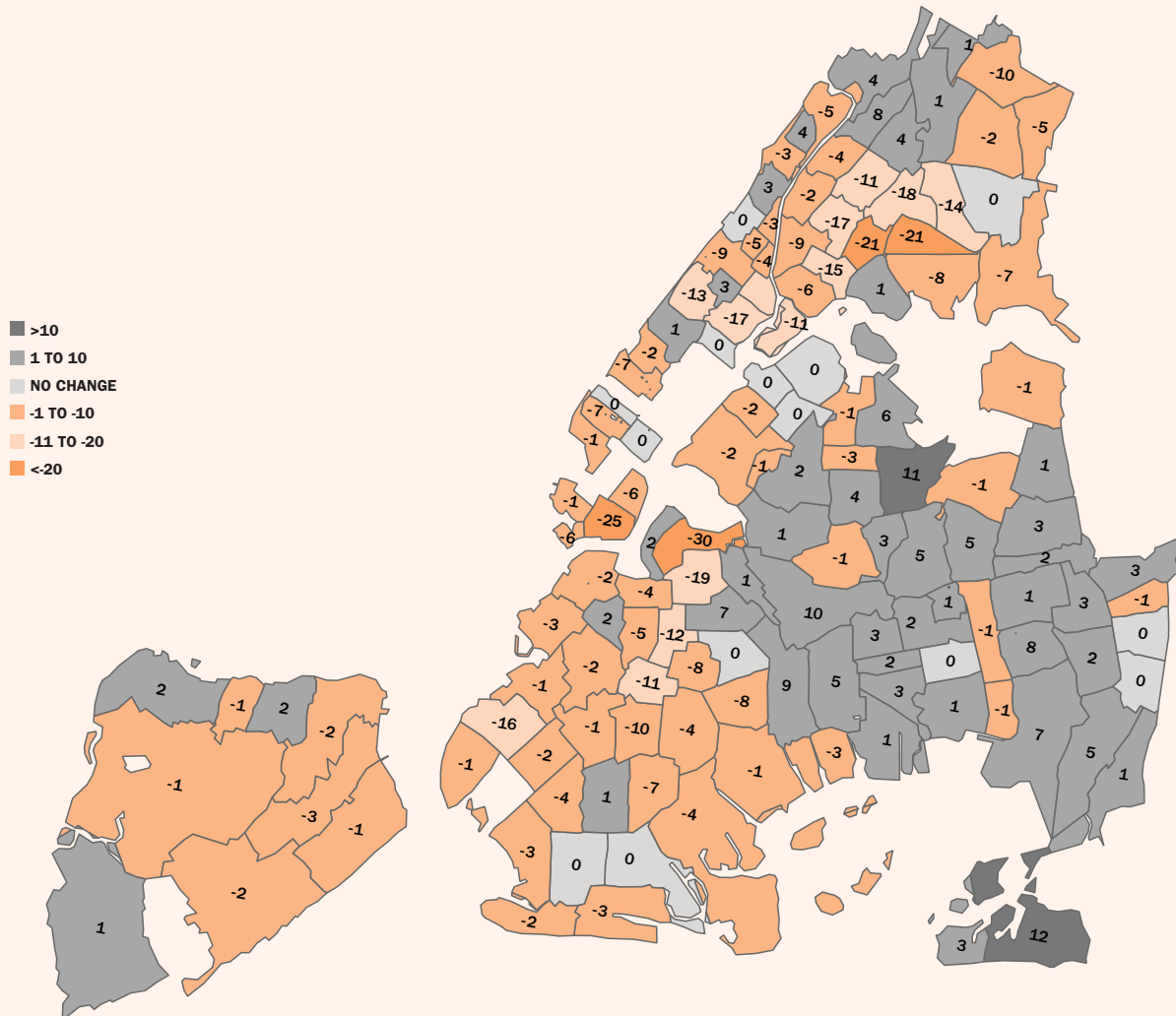
In South Brooklyn, Sunset Park emerged from EarlyLearn without a network and the number of providers decreased in that neighborhood by nearly half (from 33 to 17).

Rapidly gentrifying neighborhoods in Brooklyn also saw a large decrease in the number of providers. Between 2012 and 2016, the number of providers decreased by 71 percent in Bedford-Stuyvesant (from 17 to five), by 63 percent in Williamsburg (from 48 to 18) and by 53 percent in East Williamsburg (from 36 to 17).

EarlyLearn also had a heavy impact on the Lower East Side in Manhattan, which serves many Chinese-speaking families. Here, the number of home-based providers decreased by 42 percent (from 60 to 35). Neighborhoods in northern Manhattan also felt the impact. The number of providers in Morningside Heights halved (from 26 to 12) and in East Harlem they decreased by 39 percent (from 44 to 27).

Finally, there are several neighborhoods in Brooklyn and Queens that have experienced a steady increase in providers, such as Far Rockaway (11 to 23), Corona (20 to 31), Ridgewood (three to 12), Jamaica (five to 13) and Brownsville (48 to 57).

CHANGE IN NUMBER OF PROVIDERS BY ZIP CODE BETWEEN JUNE 2012 AND APRIL 2016



SOURCE AND METHODOLOGY: ACS data of registered family child care providers for June 2012 and April 2016, including number of children in each program.
NOTE: Due to small number of providers for each zip code, we found it is more relevant to represent the data in total numbers rather than percentage change.

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Technically, EarlyLearn pays family child care programs about \$1 more each day for each child than they received before EarlyLearn. But this gain is offset by a major, new expense: Under EarlyLearn providers must purchase their own insurance. Some of the networks have also begun expecting providers to buy materials related to EarlyLearn's requirements, like a laptop computer or the Creative Curriculum. (See "Scraping By," p. 31.)

"They were not given the resources and training to be able to meet the additional requirements," says Nancy Kolben, executive director of CCI. "Without the resources, [the requirements] are a lot of mandates without funding."

ACS pays the networks a little over \$5 per day per child to cover the costs of administering home-care providers, a rate that staff at many networks find insufficient. The rare networks that have been steeped in family child care for many years, like WHEDco's network, draw from their years of experience in the field and pull in resources from other parts of their organization to help providers meet the new requirements. "It takes months and even a year or more to get providers to that place where they are going to feel comfortable and competent in their ability to meet the expectations that have been established for them," says WHEDco's Perez. "If I wasn't looking at how I used other resources to offset the costs [of EarlyLearn], we wouldn't be able to give them that support." (See "Scraping By," p. 31.)

Many networks pass some of the costs on to the providers in the form of administrative fees that vary from network to network.

INSUFFICIENT GUIDANCE

ACS provides the networks with only rough guidelines on how to help the providers meet the new requirements, and on how to staff, train and supervise the networks. This leaves many key decisions up to the contract agencies themselves. The networks say they have received especially scant direction from the city around elements of EarlyLearn that are specific to family child care—like home visits by network staff. (See "What Should a Home Visit Look Like?" p. 42.) This has led to great variety from network to network. Some networks have forged promising paths to quality, which we have documented in this report. Others have floundered, some suffering from high turnover and long-vacant positions. Hamilton-Madison House on the Lower East Side went a year without a family child care director. SCO Family of Services had three home visitors quit in one year.

"I don't think [ACS] gave a lot of thought to the networks in terms of what we need to do, and what the expectations should be," says Laurie Samuel, who served as director of family child care network at Lutheran Social Services.

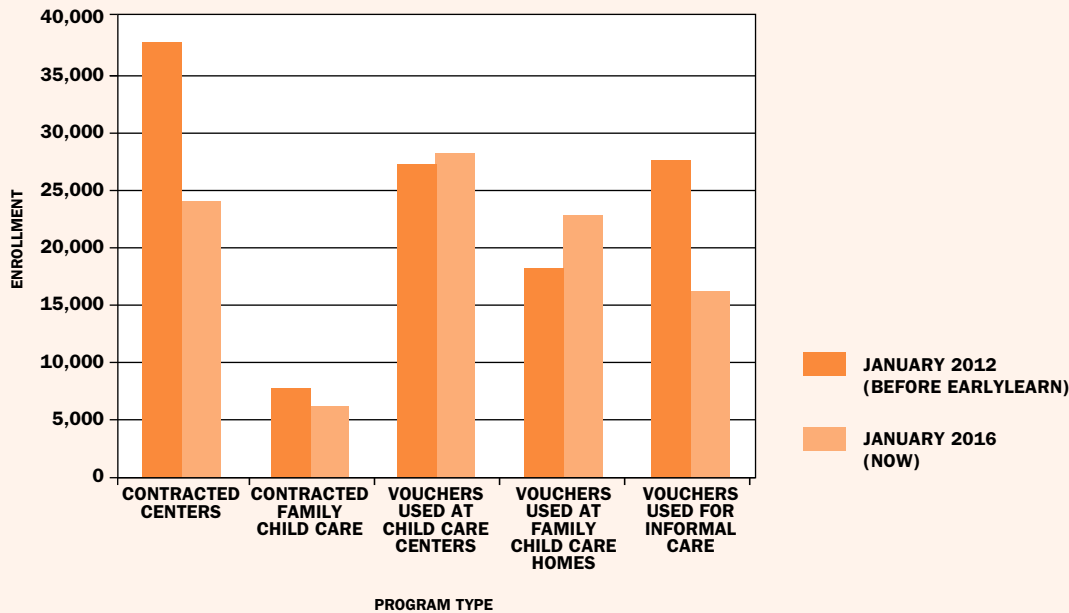
Three-plus years into EarlyLearn, network staff say they continue devoting large chunks of trainings to trying to teach the very basics of EarlyLearn's requirements, and that they have spent considerable resources developing work-arounds to make the required paperwork simpler and less intimidating.

Most networks interviewed for this report estimate that about half of their home-based programs are still not where they need to be to meet EarlyLearn's reporting and program requirements. With over 1,700 such programs currently as part of EarlyLearn, this adds up to hundreds of providers who, three years into the reform, are still not up to speed.

Some of these are loving, capable providers who simply struggle with the new paperwork. (See "Paperwork vs. Board Books," p. 26.) But there are also still some providers who network staff themselves say they would not choose to leave their own children or grandchildren with.

*Some say that
EarlyLearn had
the right idea,
and hope that
more time and
money can do
the trick.*

HOW SUBSIDIZED CHILD CARE ENROLLMENT HAS CHANGED, BY PROGRAM TYPE



SOURCE: ACS

The number of EarlyLearn providers that have been let go varies from network to network. WHEDco has removed children from six of their 50 providers; JCCA has removed children from four; Hamilton-Madison recently put a provider on probation but has yet to sever a contract. (See “The Struggle to Improve Quality,” p. 37.) While networks can terminate a provider’s EarlyLearn contract and remove funded children, they can’t actually shut down a home. (That responsibility belongs to the Department of Health, who has the authority to revoke a license if they find a child’s safety to be at risk.)

A CALL FOR A NEW VISION

When it comes to contemplating the upcoming round of EarlyLearn contracts and where to go next, stakeholders are often of two minds. Some say that EarlyLearn had the right idea, and hope that more time and money can do the trick: Maybe by the fourth or fifth year, they say, EarlyLearn will be working as it should in the home-based programs.

But others say the reform’s problems run too deep and beg for a change of course.

By holding family providers to standards created for child care centers without providing the resources available to centers, they say, EarlyLearn not only sets home-based providers up for failure, it fails to recognize the strengths, including warm, nurturing, culturally attuned environments often found in these home settings. By doing so, they say, it undermines what makes these programs special while missing the chance to improve them.

“When you go and visit [home-based programs] you find these beautiful places, and if I had a child I would leave them there. They are more caring and more loving and more attached to the children,” says Sonia Vera, program director of New Life Child Development Center. “But they don’t know how to put that in the lesson plan.”

Isabel Quintana-Eddy, family child care director at Hamilton-Madison House and one of a handful of New York City women who have spent their career supporting family child care, agrees. “EarlyLearn is excellent for centers, but I don’t see it working in the homes,” says Quintana-Eddy. She adds that in all her years supporting family child care, she has never struggled so much in her work as she has since EarlyLearn. “If ACS wants this program to succeed, they have to bring themselves to the level of the provider and develop something different.” ✱

In the Shadow of Centers

What will it take for family child care to be appreciated in its own right?

