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A Qualitative Analysis of the Lived Experiences of Childcare Providers Employed at Non-Accredited Childcare Centers Serving Low Income Families

Chantel M. Ellis Brown

Louisiana State University and Agricultural and Mechanical College

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A QUALITATIVE ANALYSIS OF THE LIVED EXPERIENCES OF CHILDCARE
PROVIDERS EMPLOYED AT NON-ACCREDITED CHILDCARE CENTERS SERVING
LOW INCOME FAMILIES

A Dissertation

Submitted to the Graduate Faculty of the
Louisiana State University and
Agricultural and Mechanical College
in partial fulfillment of the
requirements for the degree of
Doctor of Philosophy

in

The School of Human Resource Education
and Workforce Development

By
Chantel M. Ellis Brown
B.S. Southern University, 2009
MPA Louisiana State University, 2011
M.S. Louisiana State University, 2012
December 2016

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Dedicated to my beloved husband and our beautiful son Seth.

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First and foremost, I would like to thank my loving husband and best friend, Sedrick Brown for his unconditional love and support. Thank you my love, for always being there to encourage and inspire me. Thank you for always believing in me. I truly appreciate the time, energy, and investments you have put forth to ensure my success. Thank you for staying up with me during those academic all-nighters, demonstrating to me that I was not alone in this journey. Thank you for all of your contributions. This include the many vacations, movie nights, and celebratory dinners. For its moments like those that kept me grounded, but most importantly sane. Sedrick, my love, you are the reason I was able to diligently thrive through my entire academic career. Thank you for never giving up on me, and for never letting me quit. I love you, respect you, and I thank you.

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ABSTRACT

The purpose of this phenomenological qualitative study was to examine the lived experiences of childcare providers employed at non-accredited childcare centers serving low income families. This study examined childcare providers and the environment in which they worked. The study sought to obtain an in-depth understanding of the day-to-day experiences, behaviors, perspectives, and attitudes of the participants. Participants were selected based on three factors: 1) Participant must be at least 18 years of age. 2) Participants must be employed full-time (at least 40 hours per week) at a non-accredited childcare center serving low income families 3) Participants must have at least one year of experience working as a full-time childcare provider.

Participants' descriptive, written and oral communication were investigated through an analysis following the modified Van Kaam method as presented by Moustakas (1994). Interpretative data analysis revealed that participants feel negatively towards their occupation mostly due to low wages. In addition, participants were often given responsibilities outside of their functions which contributed to occupational burnout, or feeling incredibly overwhelmed. Adding to this matter was the lack of parental support received. During observations, overwhelmed or highly stressed participants were withdrawn, and less attentive to children. Participants who were visibly distressed, had a tendency to ignore children who attempted to interact with them. Participants sometimes responded to children by walking away and leaving the children unsupervised.

Most participants lacked adequate, relevant education and training, and were unprepared to effectively serve in their functions. Participants did not demonstrate organizational skills, classroom management skills, or the ability to develop and successfully execute curriculums or

lesson plans. In addition to this, each participating childcare center were extremely limited on educational tools and resources. As a result, participants were unable to effectively provide children with a quality education and healthy developmental skills.

Participants expressed that their experiences as childcare providers are strenuous to both, their professional, and personal lives. However, participants believe that the services they provide greatly impacts the lives of children and parents. Though participants expressed that their daily functions are challenging participants agreed that interacting with children was the greatest reward of their occupations.

CHAPTER ONE INTRODUCTION

Rationale

Within the year of 2015, approximately 34 million families consisted of children under the age of 18 (Bureau of Labor Statistics, 2016). According to the United States Bureau of Labor Statistics (2016), of these families, both parents worked in over 60 percent of married households. For families of different marital statuses (e.g. single, separated, divorced, married with different households, or widowed), 70.8 percent of mothers were employed, and 82.1 percent of fathers were employed (U.S. Bureau of Labor Statistics, 2016). With an increasing number of working parents, the need for trusted and quality childcare services has become exceedingly critical. According to the United States Census Bureau (2012) 32.7 million children had childcare arrangements while their parents worked or participated in other activities. “Families rely on a patchwork of childcare services to meet their work and family needs” (U.S. Census Bureau, para 1, 2013). Therefore, one could postulate that skilled workers of the childcare industry are highly needed and greatly valued.

While childcare services are necessary for most parents in the United States, parents, regardless of income, strive to place their children in a childcare facility that will ensure safety and quality care. Because children’s outcomes (e.g. safety, and cognitive and social development) are entrusted to their caregivers, it is crucial for childcare providers to be adequately trained and educated in their craft. Education and training received by childcare providers can have significant effects on the quality of interactions and learning experiences provided to children (Burchinal, Cryer, Clifford, & Howes, 2002; Howes, 1997; Howes, et al., 1998; Howes, et al., 1992; Vermani & Ontai 2010). Providing quality care to children requires a pro-active approach which childcare providers must learn, and be able to effectively carry-out on

a daily basis. Generally, workplace methods used to support developmental practices through training programs and new activities constitutes important bases for how learning through work proceeds (Bhatt, 2001).

To address the nationwide needs of quality childcare, regulations have been implemented requiring childcare facilities to be licensed by the state of its operation. Though the licensing procedure monitors and regulates health, safety, and personnel, it does so minimally. Therefore, it must be understood that state licensing processes do not address concerns for children beyond noticeable, potential dangers of centers and their staff. Though state licensing requirements provide some level of quality, accreditation implements, regulates, and monitors a more in-depth level of childcare quality. Accreditation requirements not only address issues of health and safety, they also analyze the environment, quality of personnel (e.g. level education, training, and professional experience), and the care (mental, social, and emotional development) of children. Though accreditation processes are more rigorous than state licensing processes, and can provide parents with assurance of high quality care for their children, accreditation is not mandatory for childcare centers. In addition to not being mandatory, the process of gaining accreditation is very costly. The costs associated with accreditation is the responsibility of the childcare center's stakeholders. Therefore, most childcare facilities are unable to afford the level of quality assurance provided by accreditation. Often times, childcare centers that do participate in the accreditation process require significantly higher child enrollment fees. While these fees are manageable to parents with sufficient income, many parents, such as low income families, are unable to afford the costs. In reality, many low income parents have no choice but to enroll their children in the lowest cost, and nearest childcare center accessible from their home. Seldom, if ever, are these local childcare facilities accredited. Therefore, whether or not children from low

income families receive quality care may be in question. Conversely, childcare centers that provide care to children of higher income families are commonly accredited, and/or closely examined by stakeholders and parents alike. Unfortunately, childcare facilities that mostly service low income families can seldom afford the costs of accreditation. Also, since low income parents have few or no choice regarding which childcare facility in which they enroll their children, studying non-accredited childcare centers that serve low income families is crucial in addressing the nationwide issue of quality care provided to these children in our society.

Though quantitative research may provide a widespread investigation through means of statistical approaches, the purpose in this study is to obtain a more exhaustive and in-depth analysis. Examining the issue through qualitative methodology may answer the what ifs and the whys in relation to the childcare conditions to which this segment of the population is subjected.

With the use of studies and relevant findings, policymakers can influence the outcome of childcare quality (Rigby et al., 2007). Few studies have examined the lived experiences of childcare providers employed at non-accredited childcare centers serving low income families. Because these individuals and the environment in which they work can significantly affect children, it is critical for researchers to systematically inquire about experiences, and any associated detriments at non-accredited childcare centers that serve low income families.

In using qualitative research methods, this study will start with inquiries (Rossman & Rallis, 2012). These questions will be used to attain knowledge in order to improve the “social circumstance” of non-accredited childcare centers, and so “the questions themselves thus establish a moral position” (Rossman & Rallis, 2012, p. 68).

Purpose Statement

The primary purpose of this phenomenological study was to examine the lived experiences of childcare providers of local non-accredited childcare centers that serve low income families in Baton Rouge, Louisiana. A secondary purpose of this study was to explore potential influences of these lived experiences on the need for accreditation systems. This study is of great significance to the population of childcare providers, the children whom they care for, parents who enroll their children in non-accredited childcare centers, stakeholders, and policymakers. This is because, there is very little research available which closely examines the lived experiences of childcare providers employed by non-accredited childcare centers, serving low income families. Also, there are very few research studies derived from direct observations of non-accredited childcare environments.

Research Questions

This study sought to answer the following questions:

1. What are the lived experiences of child care providers employed at non-accredited childcare centers?
2. Do these lived experiences reveal weaknesses in non-accredited childcare environments which demonstrates a need for systems such as accreditation?

Significance of the Study

Susman-Stillman and colleagues (2013) points out findings by Hirsh-Pasek and Burchinal (2006) which explains that there is very little known about the consistency and individual distinctions in caregiving habits of childcare providers. However, it is important to understand

the magnitude of differences in quality of caregiving, as well as the influences (Susman-Stillman et al. 2013). The quality of childcare services is determined by various components, but the most essential element is the quality of childcare providers (Rolfe, 2005).

Childcare providers can have a profound effect on the learning and development of the children they interact with. Training received by childcare providers have serious implications (Choy & Haukka, 2010). Such implications have led to enhanced childcare regulations and accreditation requirements. For example, there is now a higher expectancy for providers to include learning and education into the care provided to children (Elliot, 2004). As a result, qualified workers are needed to meet the requirements for learning and educational services delivered to children (Choy & Haukka, 2010). Educating and training childcare providers not only can promote quality care for children, but can also potentially offer professional growth opportunities to childcare providers. Such training and the quality of care can be regulated by implementing structures such as accreditation systems. Therefore, it is crucial to promote a strong and healthy learning culture within childcare organizations.

Though there are various resources accessible containing information and recommendations, it is difficult to find “reliable, research-based information” regarding childcare; it is more difficult when the information of one “expert” contradicts the findings of another (NICHD, 2006, p. 2). The National Institute of Child Health and Human Development (NICHD (2006) suggests that observations of childcare setting can provide researchers with more exhaustive data on “day-to-day social interactions and activities” (p. 10).

“When put to practical use-to address recurring social issues-information becomes knowledge” (Rossman & Rallis, 2012, p.5). In using qualitative methods, this research study “can build explanations, making complex, ambiguous experiences and beliefs comprehensible

and communicable to others” (Rossman & Rallis, 2012, p. 20). As the primary investigator in this study, a key task is to “explicate the ways people in particular settings come to understand, account for, take action, and otherwise manage their day-to-day situations” (Miles & Huberman, 1994, p. 7).

Acronyms and Definitions

This section consists of the acronyms and definitions and terms that will be used throughout the study. The terms are defined based upon their relevance specifically to this research study.

1. *AFP's*- Accreditation Facilitation Projects
2. *Caregiving Behaviors*- Refers to actions, may they be positive or negative, taken by childcare providers.
3. *Childcare Centers*-Defined by the National Institute of Child Health and Human Development (2006) as facilities where children receive “care from adults at a non-home location, such as a traditional day care center”.
4. *Job Satisfaction*- A satisfying responsive condition that is due to the attainment of one’s occupational objectives (Locke, 1969).
5. *Learning*- Knowledge that occurs constantly, and which should therefore be combined with routine tasks (Watkins and Marsick, 1993).
6. *Motivators*- Defined in this study as determinants that promote participation in learning and development activities.
7. NAEYC- National Association for the Education of Young Children
8. NICHD- National Institute of Child Health and Human Development

9. *Occupational Burn-out*- Is defined by Maslach (2003) as “a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur among individuals who do people-work of some kind” (p. 2).
10. *Outcomes*- Defined in this study as results of workplace and/or personal achievement.
11. *Participants*- In this study refers to individuals who engaged in the research activities.
12. *Providers*- Defined in this study as caregivers to children at childcare centers.
13. *Self-Efficacy*- In this study refers to an individual’s level of confidence in his or her ability to be effective.

CHAPTER TWO REVIEW OF LITERATURE

Brief Overview of the History of Childcare

Through the course of history parents have depended on others to care for their children (Gotts, 1988). Though every country has its own origin of childcare services, childcare centers in the United States developed due to high numbers of women working in factories during the industrialization period beginning in the eighteenth century (Burger, 2012). Many children with working parents were either neglected, or brought into dangerous work environments, resulting in injuries, sickness, and/or death (Burger, 2012; Michel, 2011).

Despite the United States Children's Bureau (CB) being aware of the hazardous conditions children were subjected to, the CB rejected reformers' requests for federal funding of childcare initiatives (Michel, 2011). Instead, the CB focused on issuing tolerable pensions to mothers in need of financial assistance (Michel, 2011). However, African-American women were often denied pensions based on the ideology that they, unlike Caucasian women, were already adapted to working for earnings, and should therefore not be supported to stay home to raise their children (Michel, 2011). Those who did receive pensions (regardless of race) were still unable to sustain, and therefore had no choice but to work while neglecting their children (Michel, 2011).

Because the federal government did very little to support childcare initiatives, and because child endangerment became more prevalent, citizens began to privately form childcare centers. The primary purpose of such institutions was to protect and supervise children who would otherwise face adversities (Burger, 2012). One of the first childcare centers was developed in 1893 by several New York philanthropists, with Josephine Jewell Dodge heading the operation (Michel, 2011). Following this, in 1898, the group founded the National Federation

of Day Nurseries (NFDN), the first national association dedicated to the childcare issues (Michel, 2011). Historically, the establishments that usually provided childcare services were often not open to the general public “including particular communities, neighborhoods, and even families” (Gharabaghi, 2008, p.149). This resulted in childcare providers’ “social, cultural and political” experiences being a reflection on the “subcultures and politics” predominant within their occupational environments (Gharabaghi, 2008, p. 149-150).

As a result of economic crises brought on by the Great Depression, the Works Progress Administration (WPA) developed the Emergency Nursery Schools (ENS) to offer employment to educators in need of work (Michel, 2011). Unlike previous childcare centers that were mostly private, charged rates, and serviced middle-class families, these centers were available to children regardless of class (Michel, 2011). In the 1930’s, the ENS was greatly impacted by high turnover rates of childcare providers who parted due to higher paying jobs; as a result, approximately one thousand schools were closed (Michel, 2011). The decrease in childcare availability became a substantial issue following World War II as millions of mothers sought employment without having suitable childcare options (Michel, 2011).

Due to the scarcity of childcare services, the ENS quickly formed poorly staffed childcare centers (Michel, 2011). The industry of childcare services received backlash due to concerns of high death rates, unsatisfactory settings, and the quality of care provided by untrained workers (Burger, 2012). By the late nineteenth century, American child care practices consisted of both, “formal and informal provisions that were generally associated with the poor, minorities, and immigrants and were stigmatized as charitable and custodial” (Michel, para 5, 2011).

Because of desperation, working mothers often did not have the luxury of examining the qualifications of childcare providers. Therefore, in the past, an agreement to care for a group of

children was the prime condition for an individual to become a childcare provider, whereas today, individuals have development options and resources that were previously not available (Gharabaghi, 2008). Today, the framework of childcare services has developed a more “formalized and bureaucratic” foundation, through reported duties and external audits (Gharabaghi, 2008, p. 153). As a result, the more modernly developed groundwork has affected the context of policies, and standards and guidelines of childcare providers’ daily occupational tasks (Gharabaghi, 2008). With its substantial history and current state of being, the American childcare structure is divided among socioeconomic class, making it hard for parents and stakeholders to come together to advocate for higher quality childcare services and adequate government funding for childcare for all children, regardless of class (Michel, 2011).

According to the National Institute of Child Health and Human Development (NICHD), over the last three decades, growing numbers of families from various socioeconomic statuses in the United States have turned to “non-parental” childcare services for their children (2006, p.2). In addition to providing employment for hundreds of thousands of childcare providers, the childcare industry also allows parents from various occupations to enter and remain in the workforce, thus allowing other industries to meet staffing needs (Rolphe, 2005). According to Payne and colleagues (2011) “without childcare, most parents are unable to work” (p.225). Still, the choice to utilize childcare services is seldom an easy decision to make (NICHD, 2006). Therefore, availability of sufficient childcare services and parents’ approval of childcare centers, affects families and employers (Payne et al. 2011). Even once a childcare center has met parents’ approval, the feelings regarding the service can be a “source of anxiety and strain” for parents (Payne et al., 2011, p. 226).

Functions of Childcare Providers

It has become progressively challenging to reach a communal understanding regarding the roles and responsibilities of childcare providers (Gharabaghi, 2008). The actual role of childcare providers and what others perceive the role to be are often two different things (Gharabaghi, 2008; Weisman, 1999). For example, some perceive childcare providers as babysitters. However, the roles of childcare providers entail much more than simply supervising children. Until recently, little focus was placed on understanding the lived experiences of childcare providers regarding what is believed by others (e.g. parents, policymakers, and/or stakeholders) to take place, compared to what actually occurs (Gharabaghi, 2008).

It can be said that childcare providers “work with children and youth” through “therapeutic play, problem-solving, and behavior modification” (Gharabaghi, 2008, p. 146). Childcare providers “nurture and teach children of all ages in childcare centers...These workers play an important role in a child’s development by caring for the child when parents are at work or away for other reasons... In addition to attending to children’s basic needs, these workers organize activities that stimulate the children’s physical, emotional, intellectual, and social growth. They help children to explore their interests, develop their talents and independence, build self-esteem, and learn how to get along with others” (Bureau of Labor Statistics, 2012, p.1). According to the Bureau of Labor Statistics (2012), childcare providers “must anticipate and prevent problems, deal with disruptive children, provide fair but firm discipline, and be enthusiastic and constantly alert” (p. 4).

Factors Influencing the Experiences and Consequently the Performance of Childcare Providers

Because the roles and responsibilities of childcare providers are multifaceted, there are several contributing factors which influence the experiences of childcare providers. In this study, these factors discussed include: wages, the relationship between job satisfaction and job performance, occupational burn-out, the behaviors of childcare providers, and education and training.