In her section of the Bushwick neighborhood of Brooklyn, Rosa Collado is known as the lady who gets down on the floor with the small kids, chats with the bigger ones and has an endless supply of patience for their harried, overtaxed, working parents. For nearly three decades, she has provided child care to neighborhood Spanish-speaking kids. For the past two years, Collado has looked after them in her sparse, clean ground-floor apartment as part of EarlyLearn.

Becoming an EarlyLearn provider has its perks: Collado now has access to a steady stream of Spanish-speaking kids needing subsidized care—no longer an easy feat in an area where arty cafés and hipster bars have taken root as rents have risen. Collado has also learned a lot through trainings and home visits from the professional support staff at her EarlyLearn network. She now keeps toys in clear plastic bins low to the ground, where the kids can find them without her help. And she can explain how everyday tasks are infused with learning opportunities: that slicing a banana is a chance to talk about circles and the color yellow; that leaves in her backyard can be the spark for both an art and counting project.

But Collado is also painfully aware of all the ways in which she falls short as an EarlyLearn provider. Her living room is not large enough to set up the distinct “learning areas” prescribed by the Creative Curriculum that EarlyLearn providers must follow. And Collado cannot do the paperwork. She has spent many an evening crying as she tries to correct lesson plans and child observations that staff at New Life Child Development Center, the network organization that monitors her home, has said must be fixed.

New Life staff hold regular voluntary and unpaid night workshops to give providers more help. Collado, who makes only about \$35,000 a year for looking after four toddlers full-time, has attended many, but still does not get it. New Life program director Sonia Vera has concluded that Collado simply is not capable of living up to EarlyLearn’s expectations. “She knows how to do her job but she doesn’t know how to put it in writing,” she says.

But Vera will not let Collado go. After all, Collado is one of her best providers.

EarlyLearn’s family child care program has many women like Collado: women who are loving, warm, competent providers; who have a knack with babies and toddlers in particular; some of whom are fixtures in their communities, taking in generations of neighborhood kids. Yet they are also women who, for all practical purposes, fail as EarlyLearn providers because they cannot meet the reform’s requirements. Today, more than three years into the reform, staff at a number of the networks say that this disconnect between what some family providers can actually do and what the city expects of them demonstrates an underlying problem with EarlyLearn. It is built around what’s known to improve quality in fully staffed child care centers with teachers who hold early education degrees; it does not take into account the realities and limitations of what many family child care providers are capable of, nor does it recognize and enhance what they do well.

“Now they expect the provider to have an area for sleeping, and an area for pretending, and an area for science. They want it to be a daycare 24/7,” says Vera. “And that doesn’t work in family daycare. Family daycare should be part of the family. It’s a home.”

“She knows how to do her job, but she doesn’t know how to put it in writing.”



Rosa Collado, who has worked in family child care for nearly three decades, says she sometimes cries as she tries to correct lesson plans and child observations that EarlyLearn staff have told her must be fixed.

MISMATCHED EXPECTATIONS

Under EarlyLearn, home-based providers are required to use a curriculum written in English, although many do not read English. And while a number of home providers lack high school degrees, they also are expected to enter child observations into a computer program and then analyze which educational objectives a child is and is not meeting.

Some network staff regard this mismatch between expectations and reality as evidence for what they consider a disregard for the city's contracted family child care programs. With almost no prompting, they can rattle off a list of times when city workers charged with supporting home-based programs seemed to think they were working with centers instead. In the Bronx, an Administration for Children's Services (ACS) worker charged with providing technical assistance to family child care networks told a home provider that she must take down posters with drawings of vegetables and replace them with photographs instead. She was referring to a quirky requirement regarding corporate posters in centers, but it left the home provider dumbfounded. "You can't tell someone that they can't have posters in their own home," remembers Charmaine Swearing, EarlyLearn coordinator at Women's Housing and Economic Development Corporation (WHEDco).

Then there was the call that Carmen Rivera of University Settlement received from ACS informing her that the 200 slots for children in her home-based programs were underenrolled and that University Settlement would be penalized for it. In fact, the program was not underenrolled—it simply had a lot of infants. Unlike classes in centers, family programs take in children of different ages, and when a program has a child younger than 2, state guidelines reduce the maximum number of children she can take in to make sure the baby gets adequate attention. "These people who were supposed to be our go-to people [at ACS] didn't know that family child care was a weighted environment," says Rivera. "I sometimes feel that ACS doesn't remember that family child care exists."

Laurie Samuel, former director of the family child care network at Lutheran Social Services, was surprised when she moved from Lutheran's center-based program to its family child care network to

see how little attention ACS provided the family child care branch. “I feel like they never knew what [their family child care programs] should look like,” remembers Samuel. “We were the stepchild to the centers.”

Imposing a center-based vision of quality onto home-based programs can be an exercise in disappointment, placing a sharp focus on all the ways that family child care can never measure up. Home-based programs typically have less space than centers do. With both toddlers as well as babies too young to walk in home-based care, trips outside are difficult. There’s no sharing of sand tables or art supplies or tricycles between classrooms; no gym for rainy days; no designated janitor, security guard, cook, teacher, assistant teacher or director. The provider must have it all and do it all, usually with very little money, working hours before and after the children arrive, and often in isolation.

The staff charged with monitoring these programs are themselves often isolated, spending the bulk of their weeks traveling from one provider to another. They sometimes feel marginalized within their own organizations and say that they aren’t given the same resources as the center-based programs. An organization’s mental health consultant, for instance, will typically work with families in the center-based program but not those in the home-based branch.

One head of a family child care network told us she was routinely asked to help with the center’s classrooms, but says that there’s no reciprocity. She got misty-eyed talking about the senior level meetings with ACS that did not include her, how her organization gave kids in center-based care presents at Christmas but not those in the home programs, and the internal organizational refrain she had heard throughout a career devoted almost exclusively to family child care: “You don’t bring in money. You cannot hire.” [Nonprofit administrators] always remind me that they have to take money from other places for this.”

As part of EarlyLearn, family child care networks must have a link to child care centers, so that young children can transition to the center programs when they hit preschool age—something that appears to be working well under EarlyLearn.

But it has come at a cost. Some stand-alone family child care networks with a passion and dedication for home-based care lost their contracts, while some child care centers with no experience working with home providers began overseeing family child care programs with potential enrollments of 200 kids or more.

“WE CAN NEVER COMPETE”

In interviews with the Center for New York City Affairs, staff at many such child care centers revealed a pervasive, underlying sense that the quality of care in even the best homes will inevitably be lower than that in good centers. One education director at an organization with both a child care center and a robust family child care program talked with pride about how the kids in their home programs were thriving. Her proof? At a graduation ritual that included children of the same age from both center and home programs, the kids from the home programs “did almost as well as the ones in the center.”

Some providers themselves share this view. “We can never compete with center-based care,” Mariainez Quinones of Hooting Owls in lower Manhattan child care says. “Most of us live in the projects. We can never compete.”

It is no wonder that the single family provider working alone is fast declining in EarlyLearn. When ACS first conceived EarlyLearn, they wanted no more than half of home-based programs to include those where the licensed provider hires assistant teachers to help. But such “group programs”—which often resemble a classroom in a child care center—have turned out to be better suited to weather

“What is your actual goal for the kids? In school, people kind of expect a more formalized learning element. Should that be present in family child care? I have really mixed feelings about that.”

EarlyLearn. Today, more than 80 percent of the children in the city's EarlyLearn family child care programs are in group-based family child care, according to data from ACS. (See "Seeking an Early Education," p. 24.)

The group programs can take in more young children than programs headed by single providers, bringing in more money while making for more efficient oversight by the networks—network staff can observe more children in each visit. With multiple teachers, group providers also have an easier time completing paperwork.

But Lisa McCabe, director of the Cornell Early Childhood Program, says that insisting that family child care programs live up to center-based standards not only sets them up for second-class status, it also sidesteps the opportunity to have a real conversation about what young children's learning looks like, and how to support that across many different settings.

"We have to think long and hard about what do we mean by quality," says McCabe. "Anytime we look at the early childhood education system, we always start with classrooms.... If you go in and measure [a home-based program] using an evaluation tool that looks at things like how many math manipulatives do you have, and how many times of the day do you spend on activities...center-like programs will always look better. That makes sense. But what is your actual goal for the kids? In school, people kind of expect a more formalized learning element. Should that be present in family child care? I have really mixed feelings about that."

Collado may not be able to articulate what, exactly, her children are learning. But when Sonia Vera walks into Collado's home, she sees mostly strengths. On one November morning, a warm breeze flows through an ajar patio door as Collado hovers above a small table and serves three shyly smiling children a stew of chicken, carrots and rice that she cooked at sunrise. Collado chatters with the kids animatedly as they giggle and play peek-a-boo across the table. While not siblings, they have that kind of ease among them. They clearly love spending time with each other, with Collado, and in Collado's home. And as Vera watches, what she sees is three young children in what's typically a child's first learning environment—not a school, but a home. It is the increasing rarity of this that she wants to preserve.

So she has told Collado not to worry about creating learning centers in her home. Instead, she asked her to create just two areas—one where the children can be quiet and another where they can be loud and run around. And though Collado never completes her paperwork on time, or correctly, Vera made an executive decision. When she relayed it to her staff, the decision felt almost defiant, and Vera knew it would cost her staff time and money in the long haul, but she saw no ethical way around it.

"How are you going to tell Rosa to do something when you know she is not going to be able to do it?" Vera asks. "So I told the girls, 'Let her do whatever she can do and we fix it. Let her spend more time with the children.'" ✱

Seeking an Early Education

More low-income NYC families are using licensed, group family child care instead of friends, families and neighbors.

Informal child care provided by friends, families and neighbors has long been the most common arrangement for families with young children. But in New York City, families receiving subsidized child care are increasingly turning to licensed family child care programs over such less formal arrangements. Between January 2012 and January 2016, enrollment in informal care dropped by 44 percent—from 27,708 to 15,668 children, according to data provided by the Administration for Children’s Services (ACS). Meanwhile, enrollment in licensed family child care climbed from 26,599 to 30,775—an increase of close to 14 percent. Many children in the licensed programs are enrolled in group family child care programs, where a licensed home-based provider works alongside an assistant and which often resemble classrooms more than homes.

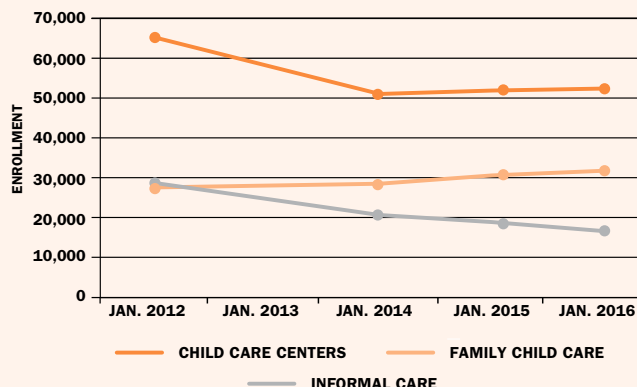
Some attribute these changes to increased awareness of the importance of early education, with many believing that licensed programs—and especially early education centers—are better equipped to prepare children for formal schooling. “It’s a trend over the last four years,” says Nancy Kolben, executive director of the child care resource and referral organization the Center for Children’s Initiatives (CCI).

Staff members at CCI say that in recent years they have fielded a growing number of calls from parents with young children who are seeking center-based care. Since many centers aren’t equipped to take babies and toddlers, most of these parents must turn to family child care instead. When they do, they increasingly opt for the more regulated and structured licensed family child care programs, where training of staff is required and which are also subject to more state oversight. They also increasingly choose the group family child care programs, which can take in more children.

In subsidized arrangements, the lone family child care provider is becoming less prominent. Between fiscal years 2013 and 2015, their numbers have fallen from 1,479 to 1,090, according to the Office

CHANGE IN ENROLLMENT BY SETTING

Between January 2012 and 2016, enrollment in center-based care has declined by more than 12,700 children. The number of children in informal family child care has also declined sharply, from close to 28,000 in January 2012 to a little more than 15,500 in January 2016. Meanwhile, the number of children in regulated (or licensed) family child care has increased, from 26,599 in January 2012 to 30,755 in January 2016.



SOURCE: ACS

CHANGE IN ENROLLMENT OF CHILDREN UNDER 2 YEARS OLD, BY SETTING

of Children and Family Services (OCFS) data—a decrease of more than 26 percent (See graph “Change in Number and Type of Subsidized Family Child Care Provider,” p. 25) Meanwhile, CCI has identified group family child care programs as a fast-growing pocket of child care capacity for young children. “People are basically operating small centers on the ground floor of brownstones,” says Kolben, about these programs.

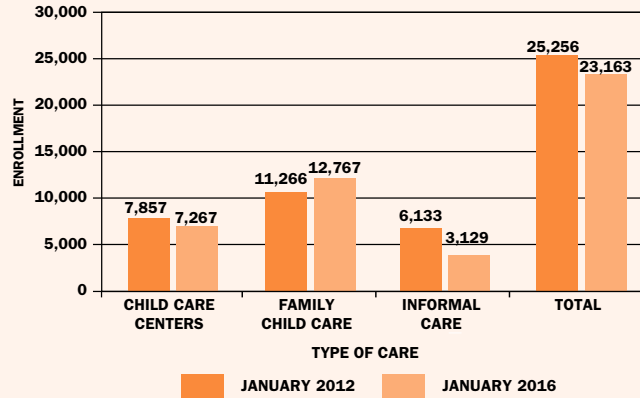
Like classrooms in child care centers, these group programs frequently have an intentionally educational feel. They sometimes label windows and doors in English or Spanish, and have cubbies where children hang their coats and stuff their blankets.

Some consciously strive to help prepare children for school, sometimes overdoing it. On a recent visit to one program in Mott Haven, for instance, the providers showed off a precocious 2-year-old with a head full of pigtails who had memorized a tall stack of flash cards. She had learned that the answer to a card with a black oval was “oval.” But a picture of a purple flower was not flower, but “purple.”

Today, more than 80 percent of the children in the city’s contracted EarlyLearn family child care program are in group-based family child care, according to data from ACS. In many of these programs, the licensed provider will sometimes attend to paperwork while the assistants, among whom there is often high turnover, tend to the children. Among families paying for child care with vouchers, more than 90 percent of children in family child care are in group-based programs.

In the years to come, even informal child care is likely to feel the push toward early education. That’s because the recently reauthorized federal Child Care and Development Block Grant (CCDBG) Act of 2014 will likely be bringing increased oversight to the city’s informal arrangements. Renewed for the first time in nearly two decades, this law stresses the importance of child care not only as a support for working parents, but also for its role in early childhood development and school preparation. To that end, it requires states to provide far more attention and oversight to informal programs receiving subsidies than most previously did. ✨

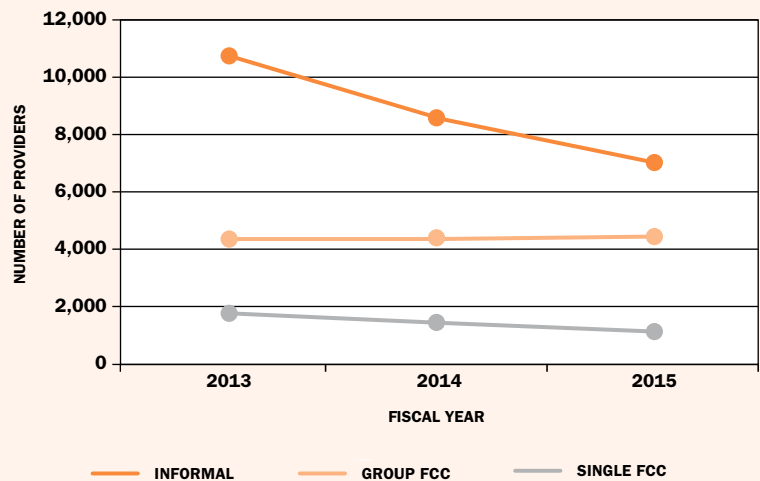
Today there are more than 2,000 fewer children under the age of 2 receiving subsidized child care than there were before EarlyLearn. There are about 3,000 fewer children under 2 years old in informal family child care provided by friends, families and neighbors than before EarlyLearn. Meanwhile, 1,500 more such young children are in regulated (also called licensed) family child care programs.



SOURCE: ACS

CHANGE IN NUMBER AND TYPE OF SUBSIDIZED FAMILY CHILD CARE PROVIDER

In New York City, the single licensed family child care (FCC) provider working alone is becoming increasingly rare. Between fiscal years 2013 and 2015, the number of such providers caring for one or more children in the subsidized child care system dropped by 26 percent, from close to 1,500 in FY 2013 to just over 1,000 in FY 2015. Meanwhile, informal care provided by friends, families and neighbors remains the most common form of family child care in the subsidized child care system, but the number of such informal providers is also diminishing. It dropped by 38 percent, from over 10,400 to about 6,500 such providers. The number of group family child care providers grew slightly during that time period.



SOURCE: OCFS “Child Care Facts & Figures” 2013, 2014 and 2015

Paperwork vs. Board Books

Some say it's the kids who lose.

In a bleak, windowless room at an otherwise cheerful Long Island City child care center, a group of over three dozen women cling to every word as Martha Becker, a mental health consultant, gives tips for managing young kids who act out. If a child loses control, Becker says, try saying, “I can’t let you hurt anyone,” instead of the rote “Don’t hit.” Being out of control is scary; using “I” tells a child you’ll help.

Then Becker pauses to let a woman beside her translate this into Spanish.

Aside from gender, Becker’s audience is a diverse bunch. Some are in their twenties; others their sixties. Some speak only English; others Spanish. One wears a hijab. All run small city-subsidized child care programs out of their homes. They are gathered today for a training organized by Catholic Charities, the network organization that monitors their programs. Though a number have never completed high school, no one seems to mind Becker’s distinctly lecture-intensive style of training. Nor are they distracted by the back and forth between two languages. They seem hungry for this information—a class of star pupils, raising hands, taking notes, asking questions, eager to swap stories about their kids.

But when the all-day training shifts to the next topic—how to write the weekly lesson plans newly required by the city—the mood in the room shifts as well. It moves from one of careful attention to frustrated endurance.

“Not everyone is doing the lesson plans,” says Enrico Rivera, assistant coordinator of family child care at Catholic Charities’ Queensbridge site. “Let’s be serious. It’s really difficult.”

He asks the women to take out one of their six binders, each stuffed with pages about how to document their work. “What we have to cover every single day—write this down, guys, we’re giving you the answer to the test—is social-emotional, language development, practical life, gross motor, fine motor,” he says. “What you do not have to do every day, but more like three times a week, or twice, is social studies, mathematics, arts.”

Pens dangle from limp fingers. Some women begin to look discouraged; others disconnected. Rivera explains that the center has come up with a new system for them, one that should make it easier to understand how lesson plans provide a “game plan” for the child observations they must also write. He then begins the arduous task of introducing the group to Catholic Charities’ latest attempt to make the requisite paperwork a little less foreboding.

‘IT’S A FANTASY’

When New York City instituted EarlyLearn, it began asking home-based providers to complete the same types of educational documentation required at fully staffed child care centers. They are to write child observations to be entered into a mazelike computerized system that, when done correctly, pinpoints student (or, in this case, baby and toddler) needs. They are expected to then use that knowledge, along with a curriculum, to create lesson plans addressing the particular needs of each child.

Nearly all agree that the goal behind these requirements is laudable: To transform home-based care from being primarily a loving or custodial arrangement to one that intentionally meets the developmental needs of very young kids, catches developmental delays early and lays a foundation for formal schooling. A provider who instinctively plays peek-a-boo with a baby, for instance, should understand how it supports the baby’s development.

“Instead of spending time on Teaching Strategies Gold, it could be spent on: How are you going to teach the children to put their shoes on? How do you teach the children to clean up?”

But the staff supporting home providers say the accompanying documentation is a tall order for a workforce that often doesn't speak English or hold high school degrees.

Catholic Charities' educational director Julia Payne says she spent the bulk of one summer whittling the "insurmountable" child observation template published by the educational publisher Pearson into checklists that caretakers can carry around and complete whether or not they read English well. "With help like that people said 'Oh, ok, it's not so impossible to do the assessment,'" says Payne.

But Catholic Charities is still struggling to help providers write lesson plans informed by those assessments. And staff at many other networks say that more than three years into EarlyLearn, a large chunk of family providers is still nowhere near where the city wants them to be, even after extensive training efforts. Most blame the paperwork—not the providers—describing it as unwieldy, intense, and insufficiently tailored to the realities of who the providers are.

"It is a fantasy," says Sonia Vera, program director at the EarlyLearn network New Life Child Development Center. "It's not real. We all know that."

Vera, who trains support staff at other networks, says that a number of them have simply stopped expecting providers to complete the paperwork.

MISMATCHED EXPECTATIONS

Much of the documentation demands that caretakers navigate a computer system, yet many providers have no experience with computers; the only curriculum earmarked for family child care comes in English, yet many providers speak and write in other languages; writing lesson plans is a skill learned in early education programs, yet many providers don't have GEDs. And then there's the time suck. "We have to cook. We shop for food. We take care of the children, and clean everything. And now, while we are sterilizing toys and preparing food for the next day, we have to do observations," says Mariainez Quinones, a provider. "And we have our own families."

Network staff say that when they send the paperwork to ACS, they rarely receive feedback, fueling the sense that it is purposeless.

Lesson plans—something that Rivera says teachers with master's degrees sometime struggle with—are a particularly thorny topic. Unlike center-based teachers, home-based providers look after kids as young as a few months old to as old as 3—a vast gulf, as anyone who has parented young kids knows well. This means their lesson plans must account not only for the oldest child in the room, but also for the baby who can't yet crawl.

"They want us to do the lesson plan and use the curriculum," says Janice Mitchell, a family child care provider of 16 years. "They don't understand when you're in a family setting you work with different ages. Infants are not doing the same thing as 2-year olds!"

Network staff say they see lessons reaching for the impossible—where infants are instructed on numbers, for instance, or toddlers are expected to sit still for long stories and activities. Some worry this may have the opposite effect intended—forcing kids to endure activities that are developmentally inappropriate.

The networks continue to devote large chunks of the providers' six mandatory professional development days each year teaching the ins and outs of the requisite paperwork, but say it's still not enough and sacrifices time that could be better used.

"Instead of spending time on Teaching Strategies Gold [the software program for assessing children] it could be spent on: How are you going to teach the children to put their shoes on? How do you teach the children to clean up? How are you going to learn through play?" says Vera. "Instead, we spend a lot of hours on something they don't really understand."

Network staff say they see lessons reaching for the impossible—where infants are instructed on numbers, for instance, or toddlers are expected to sit still for long stories and activities.

The Catholic Charities training provided a stark example of this: At one point, staff and providers spent several minutes deliberating whether presenting a toddler with different textured fabrics should be categorized as a “science” activity or “life & sensorial.” A few women flipped through their notebooks, searching pages explaining the different domains of learning. But the answer remained elusive, and staff seemed uncertain too. Finally, one staff member decided: “If you are teaching fabrics that have different grades, that’s science. But if you’re teaching ‘this is soft, this is hard,’ you are teaching life and sensorial.”

Obediently, the providers wrote this down.

A while later a provider raised her hand to ask if she must fill out the infant section of her weekly lesson plan even though she had no infants. “No,” Enrico Rivera said resolutely. But the question hung in the air. It underscored just how arbitrary it all felt.

Later that same week, on a cold and blustery winter evening, nine rain-drenched Brooklyn providers gathered in the New Life child care center for a workshop on navigating Teaching Strategies Gold. All were there of their own volition—the workshop was voluntary—but seemed eager to get the information and move on quickly. Perched on toddler-size chairs, some kept their coats on and clutched purses in their laps.

In Spanish, the teacher tried hard to explain how observations for Teaching Strategies Gold should differ from their usual interactions with children. In observations, she said, you hang back. You don’t ask questions; you don’t interact. You just watch.