Wages

According to the Bureau of Labor Statistics (2012), in the year 2010, the average childcare provider earned an average of \$19,300 annual pay, and an average hourly wage of \$9.28. With such earnings, (Whitebook, 1999; Gable & Halliburton, 2003), childcare providers are considered to be one of the lowest paid professionals (Whitebook, et al., 1998). The child care industry offers few employment benefits and little opportunities to advance professionally (Gable & Halliburton, 2003; Whitebook, 1999). Due to limited funding and low wages, many childcare providers are hired as contract, and/or “relief-based” workers (Gharabaghi, 2008, p.153). This causes childcare providers to work several part-time, or temporary positions with numerous employers, which in turn causes occupational issues that include little or no regulation, development, or liability (Gharabaghi, 2008). Manlove and Guzella (1997) found that low wages in the childcare industry affect quality mainly by discouraging competent and dedicated workers from choosing to work as childcare providers from the beginning (as cited in Torquati et al., 2007, p. 262).

Several states and programs have implemented quality and developmental systems (e.g., accreditation) which are connected to higher wages for childcare providers (Gable & Hunting,

1999). According to the Bureau of Labor Statistics (2012), compensation depends on childcare providers' level of education and the kind of program in which they are employed. Childcare providers who are better compensated tend to provide a higher quality of care (Barnett, 2002; Phillips, et al., 1991; Whitebook, 2003; Torquati, et al., 2007). Therefore, parents are willing to pay more for childcare services being offered at accredited centers (Xiao, 2010). As a result, some programs would rather hire childcare providers with qualifying credentials that are acknowledged nationwide (Bureau of Labor Statistics, 2012).

Job Satisfaction

Since the childcare industry generally offers low wages, non-monetary factors such as workplace environment and interactions contribute more to job satisfaction than in industries where greater pay and other benefits are provided (Rolfe, 2004). According to Locke (1969), job satisfaction can be described as a satisfying responsive condition that is due to the attainment of one's occupational objectives. Workers who are satisfied in their occupation are often highly motivated to progress (Locke, 1969). According to Goldstein (2001), workers who are highly motivated have a tendency to attain more desired results than workers who have low levels of motivation. For example, motivated childcare providers have a tendency to pursue additional training, and to be more "responsive, and less detached from children" than childcare providers who are not motivated (Susman-Stillman et al. 2013).

In a study conducted by Rolfe (2004) childcare providers listed that the most satisfying aspect of their occupation was the interaction with children, and some of the least satisfying included salary and inflexible hours. Regarding hours, the Bureau of Labor Statistics (2004) reports that childcare centers are typically open all throughout the year, with long working hours

and a shortage of staff. As a result, some childcare providers are often unable to break throughout the work day, or even during holidays (Bureau of Labor Statistics, 2004).

Because job satisfaction is multifaceted, it is essential to understand the occupational decisions and “pathways” of childcare providers in order to attract and retain high quality workers (Torquati et al., 2007, p. 262). Intrinsic rewards are aspects of the occupation and the workplace that “influences satisfaction with work tasks, workload, and the nature of the work” (Torquati et al., 2007, p. 264). Intrinsic incentives for working with children varies among childcare providers (Torquati et al., 2007). The various factors of intrinsic job satisfaction (e.g. recognition, growth, or nature of the work itself) are believed to affect caregiving experiences (Susman-Stillman et al. 2013). According to Torquati and colleagues (2007), “intrinsic work motivation, or the extent to which a professional is motivated to perform well in their job according to specific content, task characteristics, perceived significance of the work, and autonomy, are important....” (p.264). Childcare providers’ attitudes, views, and perceived incentives about their functions can greatly affect the quality of the childcare services provided (Hughes-Belding et al., 2012; Kontos et al., 1995; Morrissey, 2007, as cited in Susman-Stillman et al. 2013, p. 2).

According to the Bureau of Labor Statistics (2004):

Watching children grow, learn, and gain new skills can be very rewarding. While working with children, childcare workers often improve the child’s communication, learning, and other personal skills. The work is sometimes routine; however, new activities and challenges mark each day. Childcare can be physically and emotionally taxing, as workers constantly stand, walk, bend, stoop, and lift to attend to each child’s interests and problems (para 14).

Occupational Burn-out

In addition to low wages and job satisfaction, another component that influences the experiences of childcare providers is occupational burn-out. “Burn-out” is defined by Maslach (2003) as “a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur among individuals who do people-work of some kind” (p. 2). Burnout is a result of the “chronic emotional strain” of interacting expansively with other people (Maslach, 2003, p. 2). In a study conducted by Maslach and Pines (1977), research showed that occupational burn-out in childcare centers were due to several quality issues including: 1) excessive ratio between childcare provider and children caused greater “cognitive, sensory and emotional overload” for the provider 2) long work days interacting with children were affiliated with “more stress and negative attitudes” of childcare providers 3) and childcare centers with “less structured programs” took a larger emotional toll on the childcare providers (Pines & Maslach, 1980, p.6).

In addition, burn-out of childcare providers is partly due to “lack of respect” from administrators (Rolfe, 2005, p.59). One of the many objectives of insightful regulation of childcare settings is to ensure that administrators provide a safe and healthy environment for both, children and childcare providers (Virmani & Ontai, 2010). The effects of occupational burn-out can negatively impact the way childcare providers perform their day-to-day functions (Pines & Maslach, 1980). This in turn, can significantly impact childcare providers’ behaviors, which may subsequently affect the experiences of both, childcare providers and the children they care for.

According to the Mayo Clinic, occupational burnout is “a special type of job stress – a state of physical, emotional or mental exhaustion combined with doubts” pertaining to an

individual's job competency and the value of the job performed (Mayo Clinic, 2015, para 1). The consequences of unaddressed occupational burnout include: extreme stress, exhaustion, inability to sleep, issues in personal life, depression, anxiety, alcohol or drug abuse, heart disease, high cholesterol, diabetes, stroke, obesity, and susceptibility to illnesses (Mayo Clinic, 2015, para 5). To identify occupational burnout, the Mayo Clinic (2015) suggests asking the following questions: 1) has the employee become pessimistic or critical 2) must the employee force them self to work and have difficulty beginning tasks once at work 3) has the employee become short-tempered or impatient towards colleagues or clients 4) does the employee lack the vigor that is required to be steadily productive 5) is the employee dissatisfied with achievements 6) does the employee feel disappointed about the occupation 7) while working, does the employee turn to food, drugs or alcohol for relief, or to not feel present 8) has the employee experienced changes in sleep patterns or appetite 9) does the employee experience headaches, backaches or other physical issues (Mayo Clinic, 2015, para 2). To address occupational burnout, it is suggested that workers do the following: identify and manage the factors that contribute to occupational burnout; explore options (e.g. discuss issues with management, consider job sharing, and/or explore options for educational advancement or professional development); modify attitudes (e.g. workers should find enjoyable aspects of their jobs to improve their perspectives and outlook where possible); seek support from management, colleagues, family, and/or friends to help cope with stress or the feelings of occupational burnout; examine occupational "interests, skills, and passions" to determine if a different occupation is more parallel to personal interests and values; and finally, exercise regularly, and sleep at least seven hours per day to minimize stress and manage health (Mayo Clinic, 2015, para 6).

Behaviors of Childcare Providers

Whether a childcare provider exhibits positive versus negative caregiving behaviors is one of the “strongest and most consistent predictors” of childhood development (NICHD, 2006, p. 10). The NICHD (2006) defines positive caregiving as “a measure of care quality that is based on direct observations of caregiver behavior” (p. 10). As proposed by the NICHD (2006), positive behaviors include: 1) demonstrating a “positive attitude” (p.10): this is determined by whether or not the childcare provider appears to be in a good mood and supportive when dealing with children, and whether or not the provider is helpful and/or smiles when interacting with children 2) Demonstrating positive physical interaction: this is determined by whether or not the providers give hugs to the children, pats them on the back for encouragement, holds the children’s hands, and/or comforts the children when needed 3) “Responding to vocalizations” (NICHD, 2006, p.10): this is determined by whether or not the providers repeat the children’s words, respond to the children’s comments, and/or answer the children’s questions 4) Asking questions: this is determined by whether or not the providers motivate children to communicate by asking them questions that can be simply answered with yes or no responses, or whether or not the provider asks about “a family member or toy” (NICHD, 2006, p.10) 5) Communicating in other ways: this is determined by whether or not the providers praise, and/or encourages the children. This includes responding to children’s positive actions with “You did it!” or “Well done!” (NICHD, 2006, p.10). Another positive way of communicating is through teaching, this is determined by whether or not the provider promotes learning among the children through repeating learning materials, such as repeating the alphabet, counting numbers, and other age appropriate learning measures. An additional method of positive communication is through “telling and singing” (NICHD, 2006, p.10): this is determined by whether or not the providers

share stories, are descriptive in conversation, and/or sings songs. 6) Promoting development: this is determined by whether or not the providers assist the child with standing or walking. For toddlers, does the provider encourage activities that will strengthen “neck and shoulder muscles to get stronger, and encourage crawling?” With older children, does the provider encourage participation in age related learning and development activities? 7) Progressing behavior: this is determined by whether or not the provider inspire the children to “smile, laugh, and play with other children?” (NICHD, 2006, p.10). Does the providers demonstrate examples of positive behavior? 8) Excluding negative interactions: this is determined by whether or not the provider is positive or negative when interacting with the children (NICHD, 2006, p.10).

In a study conducted by the NICHD (2006), researchers concluded that the more positive the caregiving experiences, the greater the quality of care provided to children (p. 11). To determine whether one’s own behaviors are positive or negative, childcare providers should reflect and self-explore. Reflecting on experiences allows childcare providers to realize “children’s emotional experiences, and their own emotional processes” when interacting with children (Virmani & Ontai, 2008, p.18). Providers’ acknowledgement of self has a significant effect on their experiences when working with children (Gharabaghi, 2008).

According to Susman-Stillman and colleagues (2013), “attitudes and beliefs are intimately woven into the nature of caregiving and teaching interactions” (p. 2). For example, “biases, preferences, and unsubstantiated beliefs and values” of providers becomes embedded in their daily functions, and the “professional issues” that occurs from acknowledgement of one’s shortcomings (Gharabaghi, 2008, p. 156). Therefore, it is important that “...early childhood professionals know, what they are able to do, and the dispositions of habits of mind they possess...” (NAEYC, 2003, p.4). Conversely, childcare providers can also recognize their own

“positive and unexpected strengths and resiliencies” which enables them to uphold the principles and guidelines of their day-to-day functions (Gharabaghi, 2008, p.156).

Susman-Stillman and colleagues (2013) explain findings by Hirsh-Pasek and Burchinal (2006) which explicate that there is very little known about the steadiness and individual differences in caregiving behaviors of childcare providers over time. However, it is important to understand the extent of differences in quality of caregiving, as well as the influences (Susman-Stillman et al. 2013). The quality of childcare services is determined by various components, but the most essential element is the quality of childcare providers (Rolfe, 2004). Therefore, it is critical to develop quality childcare providers through education, training, and/or relevant experience (Rolfe, 2004).

Significance of Education and Training

Through education and training, learning how to cognize children’s perspective and interpret children’s actions, can help providers to examine, and/or adjust the way they respond to children (Virmani & Ontai, 2010). With high increases in the numbers of children being placed in childcare centers, one can postulate that recognizing and addressing providers’ education and training needs should be of high importance (e.g., Gable & Hunting, 1999). Currently, there is little information regarding the way to develop childcare providers in a method which guarantees their experiences with the children for whom they care will be of great quality (Virmani & Ontai 2010). However, research indicates that childcare providers with more formal education and relevant training (e.g. child development, child behavior, or classroom management) have a tendency to be more sensitive and demonstrate more positive behaviors when interacting with children than childcare providers with less formal education and relevant training (Burchinal, et al., 2002; Galinsky & Kontos, 1998; Howes, 1997; Howes, et. al., 1992; Virmani & Ontai,

2010). Generally, childcare providers who are more educated, tend to provide higher quality childcare services (Burchinal, et al., 2002; Whitebook, 2003). Therefore, education and training is essential to childcare providers' capacity to provide quality care to children (Burchinal et al., 2002; Gerber, et al., 2007; Howes et al., 1998; Howes, et al., 2003; Virmani & Ontai, 2010). Research steadily labels childcare providers' education and training as "one of the strongest predictors of childcare quality" (Gable & Halliburton, 2003, p. 175).

Creating systems to develop quality experiences between childcare provider and children is crucial (Virmani & Ontai, 2010). Because there are various approaches to preparing providers to care for children, policymakers, and stakeholders should consider implementing particular preparation and regulatory systems that will promote and support "sensitive interactions" among children and providers (Virmani & Ontai, 2010, p.18). Sensitive and attentive childcare providers benefit children's social and emotional development (Virmani & Ontai, 2010; Howes, 1999).

Policies and Regulations

In the year 2011, 32.7 million children were in childcare within the United States (U.S. Census Bureau, 2012). With child enrollment steadily increasing in childcare centers, the significance of the quality of childcare services is emphasized (Payne et. al., 2011). This emphasis has led to an interest in policy to ensure "quality and safety" (Hotz & Xiao, 2011, p. 1776). According to Forrester (2008), public care for children is commonly considered by researchers and policy makers to be "failing" children (p. 206). For example, in conducting a study among four different states, the Cost, Quality, and Child Outcomes Study Team (1995) found that 70 percent of childcare centers provided average childcare services, while one in eight centers were insufficient to such extremes that children's safety and health were compromised (as cited in Rigby, et al., 2007, p. 888).

Because education and training plays a substantial part in predicting the quality of child care services (Howes, et al., 1992), stakeholders and policy makers have made efforts to improve quality by implementing standards and regulations (Hotz & Xiao, 2011), through regulatory systems such as accreditation, which include improving providers' development (Gable & Hunting, 1999). Currently, the federal government allocates approximately five billion dollars annually to states for childcare grant programs, and mandates states to license and standardize the quality of childcare services that are provided through the funding (Rigby, et al., 2007; The National Child Care Information Center, 2006). According to Hotz and Xiao (2011), such standardizations are almost entirely the responsibility of individual states. As a result, many states have tried to improve childcare by applying several quality improvement programs (Setodji, et al., 2013), and by putting minimum requirements in place regarding particular aspects of childcare quality (Rigby, et al., 2007).

States regulate the quality of childcare services by requiring licensing guidelines such as limiting the amount of children per provider, hiring providers who meet specific criteria, and requiring centers and providers to meet specific safety regulations (Hotz & Xiao, 2011). According to the National Association for the Education of Young Children (NAEYC, 2003), federal childcare efforts obligate states to build professional development plans which allow regulations to have a wide-ranging effect. Some states mandate childcare providers to partake in "pre-service training", such as "training workshops" and/or "relevant college coursework" (Gable & Halliburton, 2003, p.176). However, the majority of states do not mandate education for childcare providers (Rigby et al., 2007).

In the year 1991, the National Institute for Early Childhood Professional Development established a goal which stated that all organizations for children will offer "high quality,

developmentally appropriate care and education” (Bredekamp, 1991, p.35, as cited in Gable & Halliburton, 2003, p. 176) by the year of 2001. However, it has been twenty-five years and that goal still has not come to fruition. Though policymakers, stakeholders, and proprietors may have goals of improving quality through accreditation, understanding how to attain that goal within the circumstance of the program’s day-to-day experiences and tasks is another issue (NAEYC, 2010).

In efforts to aid childcare organizations which seek to gain accreditation, in recent years, the NAEYC has developed Accreditation Facilitation Projects (AFPs) in which its workers guide and advise administrators throughout the accreditation process. The NAEYC defines Accreditation Facilitation Projects (AFPs) as: “projects that support quality improvement efforts of childcare centers, preschools, and other early childhood programs in many local communities and states and, in an effort to raise program quality, provide technical assistance and support to programs working on NAEYC Accreditation” (2010, p. 1).

Because of wide-ranging variations among states, childcare policies and standardization methods for developing quality childcare providers are commonly developed and executed within each state (Gable & Halliburton, 2003). Therefore, the state of Louisiana has been charged with the task of ensuring that childcare professionals are adequately educated and trained to perform effectively in their function. The state does offer degrees and/or certifications through universities, as well as community and technical colleges. However, the state of Louisiana currently does not require any formal training and/or education to serve as a childcare provider. For example, according to the Bureau of Labor Statistics (2012), education and training requirements varies between a high school diploma, and a college degree. Childcare providers can commonly gain employment with a high school diploma, and no experience. In order to

ensure that childcare providers will be of high quality, and therefore provide quality childcare services, stakeholders and policymakers should consider utilizing systems such as accreditation. Through accreditation processes, rules and policies, along with childcare providers' developmental efforts are mandated and regulated.

Policymakers raise the question of whether or not research addresses relevant policy issues and how the findings can assist in determining "policy and program" resolutions (Rossman & Rallis, 2012). Therefore, this study hopes to demonstrate that there is a need for governments, and stakeholders to mandate higher standards, and more strict guidelines and regulations for childcare providers and the centers for which they work, through accreditation. This study was conducted using review of literature, as well as observing, and interviewing childcare providers working at a non-accredited center. The researcher chose to examine the lived experiences of childcare providers employed at non-accredited childcare centers, serving low income families in attempt to examine the relevance accreditation processes could within childcare centers.

Accreditation is a "good indicator" that a childcare center is of high quality (NICHD, 2006, p. 14). The simplest factors to help determine the level of quality at a childcare center are the "regulable standards: adult-to-child ratios, group size, and the child care provider's education and training" (NICHD, 2006, p. 14). The NICHD (2006) suggests that the more guidelines a childcare center follows, the more positive the caregiving; and the more positive the caregiving, the greater the quality of childcare services, thus leading to better outcomes for children (p. 12). For example, adolescents in centers with smaller sets of children cared for by formally trained and more educated providers in a situation with a low adult-to-child ratio, the care provided has a tendency to be "warm, attentive, and intellectually stimulating" (NICHD, 2006, p. 12). If

children receive attentive care, it increases the level of trust and security that is given to childcare providers (Howes & Ritchie, 2002). The experiences between children and their child care providers can affect children's outcomes (Howes et al., 1994). The NICHD found that children who were enrolled in accredited childcare centers were better prepared for school, had better cognitive and language results, and demonstrated less behavioral issues than children who were enrolled in non-accredited childcare centers (NICHD, 2006).