Of course, this isn’t how you should normally interact with children day to day, she was compelled to tell the class, in case there was any confusion. Normally you want to interact with them often, ask questions. After all, it’s hard to know what a child is thinking and feeling without those questions. For instance, if you ask a toddler to draw a face and they draw a circle with only eyes and a mouth, why didn’t they draw the nose?

Because they aren’t following directions? one woman offered.

No, the teacher said. Because that’s how they see the world! They don’t see the eyebrows and ears and nose unless you point them out.

In another universe, she would have lingered on this point much longer. She may have stressed how talking with kids and asking them questions is paramount to quality care. In another, alternate, more perfect world, she would have also been able to talk about child development, and why it’s not realistic to expect toddlers to draw a perfect face.

But this was after-hours triage, a last-ditch attempt to give providers needing extra help a quick-and-dirty on paperwork. The child care center would be locking up in less than an hour. The providers needed to return to their own families. One was squeezing this workshop between closing the family child care program where she works as an assistant and wishing her 2-year-old son happy birthday before tucking him into bed. So the teacher moved on, returning her attention to the Teaching Strategies Gold checklist onscreen.

And was it helping? Were her providers getting it? “Some have progressed, but there are those who don’t know how to turn the computers on, and they’ve been here two years,” she says, then adds, “and they’re good providers.” ✿

“Some have progressed, but there are those who don’t know how to turn the computers on, and they’ve been here two years. And they’re good providers.”

Child Observations (Almost) the Way EarlyLearn Intended

Just over a year ago, many of Women’s Housing and Economic Development Corporation’s (WHEDco) EarlyLearn family child care providers would turn in child observations that were merely opinion: “He’s the cutest thing ever,” they’d write, or “This little boy is so bright.”

A few others turned in the exact same observation for each child—one had even photocopied the same observation several times and simply replaced the names.

Now, many of those same providers have begun writing observations that work much as the EarlyLearn visionaries intended: They identify the needs of children, which then inform what happens in the programs.

It’s a hard-won success. To get there has required an enormous amount of resources and handholding from WHEDco, which has a dedicated training unit as well as a team of three staff dedicated to its EarlyLearn program, two with years of experience heading up early education settings.

It has also required WHEDco to ignore some of EarlyLearn’s other requirements. For now, WHEDco’s EarlyLearn providers write child observations by hand; they’re not entering their observations into the computer program themselves or writing lesson plans.

To improve the observations, WHEDco staff worked with individual providers over several months, explaining, “Saying a kid is adorable or you think he’s bright is about you, not them.”

Now, many of the observations they receive provide them genuinely useful information about the children—that one baby held a bottle for the first time, for example, or that a toddler is routinely hitting other kids.

Then WHEDco staff enter these observations into the computer

software program Teaching Strategies Gold. Because WHEDco requires its EarlyLearn providers to write an observation for each child every day, there have been weeks that Marivel Colon, one of their staff members, says she has entered 600 observations into the Teaching Strategies Gold system. Then she spends an enormous amount of time using the software to analyze what learning domains the children might need help with.

Though overwhelming, Colon says the system has provided her with useful information. She has seen which programs, for instance, aren’t doing enough activities that fall in the “science” domain. She then handpicks activities to fill the gap, suggesting, for instance, that a provider might organize an activity around watching an ice cube melt in the sun or experimenting with how objects float or sink in a kitchen sink.

Now, many of the observations they receive provide them genuinely useful information about the children—that one baby held a bottle for the first time, for example.

This support that WHEDco staff extend to their providers is far more intense than most networks can afford. But WHEDco staff find the information it gives them invaluable.

The Administration for Children’s Services (ACS) wants to aim even higher. Teaching Strategies Gold is the system that ACS would like to rely on to assess how the children are doing in the home-based programs. But ACS early childhood staff say that until the home-based providers have learned to enter the observations into the system themselves, the information gleaned from it will not be considered reliable. ✱

A Family Business

EarlyLearn’s focus on documentation hits immigrant providers especially hard.

Bi Quing Zheng, a mandarin-speaking EarlyLearn provider, says she could not have met EarlyLearn’s documentation requirements without help from her family. Zheng’s son and daughter translate her bimonthly observations of the children from Chinese to English.

“The biggest pressure is writing the observations,” Zheng says in Mandarin. “We are so busy all day; it’s a full-time job watching the children.... There is no time to be taking notes.”

Her experience echoes that of other non-English-speaking family providers in the city’s family child care system. Struggling and challenged by the amount of paperwork, many enlist their family members to translate and write their paperwork in English. Some have even resorted to paying for an English speaker to do the paperwork, a practice that Carmen Rivera, director of family day care at University Settlement, describes as “sad,” as providers make very little money to begin with—as little as \$28 a day for a toddler.

Network support staff like Rivera say they struggle to fully support those who are not fluent in English, and that the EarlyLearn reform did not take into account the non-Spanish and non-English-speaking providers. A serious oversight, she says, since immigrant parents often seek out family child care providers like Zheng who will speak to their children in the same language they speak at home. One network staff member says that on visits with family child care providers who speak neither English nor Spanish, she has resorted to communicating with providers entirely through hand gestures.

University Settlement, an EarlyLearn network on the Lower East Side that has a large number of Chinese-speaking providers, is unusually fortunate in having Chinese-speakers on staff. It enlists them to translate trainings for providers from English to Spanish and then to Chinese, a process Rivera calls “really tedious.” Rivera’s staff also translates the observation forms providers must fill out. But sometimes even this is not enough.

Pik Shan Lam, a family provider with University Settlement, says she spends hours each week struggling with observations, even though the network lets her write them in Chinese.

“My 17-year old son sometimes has to translate my Chinese words to English in the computer to help me find out how to write the

correct Chinese symbols,” she says. She’s required to use a specific education terminology, and Lam says that her lack of higher education and language skills makes this nearly impossible.

EarlyLearn family child care programs are open from 8:30 in the morning to 6 at night. “I get up at 6 in the morning to cook for the day,” says Bao Na Li. Now, at the end of the day, after the children have gone home and after cleaning up, she must also do paperwork. Because she is paid per child she looks after, the extra time she spends on paperwork lowers her hourly pay that is already quite low. (See “Scraping By,” p. 31.)

Lam and her husband, who partners with her in their group family child care program, both complain that they have not been adequately compensated for this extra work. They continue because they “have to,” and in a few years they plan to retire.

Diana Perez, director of home-based child care services at WHEDco in the Bronx, says that this is a sadly common response to EarlyLearn from providers who are struggling with its documentation requirements. Those without education or English, she adds, “are more than likely the casualties of EarlyLearn.” ❁



At Zhuo Hao Zheng and Bi Quing’s home-based day care in Chinatown, the couple takes care of four children whom they speak to in Mandarin, which is the same language the children speak at home. They must enlist help from their own children to write child observations in English.

Scraping By

EarlyLearn asks more of providers, but the pay doesn't add up.

Family child care providers are among some of the city's lowest-paid workers. A recent study by Children's Defense Fund found that 88 percent of the home-based caregivers they polled had annual incomes below \$25,000.¹⁵

Many who join subsidized, city-contracted network organizations do so in hopes that those organizations will help fill their programs with children, even though they are typically paid less each day per child enrolled through this program than they receive for children whose families pay with vouchers.

But some providers insist that they now bring home even less money than before EarlyLearn. A common refrain: EarlyLearn demands more of its contracted family child care programs even as they bring home less money. But is this perception accurate?

EarlyLearn providers are paid a daily rate for each child they look after, and that rate varies depending on a child's age, whether a child is full-time or part-time, and whether the provider works alone or with an assistant. For a provider working alone, that rate runs from about \$28 a day for a toddler to \$30 a day for an infant. (If paid with vouchers, that same provider would likely receive about \$2 more per child—\$30 for a toddler and \$32 for an infant.)

Technically this EarlyLearn rate is about \$1 more each day for each child than a provider received before EarlyLearn. Many providers have also begun seeing an increase of about 2 percent on top of that due to the recent cost-of-living adjustment (COLA). (This went into effect in April of this year and is retroactive to July 2015. However, some providers say they have not begun seeing this increase yet.)

For an EarlyLearn provider taking care of three children on her own, this comes to an increase of about \$40–\$60 more that she makes each month after EarlyLearn than she would have before depending on the children's ages and how many hours per day they're cared for.

If a provider is sick, takes time off for a holiday or must close her apartment for any other reason, she will make less; providers do not get paid sick days or holidays. If the children in her care are sick or go on vacation, she will not get paid for those children; she is paid based on attendance.

EarlyLearn's typical gain of a little more than \$1 more per child per day (which includes the COLA increase) is quickly offset by a new expense. EarlyLearn requires providers to purchase their own insurance, an expense that typically costs about \$550 each year—or \$45 a month—for a provider working alone, and about \$120 a month for a “group” provider who hires assistants so she can take care of more children at a time and receive a higher rate per child.

Then there are the other costs charged by the organizational networks that EarlyLearn providers belong to. These can vary widely from network to network, leading to what Jeremy Hoffman, former director of child care policy at the United Federation of Teachers, the union that represents family child care workers, describes as the “wild west” of family child care compensation. “Some charge application fees, annual membership fees, curriculum fees,” says Hoffman. “We've seen all those fees beginning to go up.”

MARC Academy in the Bronx, for instance, charges its providers an annual membership fee of \$400 each year—an amount that director Anna York considers modest.

Still other networks charge an administrative fee for any child in a home-based program enrolled not through EarlyLearn, but whose parents are paying for their child care privately or with a voucher. The Administration for Children's Services (ACS), which issues contracts to these networks, does not track

A recent study by the Children's Defense Fund found that 88 percent of the home-based caregivers they polled had annual incomes below \$25,000.

CHANGE IN DAILY RATE PER CHILD PAID TO CONTRACTED FCC PROVIDERS: 2007 TO PRESENT

	OCT. 2007	JULY 2011	JULY 2013 (EARLYLEARN RATE)	JULY 2015 (WITH COLA INCREASE)	% RATE HAS INCREASED SINCE 2007
SINGLE PROVIDER					
INFANT FULL-TIME	\$28.59	\$28.59	\$28.59	\$30.19	5.6%
TODDLER FULL-TIME	\$26.59	\$26.59	\$26.59	\$28.15	5.9%
GROUP PROVIDER					
INFANT FULL-TIME	\$31.59	\$35.39	\$31.59	\$37.12	17.5%
TODDLER FULL-TIME	\$31.59	\$32.39	\$31.59	\$34.47	9.1%

SOURCE: ACS child care rates provided by University Settlement

or regulate the various administrative fees that networks charge providers.

Other networks require providers to purchase the materials they need to meet EarlyLearn requirements, like the Creative Curriculum, which can have a one-time charge of about \$100. Many providers have also bought computers and internet services so that they can complete and submit paperwork from home. They are also expected to pay union dues.

Also significant to a family provider's take home pay: Under EarlyLearn, family child care providers are no longer supposed to look after children 3 and older. Instead, they are expected to look after only infants and toddlers, with children 3 years and older attending child care centers. EarlyLearn providers receive \$2 more per day for a child younger than 2 enrolled full-time than for a toddler or preschooler. But when an EarlyLearn provider has an infant, state guidelines require that she must take in fewer children overall—the idea being that infants need more attention. So the end result is less take-home pay for an already low-paying job. As a result, many providers avoid taking in infants.

“There’s no way that I can envision in the current structure in the rates that you can run a program with just infants and toddlers,” says Hoffman.

Some providers say they struggle with the new age restriction and must have other ways to supplement their incomes to make a living. Hamilton-Madison does not charge a network fee, and yet Juanita Chandler, who runs what the network considers to be one of its highest-quality home programs, says she makes only about \$22,000 a year—an amount she can make do on only because she has other sources of income after retiring from a career of working with developmentally disabled adults.

EarlyLearn networks, in turn, say that the administrative fee of \$5.34 that they receive per child from ACS is not sufficient to operate their family child care programs. For some, charging providers membership and other administrative fees to supplement their programs makes the most sense.