Ultimately, implementing a regulatory system such as accreditation in Louisiana lies on the shoulders of policymakers and stakeholders. Based on the direct impact childcare providers have on our children and on the workforce in general, one can propose that great efforts should be made to develop childcare workers and to monitor and regulate the childcare system. Such efforts are crucial to gradually refining the childcare system on a national level (e.g., Torquati et al., 2007; Blau, 2000; Whitebook, 2003) by demonstrating "an investment in the childcare workforce" that could result in the public becoming more conscious of how providers' education and training effect the quality of childcare services (Gable & Hunting, 1999).

As a fundamental link between quality of service and the outcomes of children, "snapshots" of childcare workers are often used to promote quality childcare services (Gable & Halliburton, 2003, p. 176). Therefore, to exhaustively explore and observe childcare providers' experiences and practices at a non-accredited center, the researcher chose to use qualitative research methods. As a qualitative investigation, the intent of the researcher was not to measure the differences between childcare providers at non-accredited, and accredited childcare centers. Instead, the purpose of the study was to directly observe childcare providers working at non-accredited childcare centers, and to determine if the literature supports the researcher's findings.

Conceptual Framework

Though there are no “formal hypotheses” formed preceding the research study, qualitative investigators do build conceptual frameworks and guiding questions (Rossman & Rallis, 2012, p.9). According to Rossman and Rallis (2012), “qualitative researchers typically begin a study with a well-thought out conceptual framework that focuses and shapes their decisions, but this framework is flexible” p 10. “Good qualitative research is systematic research, at the same time that it is interpretive, holistic, contextual, and messy” (Rossman & Rallis, 2012, p. 10). Qualitative research is systematic because the researcher “follows a deliberate, conscious process of making decisions and explicating those decisions so that others may understand how the study was done, assess its adequacy and trustworthiness, and critique it” (Rossman & Rallis, 2012, p.10).

The conceptual framework developed by the researcher particularly reflects information acquired through review of relevant literature. In addition, the conceptual framework also reflects what the researcher hopes to learn regarding the lived experiences of childcare providers employed at non-accredited centers in Baton Rouge, Louisiana. In building a conceptual framework, the researcher was able to follow a systematic guide which enabled the researcher to determine “which variables are most important, which relationships are likely to be most meaningful, and, as a consequence what information should be collected and analyzed- at least at the outset” (Miles & Huberman, 1994, p.18). Therefore, the conceptual framework used in this study is based upon concepts provided through various literature which suggests that factors including wages, job satisfaction, occupational burn-out, behaviors, and education and training may influence providers’ experiences.

Illustration of Conceptual Framework

Factors Influencing Childcare Providers' Experiences

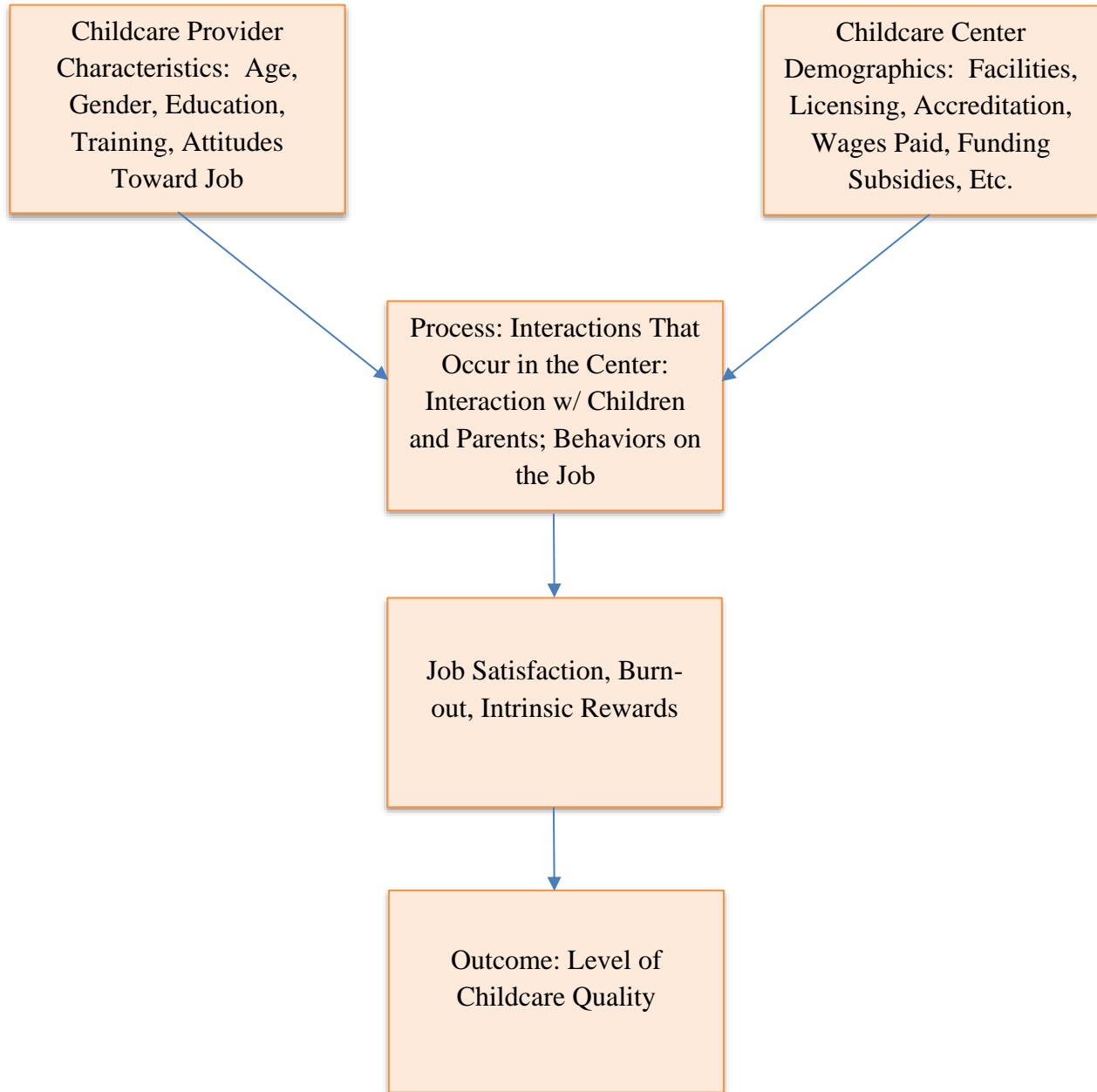


Figure 1. Conceptual Model: Factors Influencing Childcare Providers' Experiences

CHAPTER THREE METHODOLOGY

The purpose of this chapter is to describe the methodology which has been utilized in conducting this research study. This study consisted of qualitative research which used a phenomenological method which is discussed in detail. This chapter also discusses the role of the researcher, sampling strategy, ethical guidelines, informed consent and confidentiality, guiding research questions, and research credibility. This section also discusses the data collection methodology, organization, analysis, and the synthesis of data.

The primary purpose of this phenomenological study was to examine the lived experiences of childcare providers of non-accredited childcare centers, serving low income families in Baton Rouge, Louisiana. A secondary purpose of this study was to explore whether or not these lived experiences revealed weaknesses in non-accredited childcare environments which demonstrates a need for systems such as accreditation. This study is of great significance to the population of childcare providers, the children whom they care for, parents who enroll their children in non-accredited childcare centers, policymakers, and stakeholders. This is because, there is very little research available which closely examines the lived experiences of childcare providers who are employed by non-accredited childcare centers, or that is derived from direct observations of non-accredited childcare environments. The purpose of this qualitative research study was to gain in-depth knowledge of the lived experiences of childcare providers, and to produce new findings that can be utilized in society (Rossman & Rallis, 2012). This study sought to answer the following questions:

1. What are the lived experiences of childcare providers at local non-accredited childcare facilities?

2. Do these lived experiences reveal weaknesses in non-accredited childcare environments which demonstrates a need for systems such as accreditation?

Brief Background on Qualitative Research

Qualitative research was partly developed due to criticism of the unnatural environment of laboratories, seeking methods to scientifically comprehend persons lived experiences (Rossman & Rallis, 2012). Conducting research in the field opposed to artificial environments, or by distributing surveys came to be an a vital, corresponding, and valid method to the field of social science (Rossman & Rallis, 2012). In qualitative research, researchers go into the lives of participants and can form the realities of those lives in a substantial manner (Rossman & Rallis, 2012). Qualitative research is carried-out in true environments, instead of laboratories (Rossman & Rallis, 2012). According to Rossman and Rallis (2012), qualitative research is embedded in pragmatism, which is the philosophical practice that suggests knowledge is gained through physical experiences.

As one of the first qualitative researchers, Aristotle who understood life by hearing and observing, suggested that thoughts are notions formed from experiences with real substances, presences, and situations (Rossman & Rallis, 2012). Historically, qualitative data have always been fundamental in many social science fields (Miles & Huberman, 1994; Rossman & Rallis, 2012). However, within recent years, more researchers from fields such as psychology, educational research, public administration, program evaluation, policy analysis, and organizational studies have turned to a more qualitative approach (Miles & Huberman, 1994).

Qualitative Research Defined

Qualitative research is a wide-ranging methodology of examining social phenomenon (Rossman & Rallis, 2012). Qualitative methods are natural and revelatory, and it utilizes various approaches to investigate (e.g., Flick, 2009; Patton, 2002; and Silverman, 2004; as cited by Rossman & Rallis, 2012, p.6). Qualitative study starts with real life inquiries, and the definitive goal is to gain knowledge (Rossman & Rallis, 2012).

According to Rossman & Rallis (2012), qualitative methods consist of two exclusive components 1) the investigator is the source through which the research is carried out 2) the ultimate goal is to obtain knowledge on social aspects. The researchers enter the worlds of, and interact with actual human beings (Rossman & Rallis, 2012). The researcher gather data which depicts reality (Rossman & Rallis, 2012). The researcher then must convert the data by examining and construing the information (Rossman & Rallis, 2012). Qualitative research holistically signifies people existing in active, multifaceted social situations (Rogers, 2000, p.51; as cited by Rossman & Rallis, 2012, p.6).

Qualitative research is a methodical investigation that is based upon “openness, curiosity, and respect” (Rossman & Rallis, 2012, p. 11). Qualitative research is systematic in 1) acknowledging the significance of qualitative strategies and methods, examining human experiences that are not feasible through quantitative methodologies 2) concentrating on the experience holistically instead of only its pieces 3) looking for knowledge and the reaching the core of lived experiences instead of calculations and elucidations 4) directly attaining participants’ accounts of lived experiences via open discussion and interviewing processes 5) considering the information as necessary in comprehending behavior, and as confirmation for investigations 6) developing inquiries and issues which demonstrates the researcher’s awareness,

participation, and dedication 7) seeing lived experiences and actions as cohesive and holistic (Moustakas,1994).

According to Miles and Huberman (1994), qualitative studies are carried by having “intense and/or prolonged contact with a field or life situation” p. 6. These conditions are usually “banal or normal”, and demonstrates the day-to-day lives of “individuals, groups, societies, and organizations” (Miles & Huberman, 1994, p.6). Qualitative research is “labor-intensive, time-consuming, frustrating, and challenging” (Rossman & Rallis, 2012, p. 11).

Phenomenological Methods

Though there are various qualitative methods to be used, because this study examines participants’ lived experiences, a phenomenological method was most appropriate. Indications of phenomenological examination is formed from participants’ first-hand account of their own lived experience (Moustakas, 1994). Moussakas (1994) provided several ideologies, principles, procedures and approaches to outline the essential aspects of phenomenological research methods. These elements include the following: 1) Phenomenology concentrates on things as they appear and is “a return to things just as they are given, removed from everyday routines and biases...” 2) Phenomenology holistically examines objects from multiple viewpoints until a cohesive revelation on the core of experiences occurs 3) Phenomenology searches for significances from presences, and comes to foundations by means of “intuition and reflection on conscious acts of experience, leading to ideas, concepts, judgments, and understandings” 4) Phenomenology is dedicated to accounts of lived experiences instead of “explanations or analyses” 5) Phenomenology is engrained in questions that provide guidance and give emphasis to significances, and in “themes” that are being investigated, stimulate additional “interest and concern”, and explains the link or association to the experience. The perplexity is based on first-

person account, forming “memory and history” critical factors of “discovery”, in the present-day and leading towards the future 6) “Subject and object are integrated”- what the researcher sees is interconnected to how the researcher sees it, with whom it is seen, and with who the researcher is. What the researcher perceives, and the experience are interrelated to “make the objective subjective and the subjective objective” 7) Throughout all phases of the research, “inter-subjective reality” is involved in the method, but perspective starts with the researcher’s logic of what the meaning is of various problems, entities, or experiences 8) The information collected on experiences, and the researcher’s “thinking, intuiting, reflecting, and judging” are considered to be the principal indications of the study 9) The guiding research questions should be created with thought, all words purposefully selected and arranged in a manner that the key words are instantly seen, gain the researcher’s attention, and provide guidance in using the phenomenological method in observing, thinking back on, and comprehending (Moustakas, 1994, p. 58-59). In phenomenology, a central technique is formed to examine lived experiences, and for stemming information from a “state of pure consciousness” (Moustakas, 1994, p. 101).

According to Moustakas (1994), Epoche, Phenomenological Reduction, Imaginative Variation, and the Synthesis of information, are all significant components of phenomenological methods.

Epoche

Epoche is a Greek word which translates to being removed from, or to not do something (Moustakas, 1994). In utilizing the Epoche method, the researcher is to remove all previous knowledge, predispositions, and/or prejudices, and is to remain unbiased (Moustakas, 1994). During the Epoche process, the investigator must discard all existing information and experiences, as it is invalid to the new findings (Schmitt, 1968; as cited by Moustakas, 1994). As

suggested by Moustakas (1994), Epoche is a phenomenological approach that helps the researcher to process original information by enabling objects, situations, and participants to come into the researcher's mind as completely new data.

In this study, the Epoche method was utilized to enhance the researcher's ability to conduct the investigation with an open, non-judging mindset. As suggested by Moustakas (1994), the researcher removed all preexisting knowledge in order to obtain new information. All participants were viewed by the researcher as people from different walks of life, with personalized accounts of their own lived experiences. The differences between the participants allowed the researcher to examine the participants individually. However, the circumstantial and environmental similarities (each served non-accredited childcare centers, that serviced low income families) also allowed the researcher to examine the individuals as a group. The investigator remained unbiased and open-minded throughout the study. This allowed the researcher to learn as participants provided new insight while exhibiting their own behaviors, living out their own experiences, and describing their own accounts. The researcher removed all preconceived notions and received the new information as it appeared. With this, the researcher was able to discover the essence of the experiences.

Phenomenological Reduction

Phenomenological Reduction is a process that enables researchers to observe and hear with the aware and purposeful intent of allowing themselves to enter the phenomenon, which in itself provides descriptions and significances (Moustakas, 1994). This method consists of providing accounts of what is seen externally and through self-awareness, and explicating the connection amid occurrences and oneself (Moustakas, 1994). Moustakas (1994), explains that self-awareness is critical in Phenomenological Reduction because the researcher starts with their

personal perspicacity of what is being seen, and depicts what is seen in their self-consciousness. However, the investigator should not be deeply immersed in self-awareness to the point that he or she is unable to gain insight of what is truly occurring in the phenomenon (Moustakas, 1994). According to Moustakas (1994) every viewing provides new knowledge that link together, new perceptions that are relevant, and new descriptions that are present in the occurrences. Therefore, we must examine what we see multiple times while focusing on the core of the experience (Moustakas, 1994).

Phenomenological Reduction was used in this study while observing participants in their natural environments. This process was also utilized while conducting interviews, and while examining participants' transcribed interviews and reflective writings. In using the Phenomenological Reduction method as suggested by Moustakas (1994), the researcher utilized self-awareness to understand and describe the phenomenon. By having a practical level of awareness, the researcher was able to realistically see things just as they appeared. This allowed the researcher to interpret descriptions with sensibility and precision. As suggested by Moustakas (1994), while illuminating occurrences, attributes in the study were clearly identified and labeled, all insight was considered equivalent, and nonrecurring components of the occurrences were connected. This resulted in a complete depiction.

In following further instruction by Moustakas (1994), after finding indicators of what was seen by the researcher themselves, the researcher confirmed participants' thoughts, feelings, and understanding. A peer debriefer was also used to assist in the data examination and confirmation process. Moustakas (1994) states that while seeking confirmation, the researcher may learn new information that modifies what was initially thought to be learned. Reflection during the

Phenomenological Reduction process, comes to be more precise by making adjustments that best represents things as they appear (Moustakas, 1994).

Imaginative Variation

The purpose of Imaginative Variation is to gain an understanding by the use of “imagination, varying the frames of reference, employing polarities and reversals, and approaching the phenomenon from divergent perspectives, different positions, roles, or functions” (Moustakas, 1994, p.97). Variation is focused on representations and is contingent upon awareness as a method of assimilating structures into the core experiences (Moustakas, 1994). According to Moustakas (1994), the Imaginative Variation process allows the investigator to develop “structural themes from the textural descriptions” gained by utilizing Phenomenological Reduction (p. 99). Moustakas (1994), states that in the Imaginative Variation process, any and everything becomes possible on the way to obtaining descriptions and reaching the core.

As suggested by Moustakas (1994), the process of Imaginative Variation was utilized in this study as the researcher sought to find and understand meanings, and to reach the essence of the experiences. This process was specifically utilized while interviewing the participants, examining transcriptions, and also while observing participants. Moustakas (1994) also explains that Imaginative Variation consists of a reflection period in which the researcher studies several potential options, and expound through reflection. Therefore, in utilizing this method, the researcher not only examined descriptions as they actually appeared, but also as they were seen through imagination and reflection. This allowed the researcher to visualize and consider possibilities from various viewpoints.

Data Synthesis

Data Synthesis is the last phase of phenomenological methods. Data Synthesis consists of putting together essential descriptions (both textural and structural), into a combined thought elucidating the core of the accounts taking place in the phenomenon, holistically (Moustakas, 1994). The combining of information demonstrates the core of the experiences at a given time and location by the viewpoint of a single investigator after completing a comprehensive examination of the occurrences using imagination and reflection (Moustakas, 1994).