Networks that do not collect network fees may instead skimp on trainings, rarely hiring outside experts or translators for providers who don't speak English, for instance. Those at large and well-established institutions sometimes pull resources from other parts of their organization to supplement their family child care networks. Women's Housing and Economic Development Corporation (WHEDco) is among those that raise money privately to help support their EarlyLearn program. “For us, it's a very costly venture,” says WHEDco's director of home-based child care services Diana Perez. “I think you always lose money on EarlyLearn.”

The Jewish Child Care Association (JCCA), which has a longstanding network serving over 100 Russian providers and families, is taking a different approach: in November, their board decided its family child care program was “fiscally unviable,” says Sandra Katz, JCCA's vice president of services in the Jewish community. In April, after more than 50 years of operation, their family child care network closed. ✱

Case Study: How Much Does Quality Really Cost?

University Settlement, one of the city's largest child care providers, was able to combine EarlyLearn funds with resources from federal Early Head Start—with dramatic results.

Within months of EarlyLearn's launch, University Settlement was struggling. Fifteen of their 58 family child care providers resigned because of the added responsibilities. Fewer providers meant fewer children and less money for University Settlement. It quickly became evident to Jeanette Monninger, director of Early Head Start at University Settlement, that with the new requirements and diminishing funds, "it was very unrealistic for this program to succeed and quality care was not going to happen."

Then, in 2014, University Settlement was awarded a 12-month grant of close to \$900,000 from the federal Early Head Start-Child Care Partnership and Expansion Program to improve its family child care programs, including adding staff, trainings and supplies. This marked a huge increase in funding on top of the approximately \$270,000 that a network with 200 slots typically receives each year. Soon University Settlement's network was swimming in resources that they say has allowed them to make EarlyLearn work much as its visionaries intended.

A \$900,000 GRANT

With the grant, University Settlement increased its family child care support team from five to 16, including a designated recruitment coordinator, a coordinator for parent-community involvement, a mental health coordinator and a special-needs coordinator. The number of educational aid specialists who visit programs also doubled.

Out of its 45 family child care providers, network staff chose their 18 top-performing providers to participate in the program. Those providers look after 72 children who are eligible for Early Head Start. They receive a stipend of \$2,000 in return for the extra effort needed to improve their programs to reach the higher standards and requirements of Early Head Start. However, University Settlement staff say improvements went beyond these 18 providers. With the additional resources, the network could ensure that all of the 45 providers and 210 children in their family child care program reaped benefits.

"We didn't want parents to feel like, 'You have an Early Head Start provider and we have an EarlyLearn provider,' so we decided that Early Head Start standards will go across all providers," says Monninger.

For example, only University Settlement's Early Head Start providers are required to have Child Development Associate (CDA) certification, which is a professional accreditation in

early childhood development, but the organization now has the resources to pay for CDA training for all of its 45 providers. And it is no longer a stumbling block for many providers that the CDA training curriculum is not in Chinese; they now hire a certified CDA trainer to do the training in Chinese, as well as in Spanish.

Today, University Settlement's six home visitors speak Chinese, English or Spanish and carry no more than seven to eight cases—less than half of what they carried before they received the grant. They make three visits to each program per month, instead of one every other month. (One study of home-based providers found that programs that receive supportive program visits more frequently than once a month were affiliated with higher quality care. See "Effectiveness of Network Characteristics and Services for Family Child Care Quality, p. 44.)

With the decreased caseload, University Settlement's staff "are able to focus more on individual child development. They have more time to talk about children as a whole and give more support. It's a partnership," says Monninger, adding, "That's the ultimate goal for our providers, to feel that they are not alone."

Bao Na Li, one of the Early Head Start providers, welcomes the extra support and additional trainings and resources. "It's good we are getting professional development," Li says. She recently completed her CDA training and displays her certificate with pride.

'WE SEE THE IMPACT'

Others, including Pik Shan Lam, a provider in the East Broadway section of Chinatown, say that with the additional support comes more pressure than she can handle. "We are now better than schools, with so much paperwork and formal guidelines, but unlike teachers we are responsible for everything. It's a lot of pressure," Lam says.

But University Settlement says that the added supports are working as intended. "We just did a program assessment. We see more parent involvement, more mental health screenings. We are sending 10 referrals to special needs. Our post-FCCERS [family child care environment rating scale] also came out very well for EarlyLearn," Monninger says. "We see the impact."

Carmen Rivera, director of family day care, says she now understands what EarlyLearn was aiming to achieve. "Early Head Start standards are what the Administration for Children's Services is trying to implement in family child care [through EarlyLearn], but you can't realistically implement it without the money," she says. Partnering with Early Head Start, she adds, brought in the needed resources, and Rivera believes that as a result, just about all of University Settlement's family child care programs have improved.

This year, the federal government will award the final \$135 million allocated to this program to support additional Early Head Start-Child Care Partnerships and Expansion programs nationwide. ✨

Lost in Translation

Under new city requirements, the number of immigrant providers appears to be shrinking.

Bi Qing and Zhuo Hao Zheng’s airy three-bedroom apartment in a public housing complex at the Chinatown foot of the Manhattan Bridge looks like your typical Chinese grandparents’ home. Jade plants adorn the window ledges, Chinese calligraphies hang on the walls, and Buddha statues are scattered around for good fortune. But there are also shelves of brightly colored toys, children’s books and stacks of diapers.

Besides sharing the apartment with their grown son and daughter, the couple takes care of four children of Chinese heritage, all between the ages of 1 and 3. They speak to the children in Chinese, which is the same language the children speak at home. Most of the kids live in the neighborhood, and one of them lives just a few flights of stairs up in the same building. “His mother can drop him off early in the morning in her pajamas and slippers,” Zheng says, in Mandarin.

For the city’s many immigrant parents, family child care programs like the Zhengs’ hold a particular allure: They can place their children in settings that mimic the culture, food and environment of the child’s own home. “Many immigrant families want someone caring and nurturing, like a *babulia* [Belarussian for grandmother], to take care of their children. Families can feel safe and secure. Their children retain their culture and language,” says Sandra Katz, vice president at Jewish Child Care Association (JCCA), which for decades ran a family child care network that caters to Russian immigrant providers and families.

But since EarlyLearn, the world of subsidized family child cares like the Zhengs’ is shrinking. According to data from the city’s Administration for Children’s Services (ACS), 30 percent of ACS’s Chinese-surnamed service providers left the city’s contracted child care system with the 2012 introduction of EarlyLearn. By 2016, the total number of such providers had decreased by 40 percent.¹⁶

Family child care support staff say the reform’s intense documentation requirements place an especially heavy burden on those who have a minimal education and speak little or no English. As a result, many of these providers choose to leave. (See “A Family Business,” p. 30.) For instance, at Hamilton-Madison House, the EarlyLearn network that the Zhengs belong to, the number of Chinese-speaking providers went from 25 to 17 with the introduction of EarlyLearn.

Interviews with such providers also suggest that EarlyLearn’s attempts to enforce blanket guidelines—with little regard for or understanding of the providers’ cultures—can nudge the home-based programs away from the very things that attract immigrant families to them: their strong roots in a particular culture.

The Zhengs are a case in point. The number of books on their shelves has grown exponentially. But most of the new books provided to them through their EarlyLearn network organization are in English. The Zhengs cannot read English, so the books sit untouched.

And though the children the Zhengs look after love rice congee with vegetables and meat, at a recent EarlyLearn training for family child care providers at Hamilton-Madison House, the nutritionist asked that they serve only two Chinese meals per week. She encouraged them to begin substituting traditional Chinese meals with sandwiches, pasta, brown rice and pizza, saying it would add variety to the menu and that the children should get used to the food they will later be served when they go to schools. If providers did not follow these requirements, she told them, they can risk punishments

Attempts to enforce blanket guidelines can nudge these programs away from the very things that attract immigrant families to them: their strong roots in a particular culture.

in the form of reduced food allowance. (Hamilton-Madison House later stressed that they try to avoid this.)

Isabel Quintana-Eddy, family child care director at Hamilton-Madison House, where about a third of the providers are Chinese immigrants or of Chinese heritage, says it has been a struggle for her network to support three essentially different groups of providers: those speaking primarily Chinese, Spanish or English.

Quintana-Eddy, who is bilingual, can provide trainings in both English and Spanish, but then the Chinese speakers miss out on the information.

Although her budget does not account for it, she has paid up to \$2,000 to hire a Mandarin- and Cantonese-speaker to do trainings. But even then, she says, information still gets “lost in translation.” Once Quintana thought a trainer had held a solid session on nutrition in Mandarin, but when Quintana later visited a service provider in the park, she learned that the service provider believed that she was not to serve the children in her program cheese. In fact, the trainer had talked about not serving fake cheese.

Sometimes these types of misunderstandings result from language barriers; other times it is because of cultural differences, says I-Ling Tsai, infant and toddler specialist at the Day Care Council of New York. Tsai, who hails from Taiwan, has trained many of the city’s Chinese-speaking EarlyLearn providers and has watched them struggle to adapt. Most EarlyLearn networks require providers to use the Creative Curriculum, which is built around the notion that caregivers should actively foster independence in young children—providing them with the space to make mistakes as well as messes, and encouraging them to explore the world at their own pace.

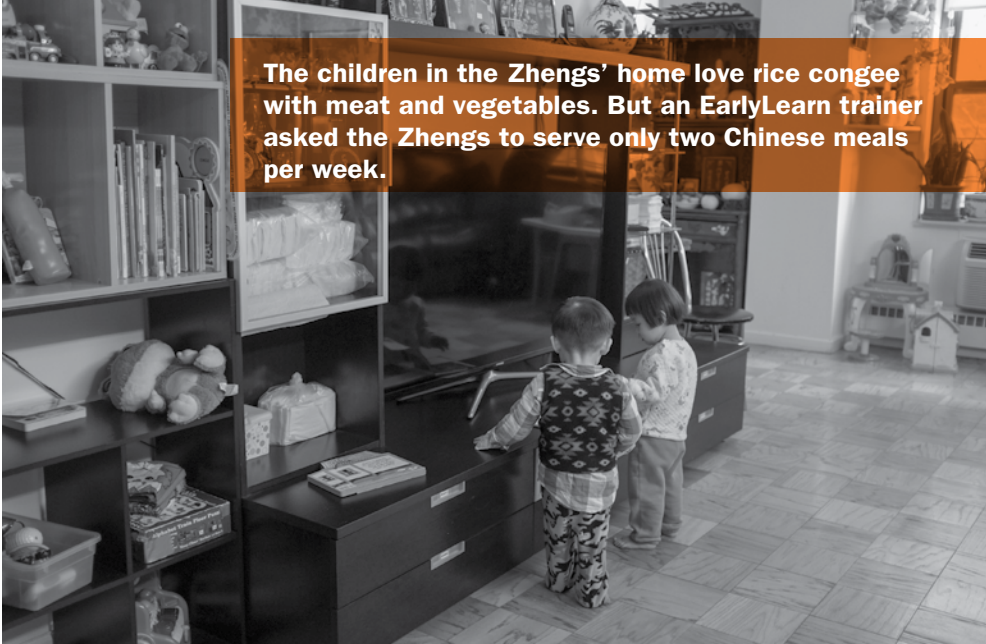
But Tsai says this child-led approach can make for an awkward fit with childrearing practice in some cultures, and especially in those that believe in coddling young children. For instance, she says, it is common for both Chinese and Hispanic providers to carry a 2-year-old on their back while spoon-feeding another child.

(Tsai says the Creative Curriculum’s approach, on the other hand, would want the spoon-fed child to experiment with feeding herself and the younger child to be exploring her environment.)

And compared with Westernized providers, those of Chinese heritage tend to “talk more in a demand-command way than a positive, open-ended way to the children,” says Tsai. “It’s deeply related to how their mindset is; it’s very teacher-directed [rather] than child-led.”

Changing childrearing beliefs and practice that have been passed down from generation to generation does not happen quickly or easily, says Tsai. In her work with providers, it helps enormously that she is Taiwanese-born and able to bring to the table a deep understanding of the providers’ culture and the challenges they encounter trying out new ways of caretaking. A mother of two young children, she often references her own experiences and struggles, which helps providers to ground the theory in their trainings in something concrete and relatable. “The hardest part is to make the Chinese providers understand that they don’t have to do everything [for the child],” says Tsai.

Most EarlyLearn support staff, however, work with some providers from cultures other than their own, and few say they receive training on how to do so. In our reporting at CNYCA, we saw several examples of cultural differences leading to misperceptions. On more than one occasion, for instance, support staff expressed puzzlement that providers insist that anyone entering their homes remove



The children in the Zhengs’ home love rice congee with meat and vegetables. But an EarlyLearn trainer asked the Zhengs to serve only two Chinese meals per week.

shoes; some even considered this unsanitary. Yet in most Asian cultures shoe removal is considered a way to keep the floor *more* clean.

Nor does everyone agree that it's a worthy goal for immigrant providers to adopt new childrearing styles. Immigrant parents often choose homes where they see their own parenting beliefs and practices mirrored. Pik Shan Lam, a family child care provider with University Settlement, says this can make for an uneasy situation for providers.

Lam says that for health and safety reasons, Chinese immigrant parents of the children she looks after don't like the children to go outside and especially if it's at all cold. But the EarlyLearn network she belongs to requires that the children get fresh air for an hour every day, leaving her in the awkward position of having to disappoint either her client or her boss.

Tsai, for her part, sees that a main part of her role as a trainer is to nudge providers of Chinese heritage toward adopting a more child-led approach. "I would tell them... 'When the child is ready to be independent, let them do that. When they are ready to crawl or walk, it's your job to make the environment clean so they can do that and not to put them into a high chair or playpen,'" she says. "Parents expect someone to take care of babies, but our job is beyond just taking care of young children.... Our job is not to do things for the children but to support them." ✱

Culturally Attuned, Relationship-Based Support

For more than 50 years, the national, research-based Parent Child Home Program (PCHP) has sent literacy paraprofessionals into low-income homes where they show parents how to read, play and converse with young children in ways that build early literacy skills. Critical to the program's success is that they carefully train paraprofessionals on how to build trust with caregivers—something some studies suggest may be key to creating change in family child care programs as well. (See "What Should a Home Visit Look Like?" p. 42.) To that end, PCHP paraprofessionals learn about cultural and language sensitivity, and typically provide materials in a parent's own language.

About 10 years ago, PCHP modified the program to work in a family child care setting, where children of different ages could reap its benefits. In the family child care model, the literacy paraprofessionals visit family providers' homes for 45 minutes, two times a week, over a one-year period. Bearing books, educational toys and games, they build an allegiance with providers and model for them how to interact with young kids in ways that get them talking.

PCHP executive director Sarah Walzer sees these home visits as a way to help narrow the classroom achievement gap, which can begin developing during a child's first year. "It's all about not only using quality language and asking open-ended questions when you're reading a book and engaged in a game,... it's a back and forth where the child has heard more words and also has practiced

how to use them," she says. "If you come to class without those language skills, you are likely to be less comfortable trying."

PCHP assigns home visitors to families who speak the same language they do and who are typically from the same neighborhoods and communities. Walzer credits this approach for the program having made a "deep penetration in immigrant communities." More than half of the families that PCHP serves are non-English speaking, says Walzer.

When providers have children who speak many different languages, PCHP staff tell them to talk to kids in the language that they feel most comfortable with. Lucia Coste's family daycare in the Bronx receives reflects this. Her children come from Puerto Rico, Dominican Republic and Mali. Coste prefers to speak Spanish to the children but she's also able to read to them in English. Coste says the program has taught her more about "how to communicate, how to interact better with the children and do activities they are interested in," she says. "It also helped to adjust my environment, rearrange things to be more effective."

PCHP staff are working on a formal evaluation of the impact of PCHP in family child care and say they see promising signs, such as an increase in children's attendance in the child care programs, which they believe is because parents perceive their children are getting a better education.

For providers like Coste, the main disappointment is that the family child care model lasts only one year. "All the providers want to continue the program," PCHP home visitor Alba Rosario says. "And it breaks my heart to turn them down." ✱

The Struggle to Improve Quality

EarlyLearn support staff walk a fine line between coach and monitor.

From the outside, Acorn Tree Group Family Child Care^{1*} in the University Heights neighborhood of the Bronx seems warm and inviting. A green awning with the daycare’s name and logo stretches from the white, red-trimmed home. A ramp eases the way for strollers. Go through the front door and you’ll smell curry cooking. A creaky staircase leads upstairs, where the family who owns the daycare lives. To the right is the daycare itself, shrouded from view by gauzy gold-striped curtains and a glass door with a pink sticker letting it be known that breastfeeding is welcome here.

But enter the daycare, comprising two large rooms, empty except for a few bins of toys, some play yards and an elaborately patterned carpet, and nothing feels quite right. The rooms are dim and musty. Though it is warm outside, the windows are closed tight and the air feels stale, lifeless. Of three overhead light bulbs, only one works. But mostly, it is preternaturally quiet. “Too quiet,” Marivel Colon, a family child care educational aid from the social service organization Women’s Housing and Economic Development Corporation (WHEDco), will later tell her colleagues. Mostly, you would never guess there are children here.

Colon, a former teacher and principal with a no-nonsense sensibility, turns to Raya Uddin, the daycare owner. She peers at Uddin over black-rimmed glasses. Uddin is girlish—when she laughs, she covers her face with a hand—but she has a son old enough to be in college. Her husband is forever a few steps behind or to the side of her. Both are barefoot and dressed in the traditional clothes of Bangladesh, their homeland, she with a bright orange and gold scarf draped about her head, he in all black. “Where are the children?” Colon asks.

Wordlessly, Uddin leads Colon and her colleague, Charmaine Swearing, through the rooms. Her husband trails behind. Uddin swings open a door to the kitchen. There, two stunned-looking African-American toddlers sit at a tiny table. A third child, also African-American, is strapped to a booster chair near a cabinet a few feet away. The children blink at the visitors, expressionless. It is a stark contrast from another group family child care program that Colon and Swearing have just come from. There, when they entered, the children flocked about them, eager, full of life, joyful and curious to know who these visitors were.

At the stove, Uddin’s assistant stirs macaroni and cheese in a tiny aluminum pot. She plunks a small bowl in front of a little girl.

“Oh, they’re eating lunch,” says Colon. Throughout much of this site visit, Colon, bilingual in English and Spanish, will provide many of the words spoken. This is partly of necessity: Neither Uddin, her husband nor her assistant speaks much English and no Spanish. The children, who most likely hear English at home, are still learning to speak.

“No vegetables?” Colon asks the assistant. Suddenly, the girl begins to gag on the macaroni and cheese. She silently struggles, mouth open. It lasts only a few seconds, but feels like much longer. She spits up her food. No one moves to help or comfort her, and she doesn’t seem to expect it.

Uddin says she thinks the girl is getting sick. Colon tells the assistant to please clean up and the assistant wipes the spat-up food from the table. Then Colon tells her to wipe the girl’s face, which is still covered with food. The assistant returns to do that too. She does so efficiently and silently.

Later, sharing Twizzlers in a car headed back to WHEDco’s office, Colon and Swearing will put words

She spits up her food. No one moves to help or comfort her, and she doesn’t seem to expect it.

1. Names and some details have been changed.

to what is wrong. These small children are supposed to be learning language, but in this home, they are rarely spoken to. Whether for lack of a common language, lack of an understanding on Uddin's part on how to help them or lack of interest, it seems that at Acorn Daycare children are being warehoused more than nurtured.

Acorn Family Daycare is just one of over 13,000 of the city's subsidized child care programs that are run out of a private family home where the vast majority of New York City babies and toddlers receiving subsidized child care spend their time. These home-based arrangements span everything from informal agreements with grandparents to signed contracts with small child care center-like programs.

The problems that often plague families living in poverty can also trouble these home programs. Home providers are often isolated and, like the families they serve, living in or on the brink of poverty.

One large study of nonfamilial family caregivers found that over 9 percent reported clinical depression. For those working in family child care settings, depression was more closely linked with negative behaviors such as being more withdrawn and showing less sensitivity toward children.¹⁷ Other studies have found that, on the whole, family child care providers have lower education levels than center-based caregivers. The quality of the care they provide can vary greatly from home to home, but has been found, on average, to be of lower quality than that at child care centers. "The training and capabilities of the caregiver are lower in family settings," says Steven Barnett, director of the National Institute for Early Education Research at Rutgers University. "If you're just sitting in front of a TV, it doesn't matter how small the [child-to-provider] ratio is, that's not good."

Poor children—the ones research shows have the most to gain from rich learning environments and the most to lose from poor ones—rarely wind up in the family-run programs that would give them the best start in life. In one massive dataset published by the National Center for Education Statistics, 90 percent of home-based daycare arrangements rated as "poor" or mediocre.¹⁸ For children living in poverty, only 4 percent of home-based daycare arrangements rated as "high-quality." Many programs provide care of a quality so low it could harm children's development, says Barnett. One research paper referred to this as a "crisis in the quality of child care" in low-income communities.¹⁹

New York City's EarlyLearn reform aimed to address this crisis. Among its goals was to raise the bar for its family child care programs. To that end, it now asks its home-based providers to meet many of the same requirements for teachers in the more formal child care centers. But when the Center for New York City Affairs (CNYCA) at the New School surveyed the social service network organizations charged with monitoring and supporting the subsidized home programs, the staff repeatedly said that it is the requisite home visits—unique to family child care—that hold the most potential for improving quality in these programs. On these visits, network staff go to a program to observe and work one-on-one with the provider.

They say these home visits allow them to observe the children in a program while also delivering individualized attention and instruction to a diverse workforce. They can also bring much-needed support and camaraderie to a group of providers who are infamously isolated and overextended, sometimes working alone or with one other assistant for minimal pay.

Emerging research echoes this, with some studies suggesting that home visits where a home provider works collaboratively with a professional support staff can indeed be key to improving quality. (See "What Should a Home Visit Look Like?" p. 42.)

But doing home visits in a way that leads to program improvement is no easy feat. It is especially complex when the home visitor is responsible not only for helping the provider, but also for making

The problems that often plague families living in poverty can also trouble these home programs.

sure she is complying with regulations and standards, as is the case in EarlyLearn. For an EarlyLearn home visitor, this means walking a delicate line between being program coach and monitor, between building an allegiance with a provider but also staying mindful of the children's immediate needs. It also means knowing when to give second chances and when to walk away.

So far, the EarlyLearn reform provides very little direction on any of these issues, and network organizations set their own protocol for everything from who does the home visits, to how many cases they carry, to when they should remove EarlyLearn children from a program and call in the Department of Health, which has the authority to revoke a program's license.

As a result, the types and quality of supports that the home programs receive can vary widely from network to network and even staff member to staff member. So does the pay and experience of home visitors.

At one program CNYCA interviewed, home visitors make less than \$24,000 and are required to have no early education experience and only an associate's degree. On the other hand, WHEDco's EarlyLearn home visitors have formidable résumés, both having spent years as early childhood educators and administrators.

But even for them, learning how to work with home providers—some who have been running their own programs for decades—has been a challenging, trial-by-fire learning experience.

On one recent site visit, when Swearing, who ran an early childhood center for over two decades, proposed that a baby be freed from his play yard so he could bang on a tambourine and join in the musical activity designed for older kids, she encountered resistance from both the provider and another visitor from the state food program. Both thought it would be easier if he didn't participate.

Later, when Swearing gently suggested that the children had begun fidgeting during story time because 20 minutes was simply too long for them to sit, the provider continued plowing forward through the Jesus picture book, pausing only to remind the kids to pay attention.

The best form of behavior management is keeping a check on when you're asking too much of children, Swearing later said. "Ten minutes is max for a baby, 15 minutes for a toddler." This is knowledge Swearing herself has had for decades. But how to teach this to a provider who has run her own program for just as long is its own new challenge for Swearing, who has been a home visitor for less than a year.

Addressing safety issues is usually more clear cut, and Swearing and Colon say they have learned to be mindful that no matter how good a program appears, things can change. A provider's priorities can shift; she might have new pressures placed upon her; and you can never know quite what to expect when you knock on a door.