In this study, the process of Data Synthesis was conducted following use of the Epoche, Phenomenological Reduction, and Imaginative Variation approach. As required, in this phenomenological method the researcher synthesized all relevant data in order to obtain a holistic understanding of the experiences, and to reach the core of the phenomenon. This data was put into application in chapter four of this study. According to Moustakas (1994):

Understanding the nature, meanings, and essences of Epoche, Phenomenological Reduction, Imaginative Variation, and Synthesis is necessary in order to conduct phenomenological research. Through phenomenology a significant methodology is developed for investigating human experience and for deriving knowledge from a state of pure consciousness. One learns to see naively and freshly again, to value conscious experience, to respect the evidence of one's senses, and to move toward an intersubjective knowing of things, people, and everyday experiences (p. 101).

Role of the Researcher

Qualitative researchers seek to gain knowledge by asking questions that will give exhaustive information for learning purposes (Rossman & Rallis, 2012). In qualitative research,

investigators speak with participants, observe and listen as people carry-out their daily functions; read relevant data, and observe the physical environment and objects (Rossman & Rallis, 2012). These procedures are considered the key methods used in “interviewing, observing, gathering documents, and examining material culture” (Rossman & Rallis, 2012, p. 8). Qualitative investigators are essential to the research as they must constantly make decisions, assess thoughts, and restructure inquiries (Rossman & Rallis, 2012).

Qualitative researchers must be “pragmatic, flexible, politically aware, and self-reflective” (Rossman & Rallis, 2012, p. 11). According to Rossman and Rallis (2012), the researcher’s duty is to represent participants’ descriptions of lived experiences, entirely and truthfully. In qualitative research, the investigator aims to seize the worldviews of participants within the situation by using an in-depth focus of consideration, and associating presumptions regarding the subjects at hand (Miles & Huberman, 1994). According to Miles and Huberman (1994), the function of the investigator is to obtain a complete understanding of the matter being examined, including the reasoning, organization, and implied, clear and unclear guidelines. The researcher uses fairly few uniformed tools in beginning qualitative research (Miles & Huberman, 1994). This is because the researcher is ultimately the primary “measurement device” in the investigation (Miles & Huberman, 1994. p.7). According to Rossman and Rallis (2012), the investigator’s decisions form, and are formed from the developed, examining questions.

Sampling Strategy

Qualitative research is different than quantitative research which regulates the “messiness” of day-to-day life by using random selection and by adjusting environments (Rossman & Rallis, 2012, p. 9). Qualitative research holistically examines social components as collaborating, multifaceted structures instead of separate factors that may be statistically

calculated and controlled (Rossman & Rallis, 2012). Qualitative research label and construe, and does not “measure and predict” (Rossman & Rallis, 2012, p. 9).

With the purpose of this qualitative research study in mind, the researcher selected the sample (each of the four childcare centers and its employees) using purposeful sampling. Each childcare center was selected based upon poor scores (calculated by various reported incident citations). Initial data pertaining to the childcare centers were provided by the state of Louisiana Department of Children and Family Service’s website. The site provides a list of all licensed childcare centers in the state of Louisiana, as well as specific data on each center. This includes reports and incidents that were filed, as pertaining to each center. The website also provides information on the state’s childcare laws and regulations. The childcare centers selected for this research study were specifically chosen from the website, with the state provided, relevant data in mind. The childcare centers were also chosen based upon location (East Baton Rouge) for the sake of convenience and accessibility; accreditation status (only non-accredited centers were selected) to examine the potential impact accreditation might have on the experiences encountered at currently, non-accredited childcare centers. Lastly, the childcare centers were selected based upon their willingness to participate in the study.

In terms of selecting specific childcare providers, criterion sampling was utilized for the purpose of this research study. It was required that each participant be at least 18 years of age, be employed as a full-time childcare provider, and have at least one year of experience working as a full-time childcare provider. Such criteria were set into place to enhance the likeliness that the lived experiences of the childcare providers would be of relevance as pertaining to the study. With the permission, and full cooperation of the directors of each center, the goal of working with such participants was achieved. The study included four childcare providers and three

administrators (who were all previously childcare providers), totaling seven participants. The childcare centers and the participants were thought by the researcher to be an adequate sample to appropriately assist the researcher in fulfilling the purpose of this qualitative study.

Ethical Guidelines

Qualitative investigators construe experiences and the environments they go into (Rossman & Rallis, 2012). Therefore, these interpretations should be done in manners which are “thoughtful, ethical, and politically astute” (Rossman & Rallis, 2012, p. 9). In this study, the researcher followed ethical guidelines by ensuring that all participants were accurately, and truthfully interpreted and represented. The researcher remained unbiased of the subject matter, and without judgement of all participants throughout the study. This is significant because, researchers must use their own ethics to conduct decision forming processes (Rossman & Rallis, 2012). According to Rossman and Rallis (2012), “attention to methodological matters (sampling, design, methods, for example), ethical issues, and political dynamics” needs to be steadily maintained during the research and must be apparent in the end results (p.60). This defines the reliability of the research study, “its wholeness and coherence” (Rossman & Rallis, 2012, p. 60).

Informed Consent and Confidentiality

Obtaining each participant’s informed consent is critical in performing ethical research (Rossman & Rallis, 2012). The ethical ideologies regarding informed consent include: 1) participants are not mislead, but are instead as knowledgeable as possible about the purpose of the research and probable spectactors 2) participants fully comprehend what their participation will consist of 3) participants must choose to provide informed consent 4) participants are made aware that they can discontinue participation at any given moment without repercussions

(Rossman & Rallis, 2012). According to Rossman and Rallis (2012), the researcher is charged with the responsibility of being fully transparent and truthful while carrying-out the research, and to develop rapport with participants. Informed consent is also used to guard the identification and confidentiality of participants (Rossman & Rallis, 2012). The researcher is responsible for taking all provisions to protect participants (Rossman & Rallis, 2012).

Before conducting the study, the researcher provided the Institutional Review Board (IRB) at Louisiana State University and A&M College with a sample informed consent form (See Appendix B). The university mandates this for all research that is supported and performed under its name (Rossman & Rallis, 2012). On November 4, 2013, the IRB at Louisiana State University and A&M College approved this research study through application number E8542 (see Appendix A). Prior to beginning observations, interviews, and collecting reflective writings from participants, the administrators and participating childcare providers were fully informed by the researcher of the purpose of the study and the procedures it would consist of. Participants were informed of the benefits, risks, and inconveniences of the study. Participants were also made fully aware that participation would be voluntary, and that they could choose to discontinue the study at any moment without penalties. Participants were informed of the role of the researcher, and the steps that would be taken to protect all data including identities.

To protect the confidentiality and identities of participants, the researcher kept all study records securely locked in a file cabinet located at the researcher's home office. Participants' names were not provided at any point during or after the research study. Research records were labeled with a code. The code was derived from a number that reflects how many participants are in the study. The master key that linked names and codes were maintained in a separate and secure location. The master key and audio recordings will be destroyed by the researcher after three years

of following the study. All electronic files containing identifiable information were password protected. The computer hosting this data was also be password protected to prevent access by unauthorized users. Only the researcher had access to the passwords. Data that was shared with the researcher's critical friend were coded as described above to help protect participants' identity. When there is no more data to be collected, the researcher will destroy the master key which links names and codes. In the case that the researcher publishes the study's findings, data will be presented in summary format and participants would not be identified in any publications or presentations.

Once submitting the signed and dated informed consent, participants were given the researcher's cellular phone number and email address, along with the business phone number and email address of the IRB Chair, Dr. Robert C. Matthews. Upon being given this information, participants were encouraged to ask questions and to state any concerns that they might have at any time.

Guiding Research Questions (Instrumentation)

According to Rossman and Rallis (2012) qualitative methodology begins with inquiries and leads to knowledge. The knowledge is developed using guiding research questions that are modeled in the beginning of the study and later altered throughout the events of the study (Rossman & Rallis, 2012). As a result, the inquiries help the researcher to form particular actions to take while performing the study (Rossman & Rallis). Rossman and Rallis (2012) also explained that the study's guiding questions and particular actions taken during investigation are led by the investigator's complete interests and reasoning for performing the research.

The guiding questions in this phenomenological research study were utilized to achieve the purpose of this study: to examine the lived experiences of child care providers of a local non-

accredited childcare facility in Baton Rouge, Louisiana. The guiding questions were developed based on the overall goal of the study, and the conceptual framework designed literature review. A “critical friend” and the “community of practice” was used in this study to provide the researcher with altering design decisions, developing concepts, and in building “an explanation for the phenomenon of interest” (Rossman & Rallis, 2012, p. 65). In turn, questions were modified before conducting interviews. The guiding questions presented to the childcare providers are as follows:

1. Why did you choose to work with children?
2. Can you describe what a typical day is like for you?
3. Describe to me what a good day looks like for you.
4. Describe to me what a bad day looks like for you.
5. Tell me about why you enjoy caring for children.
6. Can you tell me about a time when you felt proud or rewarded for being a childcare provider?
7. Why is caring for children challenging?
8. Can you think about a time when you were really frustrated? Tell me about that.
9. Tell me about a time when you may have felt uncomfortable with performing a task or dealing with a parent.
10. Tell me about the things that motivate you to come back to work every day.
11. Tell me about the things that make you feel appreciated, and/or unappreciated by parents and administrators.
12. What are some of the things you would change about your job? Why would you change these things?

13. What are the most meaningful tasks your job? Tell me about why these tasks are more meaningful than other tasks?
14. What would you consider to be your strengths and weaknesses as a childcare provider?
15. What behaviors do you believe separate you from other childcare providers?
16. What behaviors of your own would you like to build, and/or improve?
17. In many low income families, parents are forced to work multiple jobs; meaning they are not full-time parents. Because of this, the responsibilities of parenting (e.g. potty training, teaching ABC's, counting, and even teaching obedience, and sharing) is often placed on childcare providers. Can you tell me what this means for you?
18. Occupational Burn-out: Tell me about the times when you became exhausted and just felt like giving up, or finding a new line of work?
19. Sometimes what we do for a living can weigh heavily on who we are. Tell me about how working as a childcare provider effects your personal life (e.g. parenting style with your own children).
20. Childcare providers are reported as being one of the lowest paid professionals in the workforce. Can you tell me how this impacts you and your family's livelihood?
21. What are some of the things parents, administrators, and society should know about the role of childcare providers?

The guiding research questions that were given to the administrators included the following:

1. Why did you choose to work with children?
2. Can you describe what a typical day is like for you?
3. Describe to me what a good day looks like for you.

4. Describe to me what a bad day looks like for you.
5. Can you think about a time when you were really frustrated, whether it was with your workers, the parents, the children, or the system? Tell me about that.
6. Tell me about those you had to terminate. What were their behaviors?
7. What was the worst thing your center has been cited for? How did this effect your center?
8. What is the worst thing you have seen or learned of while working in the childcare industry, particularly pertaining to childcare providers?
9. What are some of the things you would change about your center, or the childcare industry as a whole? Why would you change these things?
10. What do you believe are the most meaningful tasks performed by your childcare workers?
11. What would you consider to be your strengths and weaknesses of your center?
12. What do you believe separate your center from others?
13. Occupational Burn-out: Tell me about the times when you became exhausted and just felt like giving up, or finding a new line of work?
14. Childcare providers are reported as being one of the lowest paid professionals in the workforce. What are your thoughts on the low wages provided to childcare providers?
15. I understand that administrators often do not have the financial capability to hire an individual who is highly educated and highly certified. Tell me about your method and logic of hiring childcare providers.
16. Do you believe there is a difference in the quality of work provided by someone who is educated and trained versus someone who is not?

17. Would you be willing to provide financial assistance for the education and training of your childcare workers?
18. Would you be interested in having your organization gain accreditation?
19. What are some of the things parents, stakeholders, researchers, and/or society should know about the childcare industry, and the significance of the role childcare providers play?

In addition to the guiding research questions, participants were also asked to provide answers pertaining to demographics. These questions were used to provide the researcher with relevant background information belonging to each participant in the study. These questions included:

1. What is your race?
2. How old are you?
3. What is your marital status?
4. Do you have any children of your own? If so, how many?
5. Where are you from?
6. What is your highest level of education obtained?
7. Are you here full-time or part-time?
8. How long have you worked as a childcare provider?
9. Have you ever worked as a childcare provider at an accredited childcare center?
10. How long have you worked at this childcare center?
11. How many children do you care for per day?
12. What are the children's range in age?
13. Do you have a current state license, and/or any accreditations or certifications related to childcare services? If so, which do you have?

14. Do you have any formal (school based) early childhood development, or other childcare training?
15. When was the last time you've participated in childcare/child development courses, and/or training programs?
16. Do you believe it was beneficial? Why or why not?
17. Do you plan to obtain formal education, and/or training in childcare? Why or why not?
18. Do you have emergency training such as CPR/first aid?
19. Do you feel adequately prepared to effectively carry-out your job functions? Why or why not?
20. Do you see yourself doing this long-term as a career? Why or why not?

Data Collection

According to Rossman and Rallis (2012), qualitative research depends on various methods to collect data. To develop and modify inquiries, the investigator must gather information (Rossman & Rallis, 2012). Data can be “images, sounds, words, and numbers” (Rossman & Rallis, 2012, p.4). The researcher must begin with questions and end with findings that can be utilized (Rossman & Rallis, 2012). Data is gathered through what the researcher observes, listens to, and interpret from persons, locations and situations (Rossman & Rallis, 2012). Data is collected in participants' actual environment instead of an artificial one, or by surveys (Rossman & Rallis, 2012). This is because the data collection process in qualitative data concentrates on “naturally occurring”, everyday situations which allows the researcher to have a clear understanding of what “real life is like” (Miles & Huberman, 1994, p.10). In this study data was collected by method of triangulation, review of relevant literature, observations, interviews, and participants' reflective writings.

Triangulation

In research, when information is gathered and arranged, it develops evidence (Rossman & Rallis, 2012). According to Rossman and Rallis (2012), triangulation is collecting information from various outlets, various time frames, or using multiple methods. During this study, extensive data was collected not only from childcare providers, but also from the administrators who employed them. Multiple methods (review of literature, observations, interviews, and reflective writings) were utilized in the data collection process of this research. In using triangulation, the researcher also compared analyses with a peer debriefer to strengthen the validity of the research. By using triangulation, the researcher was able to enrich data collection by obtaining various perspectives. This allowed the researcher to gain an in-depth understanding of the multi-faceted issues revolving non-accredited childcare centers, serving low income families. Using triangulation while collecting data also allowed the researcher to remain unbiased during the data collection process. Utilizing the integral, flexible aspect of qualitative research (information can be collected at various times and through several techniques throughout the research), demonstrates that researchers truly comprehend what has taken place (Miles & Huberman, 1994).

In collecting data, the researcher reviewed various forms of literature including: scholarly journals, articles, textbooks, and other professional publications. In addition to reviewing related literatures, the researcher also obtained data through direct observations of participants, conducting interviews with the use of multiple guiding research questions, and by collecting reflective writings from participants.

Review of Relevant Literature

To help frame the empirical research, a review of literature was conducted to enlighten the researcher on preexisting theoretical frameworks. The theoretical literature most relevant for this study is on the effects of the predictors mentioned in chapter two, in relation to minimum regulations and standards in non-accredited child care centers. Through a review of related literature, the researcher obtained data regarding key differences in child care services from the environment considered in this study. As previously stated in chapter two, in conducting a qualitative investigation, the intent of the researcher was not to measure the differences between childcare providers at non-accredited, and accredited childcare centers. Instead, the purpose of the study was to directly observe the experiences of providers working at a non-accredited center, and to determine if the literature supports the researcher's findings.

Observations

Once obtaining consent from the appropriate party, the researcher began observing the childcare center as a whole. The initial observations examined the overall system of the centers rather than look at participants individually. During this process, the researcher encouraged participants to ask questions and/or provide relevant information regarding the system of the center and their own individual functions. In doing this, the researcher allowed the participants to get involved in the study and to feel comfortable with the researcher and the methodology. The researcher conducted each observation for the full day of business operation, totaling nine hours (excluding an hour lunch break). During observations, field notes were taken by the researcher.

Next, in order to observe participants on an individual level, an agreed upon date and time was scheduled with each participant to allow the researcher to observe them carry-out their

day-to-day functions including caring for, and interacting with the children. Participants were asked to select a day in which there were no more than one staff, team, and/or parent/teacher meeting during the day. This condition was specified to maximize the time spent observing the participants. The observations were scheduled consecutively throughout each day of the week, with one observation per day. Each participant was observed for a full work day. During the observations, the researcher acted as an observer only, and did not participate in any activities performed by the participants. The researcher tried her best to minimize any disruption and/or inconvenience that could be linked to her presence. During the observations, the researcher took notes which could later be referenced during data analysis. These notes were labeled with participants' numeric codes, and secured in a locked file cabinet located in the researcher's home office.

Observation was used to access the phenomenon of human interaction between the participants and the children, along with other associated tasks (e.g., duties that do not require interaction with children), and environmental factors (e.g., level of noise, cleanliness, and interactions with coworkers) which may influence lived experiences of the participants. The researcher specifically sought to identify whether participants were using negative and/or positive behaviors as previously discussed in this chapter, and as defined by the National Institute of Child Health and Human Development (2006). As previously discussed, the NICHD (2006) suggests that observations of a childcare setting can provide researchers with more exhaustive data on "day-to-day social interactions and activities" (p. 10).

The significance of observation as a method to collect data is that it allows the researcher to witness first-hand participants' behaviors which occurs at a subconscious level. In addition, observation was used to serve as references for the researcher during interpretation of findings,

and to encourage participants' reflection on experiences. The researcher believed that feedback or instigation on the observed behaviors would help participants to recall the experiences, reflect on their behaviors, and verbalize the rationale behind their behavior. Therefore, the researcher triggered participants' recollection of the behaviors and then inquired about the observed events during the interview process.

Interviews

Before interviewing participants, the researcher should first undergo the Epoche process previously discussed, and put away any previous knowledge, experiences, and preconceptions to prevent them from leading the interview (Moustakas, 1994). According to Rossman and Rallis (2012), qualitative studies consists of developing and supporting relations with human beings. Interviews can be extensive and personal, providing more information than the participants realize they are giving, or that the investigator is seeking to learn (Rossman & Rallis, 2012). Therefore, the researcher may also have to utilize the Epoche method while conducting the interview (Moustakas, 1994).