On the day Swearing and Colon visited Acorn Tree, they made a detour for an emergency meeting regarding one of WHEDco's longtime family providers who, when asked for her telephone number, kept strangely saying her name instead, becoming increasingly angry each time the question was repeated. They feared she was mentally "slipping away" and decided to remove the EarlyLearn children from her home and report their concerns to the Department of Health.

Removing EarlyLearn children is something to be avoided unless absolutely necessary, says Diana Perez, WHEDco's family child care program director. It creates momentary chaos for everyone—for the families who must find a new child care arrangement, for the provider who has lost a chunk of her income, and sometimes especially for the children remaining in the program who are not part of EarlyLearn but who may have benefited from EarlyLearn's oversight.

Each EarlyLearn network determines when and how to sever a provider's contract. At WHEDco, if safety is not an issue and a provider is willing to work toward improvement, they will generally err on the side of helping the provider. WHEDco has removed EarlyLearn children from six of the

"If you're just sitting in front of a TV, it doesn't matter how small the child-to-provider ratio is, that's not good."

50 home-based programs they started out with. Most contracts they terminated because the providers were unwilling to do the work needed to improve.

Raya Uddin at Acorn Day Care has always appeared, if anything, eager to please and eager to improve. “She yeses you to death and smiles,” says Swearing.

And yet, rarely does she do what is asked of her. Swearing and Colon find it difficult to gauge how much of this is because Uddin does not understand, due to language barriers, or simply does not want to make the changes they ask of her. So they give her the benefit of the doubt, clinging to any of signs of progress.

A year ago, for instance, when Colon started at WHEDco and first visited the program, she watched with horror as Uddin’s assistant wiped each child’s runny nose with the same tissue. Now the assistant uses individual baby wipes. An improvement, says Colon, and for the most part she’s no longer worried about the children’s health. “But educationally I’m very worried,” she says.

It can be challenging for any provider to engage kids of a wide age range, so Colon and Swearing have learned upon entering a home to quickly gauge whether the needs of not only the oldest but also the youngest child are being met. But here, at Acorn Tree, it’s not clear that anyone’s developmental needs are getting addressed. The children aren’t getting the back and forth with caretakers they need for mastering language, says Colon. They aren’t getting that stimulation crucial to their development.

The EarlyLearn reform was, in theory, designed to help with this. Several months ago, Uddin acquired the Creative Curriculum. (She purchased it for \$100, as WHEDco requires.) But at this site visit, when asked where it is, she smiles and says she can’t remember. Colon suspects it is still pristine in its cellophane wrapper. And though Uddin claims to have especially enjoyed a recent WHEDco training on healthy eating, the lessons taught there seem lost on today’s lunch menu of macaroni and cheese only.

It doesn’t help that Uddin’s motivation for starting up a daycare is uninspired. “I wanted to work but my husband wouldn’t let me work outside the home,” she explains, her husband nodding agreement.

Recently, Colon gave Uddin an ultimatum: WHEDco will not send more children to this home until they see marked improvement.

But the EarlyLearn tools they are using for improvement seem insufficient for addressing the program’s gaping needs. Today, Colon asks Uddin to set up “learning areas” as prescribed by the Creative Curriculum, and to create a dedicated space for a baby to roll around. As they’ve come to expect, Uddin smiles and nods. But Colon and Swearing know this agreement can mean anything.

In the room adjacent to where Colon talks to Uddin and her husband, it is naptime. The children lie on cots, blinking at the ceiling. The assistant sits on the floor beside them. A paper poster with the ABCs on it loosens from a wall and flutters to the floor. In the still quietness, the girl who earlier gagged on lunch begins softly singing. She sings “not to someone or with someone,” Colon will later point out in the car. “She was singing to herself.”

Indeed, it is a lonely sounding song, like she believes no one here can hear her.

Before leaving, Colon asks Uddin if she has any questions. Uddin, who has struggled for words throughout much of this visit, now has a forceful answer. “Yes,” she says. “Will you send me more children?” *✻

Poor children rarely wind up in the family-run programs that would give them the best start in life.

Good Guess

What predicts quality in family child care?

While very little is known about what actually works to improve quality in family child care settings, research has established several factors to be predictors of quality care.

A CAREGIVER'S EDUCATION

Most studies point to a caregiver's education level as well as training and education relevant to child development and early childhood development as the best predictors of quality, with some linking better-educated caregivers to more sensitive caregiving, according to an exhaustive literature review of family child care research published by Mathematica Policy Research, Inc.

AFFILIATION WITH A SUPPORT GROUP SUCH AS A NETWORK

Many studies link a provider's affiliation with support groups as a predictor of higher quality. These studies often define support in different ways. It can mean being part of a professional group such as a network organization, receiving site visits, having access to a toy lending library or having opportunities to network with other providers through a "cohort" or peer support groups. These affiliations may motivate providers to pursue the types of education and training opportunities that are linked to higher care.

A LICENSE

Licensing and regulation have been found to be associated with higher-quality family child care programs.

GROUP SIZE

Complying with regulations around child-adult ratios in a home has been related to more positive caregiving.

INTENTION

Some studies suggest that providers who view themselves as professionals and run home programs because they love children—or for other child-centered reasons, such as a desire to help—may provide higher-quality care.

WHAT HAS NOT BEEN LINKED TO QUALITY

The years of a provider's experience has not been linked to quality, and the amount of money a provider charges in a family child care setting has only modestly been linked to quality.

SOURCES:

Bromer, J., Van Haitma, M., Daley, K., & Modigliani, K. (2009). Staffed support networks and quality in family child care: Findings from the family child care network impact study. *Chicago, IL: Local Initiatives Support Corporation.*

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What Should a Home Visit Look Like?

Emerging research provides clues.

Interviews with EarlyLearn support staff, as well as emerging research, suggest the path to improving quality in family child care may be in “home visits,” or program visits where a professional staff works collaboratively with a provider to improve the program.²⁰

But not all home visits are created equal, says Juliet Bromer, a research scientist at the Erikson Institute’s Herr Research Center for Children and Social Policy in Chicago. Bromer’s research suggests that what home visits look like, who conducts them, and what their goals are may all make the difference between providing meaningful support to home programs or a missed opportunity to foster improvement.²¹

Bromer, who has videotaped and watched hundreds of home visits in family child care programs, has the unusual distinction of having spent close to two decades thinking deeply about family child care “and how it’s not a [child care] center and how things work differently and providers need different types of supports than they do in a center.”

She became interested in family child care in the 1990s when she began working on a project that required her to visit family child care homes in Boston. A former preschool teacher, she knew little about this parallel caretaking world, but quickly became enamored with it. Bromer began photographing the home-based programs she visited, attempting to document the special traits she saw in them. She spent nearly a year visiting one woman’s program in a low-income Boston neighborhood. “There was something very casual about her home, very modest,” she recalls. “There was this love and warmth and nurturing and passion she had for what she was doing.... The older kids would come after school because they knew they could get a sandwich there and not be on the streets...and I continued to hear these stories. These women were doing this work who are unrecognized.... They were taking care of their neighborhoods and no one was talking about it.”

In the 20 years since then, Bromer has earned her doctoral degree with extensive research on family child care and helped to develop the accreditation system for the National Association of Family Child Care. She has also watched family child care evolve. Now, she says, it’s no longer considered enough for the providers to be loving babysitters. There’s an expectation that they should also provide child care that helps kids develop consistent, nurturing relationships with adults and receive meaningful learning opportunities.

SUPPORT MAKES A DIFFERENCE

There’s also now a robust finding in the field that home-based providers who receive supports do, on average, provide higher-quality care.²² This is promising—it suggests that the right supports delivered to family child care programs in the right amount truly can improve the care kids receive.

What has remained more doggedly elusive is what exactly those supports should entail. Most studies linking supports and quality have defined supports differently. Some researchers mean home visits, for instance. Others looked at support groups for providers or at toy lending libraries. Complicating things, many of the studies look at programs offering a spectrum of services, making it difficult to tease out which ones impact quality.

In 2002, Bromer²³ launched a study comparing licensed home providers serving low-income families in Chicago who were affiliated with a network organization with paid staff to licensed providers who

Quality in the homes hinged on the relationship that the network forged with the providers.

had no such affiliations. Bromer found that providers involved in the family child care networks provided, on average, significantly higher-quality care than the other group.

But she also saw great variation among these networks. “There can be really bad support and ineffective support,” she says, as well as good and effective support.

For instance, home visits varied greatly from network to network and staff member to staff member. “In some home visits you see the staff go in and all they do is paperwork. They sit in front of a computer and do observations. Another one is making lunch. Another one is watching the provider. It’s all over the place,” says Bromer.

The problem wasn’t that they didn’t know how to do the work; it was that there was no set of standards for home visits in family child care. “Everyone is just trying to figure it out. No one really knows,” says Bromer.

So working with data from her network study, she and her team set out to identify the particular services and characteristics of staff networks and home visits associated with higher-quality programs. They carefully selected a sample of 80 providers from 26 networks. To measure quality, they used the Arnett Caregiver Interaction Scale (Arnett CIS), which measures provider sensitivity to children in care, and the Family Day Care Rating Scale to assess provider-child interactions, the environment and learning activities.

Though modest in scale, this study would mark one of the first attempts to look closely at what types of network supports are and aren’t effective in improving family child care.

WHAT HELPS, WHAT HURTS

Some of its findings were surprising. (See “Effectiveness of Network Characteristics and Services for Family Child Care Quality,” p. 44.) Many practices commonly employed to boost quality were not associated with higher-quality programs. For instance, business services—recruitment and enrollment of families, payment of fees, administration of subsidies and help with taxes and licensing—appeared to provide stability for home-based programs and, by association, for the families enrolled in them. But they were not linked to program quality.

Monitoring visits to the homes to check for licensing violations or to discuss health and safety information were also not associated with higher-quality programs.

Oddly, providers in networks that offered opportunities for peer mentoring had, on average, significantly lower quality scores than providers in networks that did not offer such opportunities.

Instead, Bromer’s research suggested that quality in the homes hinged on the relationship that the network staff forged with the providers. Home visits that focused on the children and provider—and that gave the provider a chance to provide feedback and voice concerns—were associated with higher quality. “Materials by themselves can’t improve quality,” says Bromer. “It’s the help and the coaching and mentoring around how to use those materials.”

This study found that the coaching relationship needed to happen during home visits that occurred more than once a month. The more other opportunities for communication between the network support staff and providers—by phone or at trainings at the network, for instance—the better for quality improvement.

Homes with the highest quality also received services from a network staff who had participated in a certificate program in infant studies.

“Materials by themselves can’t improve quality. It’s the help and the coaching and mentoring around how to use those materials.”

EFFECTIVENESS OF NETWORK CHARACTERISTICS AND SERVICES FOR FAMILY CHILD CARE QUALITY

HIGHLY EFFECTIVE	<ul style="list-style-type: none"> • Specially-trained coordinator AND direct services to providers (on-site training; visits to Family Child Care (FCC) homes; low coordinator to provider ratios; and/or supportive staff- provider relationships) • Opportunities for supportive relationships between network staff and providers (regular meetings, telephone help, and feedback opportunities)
MODERATELY EFFECTIVE	<ul style="list-style-type: none"> • Coordinator's prior experience with children • Coordinator has specialized training • Use of formal quality assessment tool • High-frequency visits (10 times in six months) to FCC homes focused on working with children • On-site training at the network for providers
INEFFECTIVE	<ul style="list-style-type: none"> • Monthly visits to FCC homes focused on health/safety compliance • Referrals to external training • Peer mentoring • Material resources (e.g. lending libraries, free equipment) • Business services (e.g. tax preparation, enrollment of children, administration of subsidies)

This table is reprinted with permission from the Herr Research Center for Children and Social Policy at Erikson Institute's Policy Brief 2009 No. 1, "The Family Child Care Network Impact Study: Promising Strategies for Improving Family Child Care Quality."

The Erikson Institute is using these preliminary findings to develop training modules for family child care support staff as well as "a set of assessments and measures that agencies can use to look at the quality of support they offer family child care settings," says Juliet Bromer, who authored the policy brief.

Erikson Institute is also developing trainings for family child care support staff as well as a set of videos that show a range of quality home-based programs, "because whoever is doing these visits needs to...see different models of what [quality care in a home] can look like and see and understand that it can happen in many different ways."