In this study, the researcher removed all biases about the participants and the environment of the non-accredited childcare center before conducting the interviews. In doing this, the researcher was able to remain focused on the objective, and obtain relevant data that contributed to the purpose of the study. Participants were interviewed on the day following completion of all observations. Interviews were scheduled over the period of a week, based on participants' availability. All interviews were conducted face-to-face. Participants were interviewed individually, and privately in the childcare center's office. During the interviews, the researcher took notes based on observations of physical factors which could later be used to identify reoccurring themes.

All interviews occurred during participants' lunch hour. To accommodate participants for the inconvenience, the researcher provided them with lunch. Each participant was asked to use the restroom, make phone calls, and/or take a cigarette break, prior to the start of the interview. The interviews lasted between thirty minutes to an hour. Combined, the interviews were conducted over the course of three consecutive days. All interviews were recorded with an audio recording tool on the researcher's iPhone, which was password protected. All interviews were later transcribed by the researcher at her home office to maintain participants' privacy. Each transcription was labeled with the participant's numeric code, and stored in a locked file cabinet located in the researcher's home office.

Reflective Writings

As previously explained, in order to realize their own behaviors, childcare providers should reflect and self-explore. Reflecting on past experiences allows childcare providers to better comprehend "children's emotional experiences, and their own emotional processes" when interacting with children (Virmani & Ontai, 2008, p.18). Acknowledgement of self has a significant effect on childcare providers' experiences while working with children (Gharabaghi, 2008).

With this in mind, immediately following each interview, participants were asked to complete an at home assignment. This assignment would consist of participants reflecting on their experiences and career as a childcare provider. Participants were informed that partaking in the assignment was completely optional. Once reflecting, participants would write a brief (one or two pages) summary which would convey any additional information which may not have previously been discussed with the researcher. This included information that participants may not have been completely comfortable discussing at the childcare center.

Once receiving the reflections, the researcher analyzed the data and searched for relevant and reoccurring themes that would provide an in-depth understanding of participants' lived experiences and the non-accredited environment in which they work. Immediately following this process, the researcher labeled each reflective writing with participants' numeric codes, and secured the data in a locked file cabinet located in the researcher's home office.

Conducting Credible Research

Rossman and Rallis (2012) explains that in order for research to be valuable, other researchers must trust in its credibility. Rossman and Rallis (2012) provides several strategies for promoting the credibility of a research study. These methods include: 1) Collect data over time and/or exhaustively 2) Provide participants with the construed information of the developing data 3) Build the research study as involved research from start to finish. This will make sure that the actual findings are interconnected to participants' thoughts 4) Collect information using multiple techniques, examiners, and/or principles to form similar inquiries 5) Use a colleague as a "critical friend" to enhance the credibility of the research findings (p. 62). "These standards for practice and for judging the integrity and value of qualitative studies (truth value, rigor, and usefulness) are important considerations when designing and conducting a study" (Rossman & Rallis, 2012, p. 65). Each of the proposed five strategies were utilized as described to ensure credibility in this research study.

Prior to this study, the researcher had no relationships and/or interactions with any of the participants being examined in this study. However, in order to gain the trust of participants and to ensure credibility, the researcher participated in a lengthy engagement prior to interviewing the participants. This consisted of visiting and observing each participating childcare center during one full business day of operation. Each observation was conducted within one week of

the others. Upon completing the general observations, the researcher then began observing participants individually for one full work day per participant. By visiting the participants in their natural setting, the researcher was able to get a better insight of the lived experiences of the childcare providers in observing them as they perform their functions at work. This in turn assisted the researcher in modifying existing questions and forming new guiding research questions to ask during the interviews.

Throughout conducting the interviews, the data interpretations of the developing findings were shared with participants. This was done by using transcribed interviews as a technique to stimulate additional data, and in developing questions (Rossman & Rallis, 2012). Sharing the information allowed the participants to be abreast on the study throughout the research process. Sharing the interpretations of the developing data also increased subjects' participation in the study. Participants were given the opportunity to ask questions, express comments, and/or concerns of the researcher's data interpretations. This approach helped guarantee that participants were able to instill trust in the researcher's competence, and were able to trust that their responses were being properly represented. According to Rossman and Rallis (2012), reliability in a qualitative study is determined by three factors which includes: 1) was the study carried out based on standards for satisfactory and competent research practice 2) was the research carried out in a manner that respects participants, and was it conducted in an ethical manner 3) was the investigator considerate of the issues pertaining to the subject and the environment.

In order to increase credibility in this study, the researcher utilized various sources, techniques, researchers, and principles to provide enlightenment on the subject matter. Information was drawn from various scholarly articles, journals, and books. By doing this, the

researcher was able to gain more in-depth knowledge on the subject matter, related issues, previous methods, theories and findings of other researchers, how to design the study, what questions to ask, and what findings are germane.

Finally, as suggested by Rossman and Rallis (2012), the researcher used a peer debriefer to strengthen the credibility of the research findings and the report. This consultant assisted the researcher with identifying, describing, and focusing on the key issues and components of conducting the research. The investigator met with the peer debriefer on multiple occasions throughout the study to review, discuss, and analyze the research approach, and the produced data.

Data Analysis

Data analysis in qualitative research is an intricate and stimulating procedure which provides significance to collected data (Rossman & Rallis, 2012). It could be postulated that well collected, relevant and organized data becomes null and void without careful, accurate understanding and representation. Therefore, one could understand the importance of properly analyzing and interpreting data. In a study, the researcher gives significance to parts of data as they “label, code, and categorize; build analytic descriptions; compare and contrast; find patterns; construct themes; and consider alternatives” (Rossman & Rallis, 2012, p.262).

According to Miles and Huberman (1994), the majority of analysis is completed using words. These words are “assembled, subclustered, broken into semiotic segments” Huberman and Miles, 1994. P. 7). Miles and Huberman (1994) explains that words are arranged to allow the investigator to “contrast, compare, analyze, and bestow patterns upon them” (p 7). Miles and Huberman (1994) define analysis as having three coexisting aspects: data reduction, data display, and conclusion drawing/verification.

Data reduction is the method of “selecting, focusing, simplifying, abstracting, and transforming” information that is collected in field notes or transcribed interviews (Miles & Huberman, 1994, p. 10). Data reduction is a type of analysis that “sharpens, sorts, focuses, discards, and organizes data in such a way that final conclusions can be drawn and verified” (Miles & Huberman, 1994, p.11).

According to Miles and Huberman (1994), another significant component of the data analysis process is data display. Miles and Huberman (1994) define data display as “an organized, compressed assembly of information that permits conclusion drawing and action” (p. 11). Viewing the display of data aids the researcher in comprehending what is occurring and to decide if additional analysis is needed, or if additional steps should be taken based on what is understood (Miles & Huberman, 1994).

Miles and Huberman (1994) state that the final component of data analysis is confirming and concluding relevant findings. In the beginning of the data collection process, the researcher starts to determine the meanings of things by “noting regularities, patterns, explanations, possible configurations, causal flows, and propositions” (Miles & Huberman, 1994, p.11). This information is later used in the data analysis process to validate and draw conclusions.

In this study, to execute the three components: data reduction, data display, and conclusion drawing/verification, as discussed by Miles and Huberman (1994), the researcher utilized a modified approach of the Van Kaam method of analysis of phenomenological data offered by Moustakas (1994). As suggested by Moustakas (1994), in utilizing collected data and the full transcripts of participants in the study, the following steps were completed: 1) Initial Categorizing/Horizontalization: all significant phrases, emotions, and feelings were captured and duly noted 2) Reduction/Elimination: examined elements to decide if they were relevant and

critical to comprehending the lived experiences, and if they were capable of being appropriately described. Elements that were not relevant, critical, and/or capable of being appropriately described were removed 3) Clustering and Thematizing the Invariant Constituents: relevant and connecting invariant elements were grouped. This allowed the essence of the lived experiences to be labeled, forming the central themes 4) Final Identification of the Invariant Constituents and Themes by Application: the validity of the invariant elements and their themes were examined while compared to all data on the participant. In doing this, the researcher asked the following questions: A) are they demonstrated clearly in the complete transcribed data? B) if unclear, do they match are they? C) If they were unclear and did not match, they were considered non-pertinent and discarded 5) Constructing Individual Textural Description: in utilizing applicable, valid invariant elements and core themes, an individual textural description was developed for participants. This consisted of participants' precise words and descriptions 6) Constructing Individual Structural Descriptions: individual textural descriptions and imaginative variation were used to develop individual structural descriptions of participants' lived experiences 7) Constructing a Textural-Structural Description: a textural-structural description was developed to fully describe the representations and core elements of participants' experiences. In completing these steps, the researcher was able to adequately analyze, verify, and conclude relevant findings.

CHAPTER FOUR

DATA ORGANIZATION, SYNTHESIS, AND ANALYSIS

Data in this phenomenological study was organized, analyzed, and synthesized using the modified Van Kaam method as presented by Moustakas (1994). Processes discussed here include: Horizontalization, meaning units, themes, Individual Textural-Structural Descriptions, and Composite Thematic Textural-Structural Descriptions. In addition to this, supplementary data was collected from participants via questions asked on a demographics form developed by the researcher. This information was obtained in order to provide background information on each participant. In doing this, the researcher aimed to utilize the data as a means of understanding who the participants are as individuals, and to examine potential factors which could assist in illuminating participants' lived experiences. This data was useful in assisting the researcher during the Imaginative Variation process of analyzing the data. This data is presented in the Individual Textural-Structural Descriptions section of the chapter.

Horizontalization

In this study, the first process undergone in examining data was Horizontalization. Moustakas (1994) explains that the Horizontalization process consists of understanding and illuminating the essence of an experience (Moustakas, 1994). Every aspect of what is perceived brings an understanding of phenomenon horizons (Moustakas, 1994). In conducting the process of Horizontalization, the researcher first examined transcripts for each participant several times. To validate the descriptions, the data were also examined multiple times by a peer debriefer as suggested by Rossman and Rallis (2012). In addition to this, all participants were given the opportunity, and were greatly encouraged to examine their own transcript to provide the researcher with clarity if needed. None of the seven participants provided suggested

modifications. Therefore, the researcher and the peer debriefer considered the original transcripts to be valid. As recommended by Moustakas (1994), the researcher remained unbiased, and all significant phrases, emotions, and feelings were listed, carefully examined, and considered to be of equal value. Next, using phenomenological reduction the researcher examined components to decide if they were relevant and critical to comprehending the lived experiences, and if they were capable of being appropriately described. In completing this process, meaning units were then able to be constructed.

Meaning Units

Moustakas (1994) explains that meaning units are formed based on what we see and how we describe experiences; following what we perceive, we seek confirmation from participants to understand what they “perceive, feel, and think” (Moustakas, 1994, p. 95). In this phenomenological study, meaning units were developed through reflection of observations, examination of participants’ transcriptions and reflective writings. Once developed, the meaning units were then organized and clustered based on the arrangement of the guiding research questions used in the study. The meaning units consists of all seven participants’ actual descriptions. It should be noted that participants only provided responses to the questions they were comfortable answering, and that questions were modified appropriately throughout the study. Also, in responding to some questions, participants sometimes provided answers to other questions. These factors contributed to any variations in the number of participants’ responses listed under each guiding research question.

In using the modified Van Kaam method as presented by Moustakas (1994), elements that were irrelevant, non-critical, and/or incapable of being appropriately described or categorized were removed. Meaning units from each participant are as follows:

1. Why did you choose to work with children?

Participant I: You know, uh, actually I was 17, um, I was working, I started to work with the elderly. And, uh, after that I, uh, my first job was actually at Winbourne Daycare and I love the children, so that's what made me choose to do it because I like working with children.

Participant II: The reason why I chose to work with children is because I love to interact with them and I think that children understand me and I understand them as they develop every day.

Participant III: Well, I chose to, well it chose me. Because, I was at home doing nothing from being sick from when I used to work at a hospital... I used to have migraine headaches... and the daycare had an opening so I took the job... and I've been here ever since.

Participant IV: I chose that because it is what I have always loved since I was a little child myself, but I didn't realize it, but I always wanted to take care of a child and before I started working I did this at home.

2. Can you describe what a typical day is like for you?

Participant I: Uh, well, uh, a typical day is coming in, getting everything prepared for the children to come in, greeting the parents, greeting the children, inquiring about their day before, their afternoons after they've left, getting out of work, preparing to do whatever things we have to do in the classroom at that point, uh, and then a lot of the times it's kind of hectic because some children come in really not feeling it. They don't want to be bothered. They want to be clingy and then you have other children that, you know, need the attention and you have to focus on one child or more, so, you know, sometimes it can get hectic.

Participant II: A typical day is when I come in, we eat breakfast, change diapers after that we do circle time, and then after that I change diapers again, and then it's almost time for lunch, and then

after lunch we, um, we go down for nap, and then after we get up from nap--we take a two hour nap--and then after we get up from nap we change diapers again, and then we play some more, sing songs, and then it's almost time to go. Very busy. It's very busy, sometimes stressful, but try to keep a smile on your face and keep pushing.

Participant III: Okay. The first thing in the morning, upon arrival we're down in the front, what we

call the toy room and my class and all the other classes they come into the toy room from six a.m. until nine a.m. and that is where they all gather until it's time to disperse and go to class. They eat breakfast and they have free play until they all go to their classes and all the employees arrive.

Participant IV: A typical day with this age group because I used to work in like the three and four-year-olds and after school group, but this age group is very busy. It's nonstop. It's like what you are doing for each age group is different. So you have to plan what you are going to do according to how they act.

3. Describe to me what a good day looks like for you.

Participant I: A good day is when everyone comes in on the same page. Everybody is happy.

Everybody is on time and we are doing our; my children make me happy. They're, like I said, "with company, it's like everything is off limits, anything that I've been taught goes out the window, it's free time. So, they figure Mrs. Speaker's talking, it's free time, so.

Participant II: A good day; come in in the morning, um, the kids greet me when I come in, they are

happy, they are smiling, they're listening, um, I mean just a smooth day.

Participant III: A good day is when I went outside and when we get up from nap and have snack they can go outside and run around for 30 minutes to an hour and then we can come back inside

and they feel real good and they don't have to keep asking me "Ms. Speaker can we go outside?"

Participant IV: I say that a good day is when I don't have to sit in the closet. A good day is when we just enjoy ourselves and we're exercising, or when we're dancing or when we're singing, when we're marching and everybody is happy and they're just floating along. There might be one or two that want to do their own thing, but they are not fighting and that, to me that's a good day, when we're not fighting and they come in happy.

4. Describe to me what a bad day looks like for you.

Participant I: When my children come in irritable, or one of my students, the one that just came back, he has had a bad day to where he's been, you know, just, you have to constantly talk to him and calm him down and constantly talk to him and, you know, to the point to where if he hasn't calmed down I would have to send him to Mrs. Speaker for a little bit and then when he comes back to me if I am holding him and hugging him he is fine. So, but, it throws everybody else off, so I try to not let it affect the other children, but when they're so disruptive at that point then it makes everything go south. So, you know, but I can't allow the way it affects me to affect them because I can't show them, like, you heard me say if my voice is getting high that means I'm not happy about the way you are acting because, you know, we want to keep it quiet, keep it simple, keep it at our level, keep it comfortable and I don't believe in being mean or being malicious to my children because that feels like my children, so I don't like that but if they are upset it throws the days off.

Participant II: A bad day is when they are not listening, um, difficult acting, just they're in a bad mood, and you can tell something's going on at home probably.

Participant III: When they fight a lot and if there's something new introduced to the classroom and it's not more than one of that particular item then they fight and I have to remove it from

their reach then that's a bad day.

Participant IV: On a bad day we just, most of the time I try to ignore them and we just go on with our regular plan and then they soon turn in, but a bad day is when they go to crying and they won't stop no matter what I do and to me that's a bad day when I can't reach them and I don't know what happened before they got here to make them feel that way and I can't calm them down, to me, that's a bad day.

5. Tell me about why you enjoy caring for children.

Participant I: I love children. I love children. Um, well, with me having my own children, I think that we play a vital part because the children are with us probably eight hours or more and I think that what we show them even if their outside life is not good, when they come in here, if we show them kindness and love and I think that makes a difference in a child's day because I know it would make a difference in mine if I'm having a bad day; if I come here and I'm with my children, they have me laughing, things they say, things they do, I mean, I love working with, to answer the question, love children, to work with children because I feel like I could play a vital part in their life.

Participant III: Well, no day is the same. I enjoy teaching them.

Participant IV: Because at this young age they should be, their minds and things should know This world is not as awful as it always is. I just feel that they should have fun at this age. They Should have fun and I'm speaking from experience of being a child myself. We just want to feel that you could be a child and that you know you are not degraded and that at this age they have to grow up. See, they're not going to stay babies so they have to grow, so they have learned to love. They have to learn to love; they have to learn to get along because they are our future. These children are our future. That's who is going to be running our country and we have to

mold them. You know they're talking about old-fashioned, but I truly believe the old people knew what they were doing and because now it's, like, whatever goes, goes. We have these children talking about smoking weed. I didn't do that when I was young. We didn't know about weed, even though they had it, so I truly feel that they should be children. That's all I could say, that at this age a child should know how to be a child. They should enjoy being a child, not something that they want to hurry up and get through; they should love being a child like they're supposed to be.

6. Can you tell me about a time when you felt proud or rewarded for being a childcare provider?

Participant I: I feel happy all the time when a parent comes in and asks consistently, "Oh, Mrs. Speaker, my child loves you", that's what they talk about, or they learned this, I know I didn't teach them that at home, and they say, "Well, Ms. Speaker taught me that." That makes me feel proud. That makes me feel like no matter if I thought they weren't getting it, they are really getting it.

Participant II: Yes, when I taught the kids how to say their numbers and they repeated it after me, and I asked them a week ago, and they remembered exactly what I said. That made me very proud to be their teacher.

Participant III: Yes, when a child, when you thought that a child was not listening or did not get something that you were trying to teach them or just thought that they were not listening or they were actually going on and just not, you know, how a child, you know how somebody can just zone out, you think they have zoned out or not paying attention. And you didn't think they were getting help at home or you were just doing all you can here and giving them the help and then all of a sudden one day you sit there and listen to them by themselves and they really are just

putting it out. They're putting out the information that you put into them without you even asking for it.

Participant IV: Yes, when my parents call me or when my parents call me and tell me how well they're children are doing. When, like, when I was working at my son's school, my daughter-in-law called and said some of my old parents called and asked could they get my number because they wanted it, their children kept talking about me and they want to be with me.

7. Why is caring for children challenging?

Participant I: Limited resources. Um, if I ask for certain things, like, you know, as far as supplies or certain things that I need, um, you know, as far as to teach, um, funding, doing fundraisers in order to get our supplies, and you know, limited participation, you know, that hurts our children or you know we are doing work with them and they are not being challenged at home and you know they have me working double to try to really, I'm gonna struggle because I am trying to deter some of the things that, you know, you come in here with and then trying to provide my own, which you know, it's, I feel like I'm the parent all the time. I feel like I'm the parent to every child in here, so, you know, that's a constant struggle, you know, trying to get us on the same page.

Participant II: What makes it challenging is sometimes they're not in a good mood, and sometimes they had a long weekend and they come home, they might not have gotten any sleep, or they didn't eat breakfast, or they're just tired, you know, so sometimes it's just their different demeanors or their minds. Sometimes they're happy, sometimes they're sad, and they just need that love that the teachers give them.

Participant III: That's the challenge and at one time the system, we have so many, we have so

many people trying to govern us and tell us one, one group comes and tell us “hold your left foot up and stretch your right hand out and use your pointer and hold it up...” So you know, and then one group says “teach them,” the other group says “don’t teach them...”

Participant IV: The different environments that they come from. Okay, like we have some children that will fight, all they know is fighting, you know, you can listen to their conversation and tell what goes on and that’s a challenge because you want to tell them that their parents are wrong, but you want to get it into their head that, no, we don’t use curse words, we don’t use drugs, and we talk out our problems, we don’t go to fighting, go to hitting, so, you can tell what is going on from the way they act.

8. Can you think about a time when you were really frustrated?

Participant I: The time I was really frustrated is going back to the rating system because, as I stated, I always make sure, I try to make sure that I learn everything about what they’re looking for, and I was, you know, we talked to the kids, you know, I love all my children, we were interacting and everything and one of those calls were not being affectionate enough and, you know, I was like, well, wow, because I commend my children, I hug them and talk to them and what more do you wish for as far as that. So, a four point turned into a 3.92 and I’m like 8 points, you know, so. That, you know, that frustrates me because I feel like if we do all that we can in here and we weren’t supposed to have a lot of gathering time with the children and, you know, they were supposed to go off to their different sections, which is fine, but a lot of our children want to interact together, so they’re gonna go to certain centers together. Sometimes when the children, um, when parents don’t respect time limits or... You know, if I have a curriculum plan and they are late that makes everyone late and we could stray off from the path of doing what we have to do, so I have to put it off, you know, to accommodate the children that are coming in.

Participant II: When I had a situation with a child who had a lovie and, um, the parent insisted that she have the lovie all day, every day? A lovie is like a teddy bear. They sleep with it, they walk around with it 24 hours; it's like a blanket basically. One day the little girl tripped over the blanket and she got a big knot and she went home and she stayed home for a couple days until it healed. And I told the parent when they got back that I don't think that it's best for her to have the blankie, except at naptime, and they insisted that she has to have it, and I'm telling her she really doesn't ask for it during the day. To make a long story short, the parent wasn't pleased and went to the director and said that I was making an assumption that the daughter didn't need a blanket when I know she needs a blanket, but in the end I just had to give the girl the blanket back. She could have it all day basically. That we don't get paid as much. We do really work long hours, probably sometimes overtime, and the fact that we are the first ones that they see as one, two, three, and actually newborns. I'm sorry six weeks, and nurses and doctors get paid more than us, and we're the ones teaching the nurses and doctors basically.

Participant III: I was frustrated with that, the potty learning issue.

Participant IV: Yes, um, it's when I feel that you have the rules to learn, you go to class you learn the rules, you try to follow the rules, but then they're not being enforced. They don't have the knowledge that they should to say that we had to go to these classes.

9. Tell me about a time when you may have felt uncomfortable with performing a task or dealing with a parent.

Participant I: I would say, "No," because all my parents; I have been here so long that a lot of the parents of children that I taught, so they are bringing their children, and we have that rapport with each other that I can say anything to them and they can say anything to me. They could walk through the door and I can know whether or not they're having a bad day or not, and then if I ask

they will elaborate. So, we have that, you know, we have a good relationship.

Participant II: Basically when, um, like when I know that a child is ready to move up, like potty training is a big deal, and the parents, I guess, don't have time to do that, and if they're not working at home it's hard for me as a teacher to do it here because here they act totally different than when they're at home. So, when I suggested, "Oh, such-in-such is ready to be potty-trained," they're like, "Oh no, they're not ready." It's kind of frustrating because we're trying to make them better and independent. We don't want them to go backwards, and sometimes parents don't agree with that. It's very frustrating.

Participant IV: Not dealing with the parents, um, I couldn't remember even, say, feeling uncomfortable dealing with the children. I usually try to keep a professional relationship with my parents and also make them feel comfortable enough that they could ask me and I could talk to them about something and we could help each other do better by their children, but I, you know, have felt frustrated when a parent doesn't seem interested, like, okay, they're new, if they don't seem interested in the welfare that does make you feel uncomfortable and frustrated.

10. Tell me about the things that motivate you to come back to work every day.

Participant I: The children. Making a difference because all my children came, they were with me. A lot of these parents are not with their children, they can't work with their children, so you give me the chance to work with your children and to help them and, so I feel like, you know, I love my children and I feel like when they grow up and if they come back and they say, "Oh I remember you," and I love that.

Participant II: That's a tough question. What motivates me is my children, to be honest, because when I work here I see that I want my children to have a better education, take them to good schools, put them in good schools, um, go to college, do something for yourself because I will

work here, but I don't want my children to go here.

11. Tell me about the things that make you feel appreciated, and/or unappreciated by parents and administrators.

Participant I: Well, honestly, the children, the kids showing you love, you know, it makes me feel appreciated, but it's not about, certain parents they come in and they've given me things; always showing appreciation, and the only thing that probably would make me feel, well, it doesn't actually make me feel unappreciated, but it's like you work hard and by you being a small center, you are not able to get actually the monetary means for what you really do. So, you know, it's not really feeling unappreciated, but it's just, like you're working and you're working, so sometimes that's kind of challenging, but I feel appreciated by the children and their parents and also the director because, you know, she has been just like a mom to me actually.

Participant II: When my director tells me, "Oh you're doing a great job," gives me a pat on the back, says the parent told me that Ben came home and said, "Oh, today in Mrs. Speaker's class we learned this and that" which makes me feel appreciated and feel happy. Unappreciated, salary and that's basically it.

Participant III: They tell me that they understand what I go through. We use to do hygiene care for their children say something or show that you appreciate what we do for your children because I know you have to know that your child was not clean like this when you brought her here or her hair was not like this when you brought her here.

Participant IV: When they tell me they love me, or they come up to me and they hug me and that's when I feel appreciated. That's how, when I feel appreciated is when the children show it.

12. What are some of the things you would change about your job? Why would you change these things?

Participant I: Uh, really, I, uh, I enjoy my work, but the older you get, you know, it, I guess the older, the more challenging, so I, that is something, I would like to probably do the director thing, I mean, at some point. At some point, but right now I am fine with, you know, my role. And like you mentioned earlier in working towards being a director you could really make a difference, and you could really set the standards for your center, and that's where it starts, you know, it's not going to change overnight, it's one center at a time.

Participant II: The rates. Yes, benefits, insurance, we need insurance, um, and that's basically it.

Participant IV: I would like for every classroom to have a teacher in there that really wanted to teach and just didn't need the money. I mean, that really wanted to treat the children the way they deserved to be treated no matter where they come from, no matter if their parents shop at garage sales, or I want them all, the children that get clothes from the best stores and the children that don't, I want them all to be treated the same and I just wish that every classroom was like this, so when the parent dropped the child off they don't have to worry, is my baby being mistreated? Is my baby happy?

13. What are the most meaningful tasks your job? Tell me about why these tasks are more meaningful than other tasks.

Participant I: Talking to my children. Not just, not, you know, I shouldn't have to be, more than just commands because it becomes mundane and they actually, after a while, it's, like, okay, whatever, so, I guess just talking to them because a lot of my children are like holding a conversation with you. I'm like, wow, because, you know, I have one child tell me, Mrs. Speaker,

I learned about classic. I said, well, what is classic to you, what did you learn that was classic? She said, I said, “What was the meaning, what were you doing?” She said, “Well, I was learning.” I said, “What does classic mean?” She said, “Old.” I said, “Well, what were you, what did you do or what were you talking about with your mom that you came up with classic?” She said, “We were listening to music, and I said okay, and so, I mentioned it to her mom, and she’s like yeah, she’s like, and she said, “I’m tired of doing something, and she’s like, oh, mom, you have so many reservations, and she said I don’t know where she gets that. I said, well, some children just come up with a lot of things, but talking to them is just, you learn a lot about the child, and you learn a lot about whether you can respond or how to respond, too, so.

Participant II: The most important thing I do is that I love them. Some of them don’t get that at home. Teach them, give them wisdom and tell them what’s right and wrong.

Participant III: Teaching them and providing them with structure. Learning and love.

Participant IV: I will say that the most important thing that I do, the only thing that I could say is to make them feel like it is okay to be a child. And that’s what a lot of them don’t think, that it’s okay to be a child, but I want them, more than I want them to know their ABC’s or the shapes, I want them to know it’s okay to be a child and I feel that if I get their trust that the rest of it will just come easy, but you are a child.

14. What would you consider to be your strengths and weaknesses as a childcare provider?

Participant I: I think my strengths, well, to me; my strengths are being willing to learn and being not afraid of being challenged and not afraid of criticism. I always inquire from the parents if there is anything else I can implement. My weaknesses, I think are sometimes, you know, I am so in tune to my children, so maybe sometimes we break our own rules, and I’m like, okay, well, I know

we are not supposed to be doing this and I think they're like, well, you're so easy, but you know we have to remember they are children and I think another point in my weaknesses are my children because I think a lot of the times they could get over on me, so.

Participant II: My strong area is teaching the children. My weak area is dealing with the parents. They're not communicating with me and not understanding where I'm coming from. My weakness is, like, if I'm going through something at home, come to work dealing with it, it's very tough, and like budgeting, like when you get your check every other week. It's like, just frustrating, you can't just entertain the kids because your mind is thinking about, "How am I going to pay this bill, how am I going to pay that bill?"

Participant III: Weakness, I know I give into them.

Participant IV: I feel that my strength is to teach them. I really, really want to improve to be a little stricter with them on tearing up and not listening. I think that is my weakness is letting them, not wanting to make them feel uncomfortable. I am letting them have their way a little bit too much. I feel that, I truly feel that I can do better with managing them

15. What behaviors do you believe separate you from other childcare providers?

Participant I: Yes, with my behavior, a lot of the time I put my emotions to everything, you know, it's like sometimes the only emotion that I try not to come through is anger or I will try to reverse that and say it another way, like, you know, I'm upset, you know, I'm not happy or whatever but never allowing that to interfere with how I react to my children that, you know, being aggressive or anything like that so, I, I don't know. For me it's, I don't know, sometimes it's emotions because sometimes if a parent, even though I love them, sometimes they're just not helping, not being involved in the process of development of the children, not if I say something about homework or, you know, what we are learning, not implementing that at home. It's a lot of

things; improve my mind actually, improve more of my learning experiences, with dealing with the children, with the guidelines that they have out today, just building knowledge for what I'm doing because I have been in it for a long time, but a lot of the times we didn't have to do certain things that we have to do now, so.

Participant II: My behavior, um, I just look at them. I give them that look and they know when I give them that look that means they need to listen to Mrs. Speaker because Mrs. Speaker doesn't play. I talk to them, not yell.

Participant IV: I spend more time with them. I am more patient. I can say I am more patient. Even though I have to take half a Tylenol, but I could go along with the flow of it because, like I say, I've been in it forever without getting paid. So, I have learned that and that is something that I just love and, uh, I say patience, knowing that they are children, that's the only difference, you know, that I could see.

16. What behaviors of your own would you like to build, and/or improve?

Participant I: Oh yeah, well, it's a lot of things. It's a lot of things; improve my mind actually, improve more of my learning experiences, with dealing with the children, with the guidelines that they have out today, just building knowledge for what I'm doing because I have been in it for a long time, but a lot of the times we didn't have to do certain things that we have to do now, so. It is loving the kids, talking to them, showing them that you love them, talking to the parents, you know, showing the parents that you are interested in what's going on with them because whatever goes on with them affects the child anyway. So, I think my first start is always with the parents to get to the child because if the parent is going through issues then more than likely the child is going through those because they are in the home, so this is the outlet.

Participant III: I think sometime I'm a little too firm in, um, when they just don't listen, I get a little too firm when they just don't listen. Maybe time management I guess. With my lesson plans and uh, having their stuff packaged to go home.

17. In many low income families, parents are forced to work multiple jobs; meaning they are not full-time parents. Because of this, the responsibilities of parenting (e.g. potty-training, teaching ABC's, counting, and even teaching obedience, and sharing) is often placed on childcare providers. Can you tell me what this means for you?

Participant I: Throughout the whole conversation that's what I keep saying. You do; you take on that role. You take on that role and that's why I try to have an open relationship with my parents that you could come and talk to me. If it's something that you can't do or if you know of anything that is hindering the child from learning, let me know.

Participant II: Um, it's actually to me, kind of frustrating and a good thing as well because sometimes these kids don't listen to their parents, so as being here in the childcare we have to have structure. So, saying that, um, kids just, kids need structure, and they need guidance, and they need love as well because sometimes, they just need love, and they'll listen.

Participant III: Well see, we try to encourage them to listen and, um, it's hard to get them to listen if they don't have any structure at home.

Participant IV: Well, it takes up a lot of extra time because like I say, it's different children. There are seven children in this room and they all, if you see, if you notice, like, I have to have my eyes on them at all times because they are not acting like they should because we're at nap time because you are in here so that means that it's slow, but I don't mind with the potty-training thing. If you are training them here and it's not being enforced at home and then I could have

them trained and the parents go back and put them in Pampers when they could be in panties or drawers, that's frustrating when the parents say, "Oh, I want to monitor that," or they'll bring three Pampers or three Pull-Ups and want you to do what you're supposed to do, but then when their child uses those three they want that child changed so that means what, you are going to use somebody else's Pampers or Pull-Ups and that's not right. I feel with the alphabet, that's my job, but because I love teaching them, but I like teaching them with pictures that starts with that alphabet to make it easier on them so I don't overload them, but I don't have any deep concern about that. Now the Pamper thing is frustrating because you could train them. They won't use it. They won't be wet all day, but then you won't move on at home. They come in soaking wet, so that is frustrating.

18. Occupational Burn-out: Tell me about the times when you became exhausted and just felt like giving up, or finding a new line of work?

Participant I: Actually I did leave for three years because I was burned out. As I stated to you before, all three of my children came through here and once my daughter went to school, I'm like, okay, let me try something different, but it wasn't per se, burnout with the children, it was for the advancement for me. So, you know, it's a lot of the times you're a teacher, but you are not considered a teacher, so it was actually for advancement or career advancement actually. When my last child came I was like, well, you know, it was time for me to do something different, I actually started in the infant room, so it was from the infants to where I am now and yeah; of course, children do burn you out because that's consistent every day, and mine are older so going home to a teenager and adults that, you know, basically a phone and computer, and talk to you, you know, "Hi mom," and talk about their day and going off, where someone's clinging every day so sometimes it can be stressful or burnout.

Participant II: When I started the last job it was very stressful because I was pregnant at the time, and my job wanted me to do certain things that my body just didn't want to react and like, basically sitting down with the kids, um, lifting them up as well, like, that's what I'm saying, like some of these kids are two and not potty trained. That's a big stress for someone because if the parents are not ready for them to be potty trained, and I'm thinking that they are ready, it's not gonna add up.

Participant III: I haven't had time to burn out.

Participant IV: There have been times when I have felt that way and say, okay, I'm not coming back anymore and then I go home and I think about them. They're flashing through my mind and I said, "You can't give up on them. You can't give up on them, who are going to do it," and so I don't. I get burned out and I go to sleep.

19. Sometimes what we do for a living can weigh heavily on who we are. Tell me about how working as a childcare provider effects your personal life (e.g. parenting style with your own children).

Participant I: Well, it doesn't because the same person I am here is probably the same person I am at home. It's just that I am able to be more candid with my own because they are mine. These are my, my children are the only children to me, you know, those are my babies. It's not different because I go home and I do actually the same thing I do here aside from potty training.

Participant II: Like if your child is sick, like my daughter was in the hospital for two months, um, she's only four months, but she was in the hospital for two months, so being able to, you know, think about things and work is kind of hard, and sometimes you're not able to function while you're at work.

Participant III: Some days I'm here til the last child leaves.

Participant IV: It really, it didn't, because I was doing it already, before I came here. I was volunteering in the class. My son went to Beachwood Elementary so they were always calling me to come and help the teacher in the class. So, really it's no different than what I was already living.

20. Childcare providers are reported as being one of the lowest paid professionals in the workforce. Can you tell me how this impacts you and your family's livelihood?

Participant I: I get quiet talking about that because every, I don't know, and I get emotional about it because I do...

Participant II: Well, it affects it in a big way. I have to apply for WIC; I have to apply for food stamps just to get by. I have to apply for extra government benefits, and sometimes I have to lie, to be honest, just to get by because basically I'm living paycheck to paycheck, you know, just to make ends meet. But in the long run, I mean, I babysit on the weekends, just, you know, just to do what we got to do, but hopefully in the future it will get better.

Participant III: You have to live on what you make. You cannot over spend.