Bromer stresses that these findings should be viewed as preliminary, and that more research is needed to understand how networks improve quality care. "I've been arguing in Illinois for years that you have to have some standards for supports, [such as] this is how many home visits [a program should receive] and this is what happens on home visits," she says. "The field isn't there yet. The work we're doing here is trying to articulate the best practices."

THE IDEAL HOME VISITOR

Bromer describes the ideal home visitor as someone with strong social work skills, who has worked with children and is "good at building this kind of trusting, open relationship with the provider." Ideally, she also has training specifically in family child care and has "spent a lot of time thinking about how to work in these settings," says Bromer. She adds, "If they are walking in the home with one picture of quality that looks like a center-based model, that's where we get resistance and lack of respect and trust."

Child care mental health consultants—who have master's degrees and work with early educators around behavior and other issues that arise in their work with children—have this unique

combination of social work skills and early education know-how, and make for some of the most effective home visitors, says Bromer.

LESSONS FOR NEW YORK CITY

These preliminary findings have led Bromer and her team to begin creating training supports that focus not on the providers—as is the case with many efforts to improve family child care—but on the staff who work with them. This could have big implications for EarlyLearn. It suggests that instead of layering more and more expectations directly on its tens of hundreds of individual family child care providers, New York City might get more mileage out of its networks by improving recruitment and training of the professionals charged with supporting these providers. Bromer’s research also suggests that such training and recruitment might be more effective if it borrowed less from the early education field’s knowledge of what works in center-based care, and more from the home-visiting field, which includes well-researched programs like Nurse Family Partnership that work with parents and their children together. In the home visiting field, the crux of the work is building trusting, supportive relationships with a child’s caregiver.

The national Parent Child Home Program, a 50-year old research-based home visiting program that promotes literacy among young children, has already adapted its model for family child care settings. (See “Culturally Attuned, Relationship-Based Support,” p. 36.)

Patrice Cuddy who oversees a family child care Parent Child Home Program at Westchester Jewish Community services says she has seen how this relationship-based approach can motivate providers to improve their practice. The key ingredient for change to happen, says Cuddy, is trust.

“They learn to trust in a relationship-based setting. You can move mountains if you get that settled,” she says, adding, “The absence of that is moving a boulder up a mountain.” *



Lucia Coste’s Bronx family day care receives visits from the Parent Child Home Program. PCHP staff encourage providers to read to children in whatever language they feel most comfortable in—for Coste, that’s both Spanish and English.

“If they are walking in the home with one picture of quality that looks like a center-based model, that’s where we get resistance and lack of respect and trust.”

From the Field: Innovative Trainings

In March, when family child care providers gathered in Hamilton-Madison House's Chinatown office for a professional development day, instead of one training there were three. English-speaking providers went to one room where they learned about the importance of play for young kids. On a different floor, trainer Rosa Vásquez fielded questions in Spanish from providers looking for tips on managing the behavior of young kids. Down the hall, a dozen Chinese-speaking providers chatted enthusiastically with trainer I-Ling Tsai in Mandarin. Tsai, who hails from Taiwan, has been a long-time trainer with New York City's tight-knit Chinese family child care community and knows Hamilton-Madison's providers well. In her last meeting with this group, she encouraged them to use sand and water play. But at this training, when she asked if any provider has tried it at home yet, the room fell silent. "It's hard to get them to experiment with sensory play, as they are afraid it can get messy," Tsai later said.

Family child care providers often work in isolation from one another. Trainings like these not only have the potential to inform their work, they also provide an important opportunity to socialize with other providers and chat with support staff. Meaningful opportunities for professional growth is one of the key goals of EarlyLearn, which increased the number of professional development days networks must give family child care providers from three to six a year. But what these trainings should look like, how networks customize them to diverse groups of providers, and how they are paid for can vary greatly from network to network.

With some organizations operating at a financial deficit and with staff stretched to cover multiple responsibilities, many EarlyLearn networks resort to what some describe as the "patchwork quilt" method—organizing trainings around whatever resources they can cobble together, including the expertise they happen to have (or not have) in-house. (We heard of one training, for instance, where an insurance salesman described different types of insurance to purchase.)

At many networks, providers must often wait patiently as information is translated from English to Spanish and vice versa.

Many family child care support staff say that a large bulk of professional development days continue to be eaten up trying to teach providers the basics of EarlyLearn requirements, such as how to write lesson plans. This leaves precious little time to give providers the types of information they are most hungry for, such

as how to talk to parents about difficult issues, or activities to do with their children.

Hamilton-Madison's trilingual training is one example of a network that got creative to make trainings work. The cost to provide trainings in all three languages is high, ranging from \$1,000 to \$2,000 a day depending on the group size, says Isabel Quintana-Eddy, family child care program director at Hamilton-Madison House. That's money the network simply does not have. So last year, Quintana partnered with the New York Center for Child Development (NYCCD), which receives funding from the New York State Office of Children and Family Services (OCFS), and can provide no-cost trainings on a variety of early childhood topics.

During their first training at Hamilton-Madison nearly two years ago, NYCDD provided training only in Spanish and English. Quintana had to turn the Chinese speakers away. "It felt awful," she remembers. So Quintana introduced NYCCD to I-Ling Tsai, whom NYCDD brought on board to provide the Chinese training at no cost to Hamilton-Madison.

TRAINING PARTNERSHIPS

Partnering with organizations like NYCDD is one way EarlyLearn networks can access on-site, high-quality trainings. (Other organizations that can provide free trainings and supports such as home visits include United Federation of Teachers, as well as the five child care resource and referral organizations identified by state government. These organizations receive public money to help connect families to child care and to provide technical support and assistance to providers.)

Other EarlyLearn family child care support staff have found additional (sometimes low-cost) ways to provide good professional development. Promising strategies include:

ORGANIZING SMALL GROUPS AROUND LANGUAGE AND NEEDS

Family child care support staff at New Life Child Development Center have discovered through their own trial and error a finding that education experts nearly unanimously agree with: Providers learn best in small groups where they can interact with the trainers. New Life now divides trainings into small groups organized around language (English or Spanish) and skill level. Providers who have mastered child observations, for instance, are funneled into a more advanced group where they can focus on, say, infant development.

ENLISTING CENTER-BASED TEACHERS IN TRAININGS

Part of EarlyLearn’s goal was to strengthen connections and collaborations between family child care networks and centers. At Sholom Day Care in Queens, this is happening. Sholom enlists its certified, center-based teachers to help the agency’s family child care providers, sometimes combining trainings for center-based teachers with those for family child care providers. Cheryl Epperson, who oversees family-run child care at Sholom, says that many of her home-based caretakers need training in early education basics, such as developmental milestones of young children, the importance of play and the difference between cooperative and parallel play. These are all concepts that many family providers intuitively understand, says Epperson, but to complete child observations they need to articulate them clearly. Having a certified teacher sit at each table of home-based providers helps the providers get there.

OFFERING PEER SUPPORT GROUPS

As an add-on to the providers’ six mandatory professional development days, the MARC Academy and Family Center network in the Bronx has begun assembling informal peer support groups that meet in the evenings every couple of months. Some are conducted in Spanish, others in English. Though they’re voluntary, almost all of the network’s providers attend, says Anna York, executive director of MARC Academy. “They enjoy it because it’s a very informal setting and it’s not us talking, talking, talking at them ad nauseum. It’s them talking loosely about issues they find come up in their work, issues about behavior management or a parent who doesn’t pick a child up on time. So they develop some strategies among themselves.”

ENCOURAGING CREDENTIAL COURSEWORK

Many family child care networks, including Catholic Charities, have begun encouraging providers to obtain a Child Development Associate (CDA) credential. The social service organization WHEDco has raised private money for providers to participate in a child development associate’s degree program held on-site at the network.

Support staff who work with providers and researchers alike say that providers who participate in these programs find them invaluable and “empowering,” but some warn that this pathway—time-consuming, expensive and at times rigorous—is not right for all providers in a field as diverse as family child care.

Rhonda Carloss-Smith, associate executive director at the Center for Children’s Initiative, one of the city’s child care resource and referral agencies, says that accreditation from the National Association for Family Child Care might be more appropriate for the city’s home-based providers. That’s because it is designed specifically for family child care providers, building on their strengths and addressing their specific challenges, such as working with children of different ages.

“Providers are more likely to learn to change their practice through that one-on-one relationship.”

Researchers point out, however, that no matter how good a training or workshop is, it will be far more effective when coupled with individualized support.

“We know from the literature that people don’t make big changes from going to workshops,” says Juliet Bromer, a research scientist at the Erikson Institute’s Herr Research Center for Children and Social Policy in Chicago. “They make it from coaching and mentoring and technical assistance. Providers are more likely to learn to change their practice through that one-on-one relationship.”

“It’s mentoring that makes the difference in quality,” agrees Jon Pinkos, director of child care division at DayCare Council, another of the city’s resource and referral agencies. “And that’s expensive. We know through all these studies that quality child care costs more money.” ✱

FURTHER READING

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ENDNOTES

1. In this report, the term "home-based child care" and "family child care" are used interchangeably.
2. Calculated from January 2016 enrollment data provided by ACS.
3. Typically the term "licensed" refers to group family child care programs and "registered" to programs with one provider; this report uses the term "licensed" to refer to both.
4. See "Quality in Family Child Care" in references.
5. "Bringing It All Home" forum at the New School. See ACS Deputy Commissioner of Early Care and Education Lurlei Vargas presentation. <https://www.youtube.com/watch?v=LpJ7n77X2Ro>
6. Hurley, K., & Kramer, A. (2014). *Big Dreams for New York City's Youngest Children: The Future of Early Care and Education*, Center for New York City Affairs.
7. See "Benefits of High Quality Child Care" in references.
8. National center for education statistics: Digest of education statistics. http://nces.ed.gov/programs/digest/d10/tables/dt10_055.asp.
9. ACS January 2016 data.
10. This report uses the term "home visits" in family child care to refer to network staff visits to family child care programs. In the broader family child care field these are sometimes referred to as "program visits" or "visits to provider homes."
11. To calculate this number, we counted the number of Chinese surnames in data provided by ACS of EarlyLearn providers in 2012, 2014, and 2016. First we calculated the number of unique providers with Chinese surnames who left EarlyLearn between 2012 and 2014 (30%). Then we calculated the overall drop in providers with Chinese surnames from 2012 and 2016 (40%).
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16. For methodology, see endnote, 11.
17. Hamre, B. K., & Pianta, R. C. (2004). Self-reported depression in nonfamilial caregivers: Prevalence and associations with caregiver behavior in child-care settings. *Early Childhood Research Quarterly*, 19(2), 297-318.
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20. See "Quality Improvement Efforts in Family Child Care" in Further Reading section.
21. Bromer, J., Van Haitsma, M., Daley, K., & Modigliani, K. (2009). Staffed support networks and quality in family child care: The family child care network impact study. Chicago, IL: Local Initiatives Support Corporation.
22. See "Quality Improvement Efforts in Family Child Care" in Further Reading section.
23. Bromer, J., McCabe, L. A., & Porter, T. (2013). Special section on understanding and improving quality in family child care: Introduction and commentary. *Early Childhood Research Quarterly*, 28(4), 875-878.

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**CHILD WELFARE WATCH, VOLUME 24
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ABOUT THIS REPORT

Family child care—or child care in a provider’s own home—is the most common form of care nonparental arrangement for babies and toddlers from low-income families. Yet research has found its quality to be, on average, wanting. In 2012, New York City launched EarlyLearnNYC, a reform of its subsidized child care and early education system that, among other goals, aimed to raise the bar for over 1,700 family child care programs. Three years into the reform, the Center for New York City Affairs assessed what has worked and what has not in improving the city’s family child care. This report explores those findings, highlighting pockets of important work throughout the city, as well challenges of the reform. Drawing from emerging research as well as dozens of interviews with family child care providers, family child care support staff, researchers, advocates and others, this report outlines a set of recommendations for how to improve family child care in a way that recognizes and enhances the strengths—small, warm, nurturing, home environments—unique to this model of care.

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