Participant IV: Well, I live alone, other than my granddaughters, but it's hard. It's hard because I was just thinking this morning, I was in the tub, and I was saying, you know, I should have gone on to school and I could be getting paid more money for what I do and, uh, so I feel that education, you know, I feel it's my fault because I should have furthered, I should have gone on, but by me not having to work and I didn't realize that it was doing me more harm than good, that I should have. I budget and I sacrifice

21. What are some of the things parents, administrators, and society should know about the role of childcare providers?

Participant I: Okay, well, first of all, we are more than babysitters. You know a lot of the outside world thinks that's all we do is just sit down and watch a child all day and allow them to watch television or whatever. My role, I don't know about anyone else because I can't speak for anyone else, my role, to me, is I want to, I'm not the parent but I'm put in that parent position, so I feel like if a parent puts me in that position for eight hours of the day, I am not going to allow your child just to sit there and watch television. I want to prosper your mind as well as health or whatever. So, I mean, for me, whatever steps I need to take in order to teach my children, I will do that. Even when they were telling us we shouldn't be teaching, we were still teaching because it's fundamental to our children as they, especially our African-American children as they go off to school, so if we're stunting their progress and we are not teaching them, we are not stimulating their mind as television is.

Participant II: We as teachers, we are their basically their mom, their provider, their caregiver. We teach them, teach them how to groom themselves, teach them how to feed themselves. We basically do everything. We teach them their prayers at lunchtime; teach them their numbers, letters, shapes. We are the first person they see besides their mom when they drop them off. We're their teachers. We're their motivators. We push them to learn and love them, basically. I'm sorry, it's just, that's it. We're their role models, I guess. That's a good term, role models.

Participant III: That we are the first five years of your child's life and we put, we try to input positive things into your child's life and we need you to help us with those things. If we send home work that needs to be reinforced we expect you to help us reinforce that. We cannot teach your child. Don't, well you know, don't expect us to teach your child everything. Like if we

send home alphabets or numbers, we expect you to go over those numbers and alphabets and shapes and colors with your child so that they can begin to remember those things because everything is not gonna be learned at daycare because they are children, they are young children, and they're not gonna keep that on their mind all the time. Please appreciate us. We're trying to do our very best and generally most of us do our best and given the supplies and the opportunities we will do our best. Provide the funding, and uh, stop nitpicking. I know there are some places that are slacking in what they do, but not, not every center.

Participant IV: That it's not a babysitting, we are not babysitting. This is where the children learn. We are not getting the babies and putting them to sleep. We are there to divide them and elude them, uh, really it's a learning experience. You show them different and then they all come together coming from different environments and you teach them how to get along. So, that's very important, um, and, so, I would tell them no, we are not babysitting. We are not babysitting at all. And so, people respect and then we had a lot of parents that didn't respect, I had my parents say you act like your job is so important, well, you bring your child, this job is important. This job is very important. We don't babysit your baby. We're there for your child, to guide your child. You're not there, so we have to be in the place of your child, so, yes, ma'am, my job is real important. I would make sure that each classroom is large enough for the amount of children there, that they have the right equipment to put the toys in where they could be viewed at all times. I would change the pay and, yeah, I feel that even though, you know, we are childcare providers that we should get that pay that comes along with that. If you have done your job by going to classes and you are doing your job in the classroom then you should get paid for it. I would make sure that, well, I would try to make sure that the parents got more involved even if it was for a minute. If they, the involvement between the child and, uh, the parent was better, that

each parent had to come to that room, not someone come and say, hey, that parent is (unclear), make that parent come in and see where that child is all day. Uh, give the teacher at least a minute.

The guiding research questions used to obtain meaning units from interviews with administrators included the following:

1. Why did you choose to work with children?

Participant V: Well, because of my two kids. My little girl was born with a heart murmur. And I used to work at Sear's and when she started to develop a cold and be sick, she wasn't a sickly child, but anytime that she had a bad cold I wanted to be home with my child. Or my mom called me and said this and that, whoever had her, they would have a problem, I expected to leave my job and say I'll be back tomorrow or whatever. Well, being in the workforce out there, you know how it goes. And to me, my children came first and when I was given an ultimatum at Sears, it was either I come to work; it was either my children or my job. So I chose my children. So once I started to stay at home with my kids, I had friends that had kids and they started to leave their kids with me and it just went from word of mouth and that's how I came to open a daycare.

Participant VI: I love kids. That's the bottom line. You have to love kids in order to be in this business. And teaching and watching them learn and grow.

Participant VII: I chose to open a center because honestly I enjoy working with children and youth.

2. Can you describe what a typical day is like for you?

Participant V: Now my typical day is a good day. You know I used to have 120 kids and it was very hectic. I have now 40 on roll. They all don't come every day. I come in in the morning; we

do our devotion around nine. That's when all our staff is here so about, between 9:00 or 9:15 we start our devotion period. At 9:30 they are all ready to go to class. Everybody has eaten breakfast. They're all in class. If I'm needed in one of the classroom areas I will go and see where I am needed at, or I come on and go do my work in my office. I am pretty much in my office doing my paperwork until they actually need me to take a child to the restroom or whatever they need me for.

Participant VI: Morning I open up, I get hugs, I get kisses, I get hellos, goodbyes. I mean sometimes it is smooth sailing and then sometimes it's chaos.

Participant VII: My center opens at 6:30, so at about 5:45-6:00, I have to be the first person there. The next person arrives about 6:15. Um we have to begin making sure that the building is safe for the children and families to come in, um we'll start breakfast, um we have to turn on you know, our, our kid friendly music um so that they feel really excited once they come in, and if they're still sleepy we want something that's gonna energize them and wake them up. And watch television, um until their teacher gets there about 8:00. At 8:00 I start driving our daycare van. We bring children to school in the morning, school aged kids. About 9:00 I come back into the center, and at that time I start working with the infants. Uh, around 11:00 um, and actually I have a portable desk in my classroom. And any files, or anything that I need to work on in the morning before any kids or parent arrive, I get those things and I put them in my portable desk. And I work from the infant room. And um that's usually where I take care of all my administrative tasks. Maybe from about 12:00 to 1:00, I will go into my office sometimes as late as 2:00, and I'll have a teacher to set up and work in my class, and I'll go in and take care of things that I need to take care of inside of the office.

3. Describe to me what a good day looks like for you.

Participant V: I've been downsized for the last two years and since I have downsized my day is pretty much the same pattern, the same routine, every day. We don't have any disruptions until maybe when the kids like, I have two kids that are not in school, but it still runs the same, the norm. If we have, like, these two kids here we let them do, if they have it, homework, they do homework or they do the computer or they play games. It's pretty much, really the kids I have now I don't have the large number I used to have, is I can say, it's a pattern, that I come in every day and I say okay, I know how it's going to go today.

Participant VI: A good day, everything goes right. No complaints, the kids are... A good day when everything mostly runs smoothly, all the teachers report to work on time. You know, the kids are fairly good. You know, everything goes according to plan.

Participant VII: A good day for me is no incidents, no accidents, happy children, staff that arrives on time, in a good mood, ready to work. A very productive day. So if every, everything on my to do list gets done, or just about everything gets done, that's an excellent day for me.

4. Describe to me what a bad day looks like for you.

Participant V: A bad day for me would be if I have one little boy that used to come, but he's in school now, and if he was having a bad morning with his mom, and she normally would tell us, uh, and he comes in, we know we are going to have a rough day. He requires one-on-one so if he's here then my day would be with him until we get him back to his level. Otherwise, he doesn't want to be brought, he doesn't want anyone to tell him anything. Uh, he doesn't want to eat, it's like a battle with him. He's not here now, he's in school, and I don't know, she told me the other day he is doing well. So that particular child, if he's here with me, he would require just me on that particular day. And then what we would try to do, when he was here and he would go through those stages, we would take turns, uh, Mrs. M was here, Mrs. C was here. Between me,

Mrs. M and Mrs. C. The other Mrs. C is my right hand lady, she was always here. She's retired, but she comes as I need her. That's the classroom the newest, Mrs. C is in now. When he's here, those days that he would cut up like that; if I get tired, because sometimes we had to sit in that chair and treat him like a baby. We would sit, color, and talk, and read, and whatever, and if I got tired, then they would come out and say okay bring him to us, we got him now. So we know whenever a child comes in like that we kind of can say we know what kind of day we're going to have. Any other time, it's a good day, even if licensing happens to pop in, or, it's still a normal day.

Participant VI: A bad day is, say we have an accident or a teacher called in sick, then you have to go and try to find a replacement that's certified or got heavy safety, you got their fingerprints. Sometimes you can't get a sub or your sub. So then it's hectic because you've got to have somebody to watch those kids at all times. Then sometimes I have to go in the room to watch them until I get somebody in here. Sometimes they have falls, or they run. Running is their passion. They love you to say, "don't run, don't run." On the playground they might bump their head. I had one, one running on the playground and like he busted his head right here and I had to take him to the hospital. He had to get stitches and that was a bad day.

Participant VII: A bad day for me is when I don't get a chance to complete my tasks. And I mean administrative tasks, cause of course I'm gonna be in the classroom. Um, of course I'm gonna take care of the children and I'm gonna be there to support the staff. Um, but a very good day for me allows me to get my administrative tasks done for the most part within that day without it seeming as if it's overwhelming.

5. Can you think about a time when you were really frustrated, whether it was with your workers, the parents, the children, or the system? Tell me about that.

Participant V: At one point I had several instances whereas I would get real angry with them, with the programs, or with the state coming in or because they would nitpick at particular times. And I had one lady who literally came in here and she wanted to write something. She was determined to write something this particular time. My staff, at that particular time, they were out there and it was quiet like this, it was me and her, and I ended up calling my husband telling him to get here ASAP because it wasn't going to be anything nice, and I called licensing and I told them again I wanted her to listen because I'm like this, if you're going to write me for what you see, if this is official, don't sit here and make up anything. And then, as long as I have been in this business that's the first time I ever had an incident like that and I had to get the, write a letter to licensing and explain the situation.

Participant VI: Sometimes you get frustrated with the workers. They don't do what they supposed to do. They might step out the room and which they know they're not supposed to. When the teachers don't do their job that's one thing. The worst thing is when they start mess. Talk about this teacher, that teacher. Then sometimes the parents say for instance, parents get on my nerves when you don't start training them and got them in underwear. Then they'll come back, if they miss a day or two, they come back in pampers or whatever; then you have to start all over with the whole process again.

Participant VII: You know, right now we're at a really good point so I don't, I don't have a lot of things that tend to frustrate me. I'm gonna speak before the, the staff persons that I have now what was frustrating for me is trying to manage all of their responsibilities. Now that can be continuously frustrating.

6. Tell me about those you had to terminate. What were their behaviors?

Participant V: I've had to let two go. Mandatory meetings, there were complaints and, you know, so and so wouldn't ever attend, why and if it's mandatory, it's mandatory no matter who it is. Sometimes I found that they would get too buddy-buddy with each other and have little stuff going on between each other and basically, those would be the basic main conditions that, out of my third year that I found in order to have a staff where there is less trouble, less mess, and more cooperation together that you don't get too buddy-buddy.

Participant VI: About four for not doing their job. Leaving out of their room. If the kids not being dry or the parents complain like, okay, my child was this or that. Or my child got scratched. They shouldn't get scratched or something, or hit, or bite all day every day or whatever. Then you're not doing your job. You're supposed to; I know accidents are going to happen. But if it's steadily happening, then it's a problem somewhere. So you have to either find a solution the problem, or you're not doing your job.

Participant VII: One time I was out of the center because I had a doctor's appointment and this particular person, she came into the center just to see how we were doing. And usually when she comes in she'll bring something that the teachers can use in their classroom. Well, a staff person, actually a staff person that's not there any longer, when this particular person came into the center she was very rude to her. She wasn't receptive to her. She was making some suggestions in the condition in which she found her in; during nap time wasn't appropriate, wasn't professional and of course this was one of my staff person's that did not have anything higher than a high school diploma.

7. What was the worst thing your center has been cited for? How did this effect your center?

Participant V: Well, one particular time they were all out of their classrooms just talking. Well, I was in here not knowing they were out there and licensing came. Well, that's not supervision, because your classroom is unsupervised where kids are napping, so we got shut down for that once. We were shut down for about a month and a half. That was when they really started to get hard on supervision of children, and they were like, they would tell you once or twice, but next time they catch you, they will write you up and shut you down. A month and a half because what they do is you have to go start all over. New license, get a new license, and you can only keep six kids, I had to come back out just like you starting all over again. So from that point they learned. When I say go to class, their class, or we just started sleeping out here, that way if somebody leaves, my supervision is always there.

Participant VI: Leaving a child unattended. That's really bad in licensing's eyes. Use to be, they write you up, you know, and put it on your record. Now the new law and the new rate just came out, they're going to fine you \$250 and after you get three; then they're going to terminate your license.

Participant VII: We were cited because consistent call outs, which caused me to need to work in the classroom, uh in other teacher's classrooms and not be able to get some of my work done. And when I can't get my administrative tasks done then we suffer on the, on the end of the things that are required by the department of children and family services. Documenting issues and I'm going to tell you something too. There are a lot of people that come into childcare centers and they're not always licensed. I haven't been cited for things that were really bad. Mostly it was uh, something dealing with paperwork. Maybe a parent hadn't signed someone in or out or something like that. a fire drill or something that wasn't done, and I'm not, I don't wanna make light of it in saying that that's not really bad because the repercussions of that could

be horrible if you think about it.

8. What is the worst thing you have seen or learned of while working in the childcare industry, particularly pertaining to childcare providers?

Participant V: A child and a parent letting the child just have their way to the point to where they are calling you, uh, telling you how they aren't, I don't have to. I have seen it too many times; I see it now, so that bothers me. Worst thing I've seen a teacher do...I had really one teacher, we walked past her classroom she wasn't in the classroom, and her kids were just soaking wet, and what had happened was when we located her she said she had gotten an emergency phone call from her daughter and she left my kids in the classroom, instead of saying I need to leave, she just left. That's the worst thing. She got written up and she just said okay, I'm out.

Participant VI: I think it's that child that was left in the van and died. I think that's the worst thing I've seen. I'm going to be honest with you. It's easily done. I used to pick up kids on the bus. You have to be there to check them off and on. Because if you get in a hurry; I had a little boy that used to get off the seat, get under the seat and go to sleep. See and, you know, every morning I'm going to be at the door where's such and such, where's such and such? And good thing I did because he would have been left on that van.

Participant VII: You know, people having problems with staff and stuff like that. Now if I go to a clock hour place, nobody knows I own a center. So I'm there with everybody else who just works at the centers. So then you don't hear about what they do, you hear about what the other teachers may be doing or you hear about the practices of the director and the owners. And, you know, those are things that will make your skin cringe. you're not going to hear too, too many horrible things but just about, you know, the way in which they treat staff members. How some of the owners and directors are never there.

9. What are some of the things you would change about your center, or the childcare industry as a whole? Why would you change these things?

Participant V: I would like to see workshops implemented for parents. Seems like they do PTO, PTA'S at the school, I would just like to see the parents more involved in daycare than they are. I am trying to think what else. Well, you know what, that would be the number one, if you can get the parents to change, and get the parents to have input, I think daycares could run better, regardless of if the funding is there because when you and the parent are working one on one for the better of the child you're going to do whatever it takes. So, to me, if I could change anything, I would change, like you say, parents view on daycares. If I could get their ideas to change about daycare—oh well, it's just someone taking my child until I go to work or go to school and then pick them up and we go home. If I could get them to change their ideas of daycares, I think it would improve a whole lot of daycares.

Participant VI: I think sometimes they're taking a lot of the fun out of it now. They change it, changing it so much. It used to be just so much fun, loving, playing, but they want it a certain way now. Now that is, I think, okay. My point on that is if you tell me to stop teaching, okay, so I don't teach my kids, right? But then when they go to kindergarten you're going to give them a test. So how are they going to pass the test if I never introduce them to the materials and stuff that's on the test? So if I don't teach it to them how are they supposed to pass?

Participant VII: I would say, first and foremost, I think if you want to be a childcare worker that you need to have some type of, I mean, to be a hairstylist and to get a job in a salon you need to have a license, a driver should have a license. So why not have something set that is required to work with children in an early childhood setting? I think this is one of the only professions that you don't have to have experience and education. You know, when I think

about improvements to the center I think because I own the center I'm looking at it holistically. So I don't just want to look at things structural wise. You know, you always want to make improvements to the physical appearance of the center. You want to keep it clean. I would like to build more on our curriculum. I would like for the children who leave our center at age four to go to school. I would like for everyone to know when the center is mentioned that they had a good program over there. That's what I would much rather to be known for. I'm not really interested in being known for having the best or the largest building in town; the most modern building in town. I like technology, even though I'm not the best at it. But I would definitely like to have, because I feel technology is important for children in learning. So I'm looking more at the aspect of the curriculum.

10. What do you believe are the most meaningful tasks performed by your childcare workers?

Participant V: Take time out to really listen to them, watch their interaction with one another. Basically just to love and nurture them, really.

Participant VI: Show them love, care, and affection. Love them because a lot of them don't get it at home.

Participant VII: Caring and loving for those children. I think to care and love for them, like I said, it's the first thing. And some may think I have this out of order but the next thing is, I would say, to make sure that they enjoy learning.

11. What would you consider to be your strengths and weaknesses of your center?

Participant V: The love we have for one another. It has to be the glue that holds us together because if we didn't have that love in here for our job or for each other, we would crumble. It

would crumble. Our education program, uh, I love it. Our love for each other, our passion for each other, uh, just our togetherness, that is our main strength right there. Our strength is how we interact with each other.

Participant VI: Supervision, I think is a strength now. Communication with the parents because we try to involve the parents with our curriculum. We ask them what they want their kids to learn. We try to involve the parents. We try to work together and I think that's a strength because if we do it here and they do it at home then they're going to get it. And some is great you know of course some is not so great. So that's one of the weaknesses and one of the strengths. The ones that do it great, super but the ones that doesn't then it be lacking cause that child go on why as the one that got that pull up, it makes it longer and harder for us actually.

Participant VII: I would say that our weakness has been a lack of consistency in our curriculum because for the most part I have hired individuals without a CDA and I've had to spend a lot of time trying to teach them how to use the curriculum that we have instead of them coming in and having some knowledge of early childhood education and instruction. And so that's the major weakness for me.

12. What do you believe separate your center from others?

Participant V: I don't, I only have one friend that's still in the daycare, and pretty much from what I have seen with their centers, it's pretty much the same with me. Our curriculum and everything is kind of like on the same basis, so, to me from what I have seen, from theirs and mine, the only difference, I would say, would probably just be the staff. I mean, just the staff and the children are different as far as we, because we try to do pretty much the same level. So, my difference with my center is I'm one-on-one with my people.

Participant VI: Maybe the employees because they, like all the parents and can talk to them, you know, they interact with them. So I think maybe I would say employees. I have some good employees now. I think that would set us aside from others.

Participant VII: I actually work in my center and most owners don't. If they work in their center or if they're there they're not visible. I'm visible. I turn the lock in the morning and I turn it in the evening when we close. When we go to the schools in our van, I'm the driver that the teachers see. I think also is that most people don't know that I own the center because I'm always there and I work. I wear the same uniforms that my teachers wear and I interact with the children just as my paid staff persons do. And I think that we are more of a family type environment, an extended family for our parents and our children, as opposed to enrolling them in a center that's so large where even the staff persons feel out of touch with the owner or the administrator. I can tell if something is going on when that teacher walks through the door; because I work with them.

13. Occupational Burn-out: Tell me about the times when you became exhausted and just felt like giving up, or finding a new line of work?

Participant V: Before I downsized I was going to lock it up and sell it. But I had some parents that said Mrs. Speaker, please, please don't, wait until so-and-so is out, wait until so-and-so turns five and he's in school, better yet, I need you. So, I had gotten to that point.

Participant VII: Oh, wow. I'm going to say those are some pretty low moments because I have, I don't know how any other owner and/or administrator has handled in the past, or what their experiences have been, but this center I've actually put everything that I am, everything that I own into it. I, for the most part, have experienced burnout and wanting to; wondering if this is really what I was called to do when I had all the wrong people working in my center. And now I

go back to that a whole lot and I hate to seem as if I'm being harsh or if I'm criticizing them because they didn't have the education that's needed, but if I didn't know it then and I'm sure that I had a feeling about it then. I knew all along that hiring someone with an education was going to be better for the center.

14. Childcare providers are reported as being one of the lowest paid professionals in the workforce. What are your thoughts on the low wages provided to childcare providers?

Participant V: It is low, but until, it, with the program that they have designed for childcare to your parents to go to school and to learn and to help us get better pay, when they came out with the childcare assistance program, childcare assistance paid 100% for low income parents and I guess over the years because of the way that people started to abuse the program, and I understand they can, that it started going down to 80%, 60%, and whatever. When they do that, when we get on those types of programs, then that does help the daycare to offset their finances whereas they can pay a teacher top dollar. Now, to me, if you are making \$10 an hour in a daycare then you're doing well. So for me to deal with what we deal with, I have to agree, it is low. It is very low, and we just have to get better. Because of the overhead, uh, is the reason a lot of us can't see themselves going to 10 dollars or 12 dollars, but...

Participant VI: We need much more to work in a daycare center. I don't know that we're the lowest paid but we do the most work. From being doctor, to a mom, to whatever, whatever they need we're there to do it. So but we do get less pay. So they definitely need. And we have tried to bring it up or whatever so hopefully with this pilot program maybe we can get better pay. And then even we are getting certified and everything but we still get less pay. So that should be addressed.

Participant VII: I think that the wages should increase. But I think wages should increase not just because it's a low paying position. I think that the wages should increase because there should be conditions to that. Meaning, we're not just going to give you nine dollars an hour just because childcare workers need a raise. Childcare workers also need to know that they need to obtain a certain level of education.

15. I understand that administrators often do not have the financial capability to hire an individual who is highly educated and highly certified. Tell me about your method and logic of hiring childcare providers.

Participant V: At first, that is all that we did hire was someone coming straight out of high school but the education dealing with the kids wasn't there, so if we do a lot of training we do a lot of finding yourselves, you find yourself during the classroom instead of them doing it and they're watching you do it. I don't knock it because they do learn from it and when I started out the majority that everybody I had was out of high school, but over the course of the years, even if you hire a person with just a high school diploma that person stayed there. Say, okay, start getting them involved in the online courses, uh, get your book and let them read that book and it will give them information; it tells you exactly what to do with a certain child, what to do in certain areas, you know, to teach them.

Participant VI: Well, at least with the high school you can train them, you know, you can pay what you've got to pay anyway. So you pay and get it and hopefully they stay with you because it's your money that's training them. And nine times out of ten they do. They find something better or somebody offer them more. But you have the option to keep the green stuff because you pay for it.

Participant VII: We were new and finances is the major reason. Wanting to hire the person that

had the degree, get those resumes you look at them and you stare at them for a while and you're praying and you're saying I wish I could. I wonder if she would accept x amount of dollars an hour. And I've been known to even ask. And of course they said no. And then in consulting with my center's attorney and family members, you just, you're going to have to find the money somewhere. And I never hire someone just off of an interview that I do on my own. I tell them, this is going to be a three-part thing. So either the second interview is going to be with another staff person or it's going to be with a parent of a child currently enrolled in my center, or a former parent, depends on the relationship that I have with them.

16. Do you believe there is a difference in the quality of work provided by someone who is educated and trained versus someone who is not?

Participant V: It can be a difference if you allow it to be a difference, but you could also take that person and bring them up to the same level of your other teachers with their experience, with the BA's, you can bring that person to that same level. The difference is it would better that person. Uh, and even if that person is not going to stay with you, at least you helped them to develop a skill.

Participant VI: Yeah than from them not, yeah. So that's why I said, now I have the really good staff because they know what they're supposed to be teaching, they know what, how to teach it and everything whereas back then you didn't know how to administer or how to do it. So now we can help the kids more because now we know how to do, what they learn, and what they can learn and all that. So now we just have to get the parents to join in with us and we can move forward.

Participant VII: Better classroom management, attentiveness. It's the consistency. I'm sure that has a lot to do with their levels of education because usually, um, well, early childhood education

speaks for itself. So they learn a lot about classroom management. They learn a lot about the ways in which children learn; how to interact with children when they're studying that degree.

17. Would you be willing to provide financial assistance for the education and training of your childcare workers?

Participant V: If you want to keep a part of your staff, you will have to. Because if not, it's going to show.

Participant VI: Only education and they training and stuff that the employees get, I mean that my employees get I have to pay for it.

Participant VII: Yes.

18. Would you be interested in having your organization gain accreditation?

Participant V: There's a possibility. It's a possibility.

Participant VI: Yeah.

Participant VII: I would. And since you've been talking about it. I was thinking about my aunt is an administrator at a private school and they have a class, a center inside of their school. And I know that school has an accreditation. And I was just thinking about maybe asking her or the owner of that school who do they use. I'm assuming there's probably some type of administrative cost or something like that. I think that's an excellent thing.

19. What are some of the things parents, stakeholders, researchers, and/or society should know about the childcare industry, and the significance of the role childcare providers play?

Participant V: We are just not babysitters. We are here to play that main part so that when they get into public school, private school, they can handle their own. From zero to five is the crucial time in their life and if we can get them on target, on track.

Participant VI: Oh, they should know we don't babysit. We try and mold them, teach them for society; to be a better person and a productive person in society. How they social, emotion, we try to start teaching them that at an early age. And if they can get along with the kids here then as they grow up hopefully that will stay with them and they can get along, you know, after they go to school, less fighting and that's what we try to do.

Participant VII: Childcare providers are very important. They play a very important role in a child's life. I think that childcare, early childhood education; it begins when they're an infant. It can begin when they're an infant. And it does a lot for a child. There's a big difference in a child who's been in a childcare setting and one who has always been at home or has always been with a relative. What I think people need to know is that the education of a childcare worker is extremely important. That is what is really going to make your business.

Themes

Once the researcher determined and clustered the meaning units, the researcher compared them to the transcripts. Next, a peer debriefer examined both, the transcripts and the meaning units for validation purposes. Following this process, the researcher utilized the imaginative variation method to obtain the emerging themes from the meaning units. In this study, eleven non-overlapping themes were formed and labeled by the researcher. Following this, each theme was analyzed and adapted with the consensus of both the researcher and the peer debriefer in order to use triangulation. The themes that were identified were found to be factors that influenced the lived experiences of the childcare providers in this study. Therefore, it should be

noted that the descriptions provided within the emerging themes were appropriately utilized to illuminate pertinent findings. The themes are listed in the table below.

Table 1: Themes and descriptions of the lived experience of childcare providers employed at non-accredited childcare centers serving low income families

Theme	Description (s)
Participants' Functions	Strenuous Multi-faceted Exhausting Overwhelming
Attitudes Towards the Occupation	Critical Role Unvalued Frustrated Overwhelmed Burned out
Intrinsic Rewards	Providing love and care to children/interacting with children Transferring knowledge to children Helping struggling parents
Wages	Low wages Struggle to survive/welfare assistance
Behaviors, Actions, and Detriments Towards Children	Unsanitary practices Neglected Unreasonably disciplined

(Table 1 Continued)

Theme	Description (s)
Behaviors, Actions, and Detriments Towards Children (continued)	Mishandled Limited smiling Yelling Limited physical contact (e.g. hugging, holding hands, touching shoulder) Dismissive
Curriculum and Resources	Limited resources to perform functions Lack of curriculum or lesson plans
Environment	Unorganized with inadequate resources Hostile environment Poor classroom management Limited resources Improper seating Unruly children Unfit for childcare providers' own children
Childcare Providers' Education and Training	High costs Not enforced by administrators Minimally required by state Lack of adequate education and training
Parents' Level of Participation	Lack of participation Lack of interest

(Table 1 Continued)

Theme	Description (s)
Parents' Level of Participation (continued)	Lack of support
Attitudes Towards State Regulations	Indifferent Lax Requirements Unclear
Relationships with State Licensing Officials	Negative Stressful "Vulnerable" "Unprotected"

Individual Textural-Structural Descriptions

As recommended by Moustakas (1994), Individual Textural-Structural Descriptions were developed by using all significant, valid, and invariant components; this includes the structured themes. These descriptions convey the lived experiences of each individual who participated in this study. The descriptions were reviewed and analyzed by the researcher and peer debriefer several times. All relevant meanings were examined, and alternate meanings were considered. A consensus was reached in terms of meanings presented in the Individual Textural-Structural Descriptions. As suggested by Moustakas (1994), the researcher has included participants' precise statements obtained from the transcribed interview.

Participant I

Participant I is a forty-three year old, African-American female. She is married with three children. Participant I was born and raised in Baton Rouge, Louisiana, which is where she still currently resides. Participant I stated that she was raised in poverty, and explained that she and her husband still struggle to survive while living pay-check-to-pay-check, and also while dealing with the stresses of their everyday lives. This includes coping with the participant's clinical depression, with which she was diagnosed eighteen years ago. The participant was given this diagnosis, just three years following the start of her career as a childcare provider. Prior to her current occupation, the participant was a cashier at a local retail store. She felt that cashiering was a dead-end job; therefore, she eventually decided to pursue her "dreams of working with children."

Participant has been employed as a childcare provider with her current employers for twelve years. However, the participant has worked as a childcare provider at various non-accredited childcare centers for a total of twenty-one years. Despite her many years of experience, she earns a low, hourly wage of \$7.25. The participant stated that she has never worked at an accredited center during the course of her career. According to the participant, every childcare center by which she was ever employed, was geared towards low income families.

Participant I's highest level of education attained is a high school diploma. She has no certifications, or formal training pertaining to childcare services, or child development. She does however have cardio pulmonary resuscitation and first aid training, along with three hours of an online introductory course which she stated covered the basics of childcare development, and health and safety. It should be noted that the state requires a total of twelve clock hours. Though

Participant I is not in compliance with regulations set forth by the state of Louisiana, the participant is still employed full-time (forty plus hours per week) at a licensed childcare center. When asked if she believed the three hours of training she received was beneficial, the participant stated “yes, because you learn the appropriate practices with the children.” On average, the participant cares for thirteen children a day, ranging from ages three to four.

While visiting the center, it was observed that the center was nestled in what appeared to be a low income community. During the opening of the center, the participant received some of the parents as they were dropping off children. Some parents signed in, and some did not; it should be noted that licensing requires parents to sign their children both, in and out. The center itself was relatively clean, yet dull. The large lobby where the children were gathered was poorly lit, and was even a bit unwelcoming in appearance. There were no colorful, educational decorative items on the walls to stimulate the children. The only resource used to occupy the children was an older model, twenty-seven inch television positioned on a rolling stand.

Once entering the participant’s classroom, the room was relatively large in size with sufficient lighting. Small tables and chairs were neatly aligned for the children. There were also various colorful, educational posters on the walls along with artwork made by the children. However, the neatly arranged tables, and visual aids on the wall were overpowered by the distracting clutter and disorganization noticed all throughout the room. This included toys spread across the floor and on tables, crafts and paper scattered and piled in various places throughout the room. There were also pieces of trash on the floor in several sections of the room.

When observing Participant I in the classroom, it was evident that she was unable to effectively manage the children. Children were given minimum instructions (e.g. “okay everyone, let’s sit still and remain quiet”). They were observed running around, and were

disobeying commands that were given to them (e.g. “have a seat” and “put that down please”). Students were also demonstrating physical violence towards each other; during which, the participant took a deep breath and softly stated “you see what I go through? This is what I have to deal with on a daily basis. I love them, but they drive me nuts.” The participant admitted to having ineffective management techniques, and acknowledged that there is a need for her to be developed in the area of classroom management. However, the participant felt that her options for advancement were limited. When speaking of low funding and her administrator, the participant explained, “it makes it hard for her to give us, or let us seek out different things, or even pay for it, you know, because I have my family, so if I did want it to come out of pocket, but, you know, it’s hard.”

When discussing her daily methods of teaching and the curriculum used, the participant described her challenges in stating, “sometimes it’s hard and we have to make up stuff, that’s why we go through the classroom and sometimes we draw our own pictures, we do our own thing because we don’t have those resources.” The participant explained that a new teaching method is being implemented by the state of Louisiana. She stated, “they were telling us that we weren’t supposed to teach the children; the children learn through play, which they do. They learn through play, but I also feel like they learn through additional resources. If you have funding that we could get a grant for some of the things that we need when they come and do our surveying, that we would be more prepared in that area, you know, as far as the things that we have in the classrooms. Sometimes we have to buy it ourselves, so you know, and for a small daycare that is hard.”

Participant I expressed that she “couldn’t get” the state’s new criteria, and explained, “we have to do more than television and we do have to look at it realistically, the majority of your

low income families are African-American so”. The participant began to compare centers such as the one she is employed by, to centers that are accredited by saying “KinderCare is not just sitting back and not teaching. KinderCare is doing some type of curriculum, not to single out any childcare, but they are doing curriculum and that’s what I felt was essential to our children, a curriculum because even though everything is repetitious from us to the school system, you’re learning things over and over again, so whatever we are teaching them, when they get to school, they already know, it’s helping them. It’s helping them to progress instead of sitting back and not knowing anything.”

Participant I stated that though she loves teaching and working with children, she often finds herself overwhelmed while interacting with the children. She stated “I feel like I’m the parent all the time. I feel like I’m the parent to every child in here, so you know, that’s a constant struggle.” The participant went on to further describe her struggles in stating, “when you multi-task, it’s having to potty-train, having to teach, having to make sure everything is done. You know, sometimes that does play a part in the burnout.” Despite this, the participant stated that she truly cares for the children for whom she provides care. Because of her “love” for the children, Participant I stated that she was surprised to learn from her administrator that she was reported for “not being affectionate enough.” She stated “I hug them and talk to them, and what more do you wish for as far as that? That, you know, that frustrates me because I feel like if we do all that we can in here.”

During the observation, the participant, did smile at the children as they talked to her. However, very little physical contact was seen between the participant and the children. Children were touched on the shoulders, while being told to “go sit back down” by the participant. Communications outside of teaching were only disciplinary related. In addition, it should be

noted that the researcher/observer was left alone with the children on three occasions (for up to five minutes each time) as the childcare provider was pulled away from the classroom to perform other tasks. The participant explained, “if I don’t help take care of these things now, I’ll be here all night, and I got things to do with my own kids tonight.” Participant I also explained “as childcare providers we are expected to do it all; you’ve got to be at three different places all at once.”

When describing the significance of her role as a childcare provider, and the low wage she earns, Participant I began to cry and explained, “it’s so critical, like, uh, you know, the woman that I met with yesterday and she stated to me, ‘we have the first five years of your children’s lives. We are responsible for the health, the safety, you know, the cognitive development, and all that of your children. We hold your children’s ultimate future and we are getting \$7.25.’ The participant added, “and also I personally feel like this is one of the most critical jobs anyone can have.” When further discussing her low wage, the participant put down her head in what appeared to be shame, while looking at the ground and said “we make less than workers at McDonalds. I don’t think they know how this makes us feel, what it does to us. I feel embarrassed.”

In discussing pathways to possibly improve conditions within childcare centers including wages, the participant was provided with information regarding accreditation. With consideration, she stated “I think that it would be a great idea for that to happen because a lot of us walk in and don’t know anything that we are doing. A lot of us have had children; even with the way we have responded to children hasn’t been so great. I think this will be a great opportunity for a person to learn how to manage your feelings, how to manage temper, everything, temperament, and everything in dealing with the children. Child appropriate

practices here, we need to learn that. We don't ever stop learning that. A child always challenges you." The participant also stated, "I think for, aside from the pay, aside from the accolades, aside from everything else, I think the main priority should be our children."

In working as a childcare provider for twenty-one years, the participant acknowledged that only the bare minimum is required by the state of Louisiana. She acknowledged that because the criteria to work as a childcare provider is so lax "a lot of us, just for a job, we need a job; we want a job, and you know, if this is where we can find it." In terms of learning and development of childcare providers, Participant I stated, "it's optional and I think we do a disservice to our children."

The participant stated that in the future, she hopes to become a director of a childcare center so that she can address some of the issues that both she, as a childcare provider, and the children are faced with on a daily basis. She also stated that she plans on obtaining formal education and training to "better prepare" her with "caring for the children, and dealing with the children."

Participant II

Participant II is a thirty-one year old, African-American female. She is originally from Shreveport, Louisiana, but relocated to Baton Rouge, Louisiana at the age of five. The participant is married with two children. The participant has worked as a childcare provider for fourteen years; this means she has been serving in this function since the age of fifteen. When asked for clarification, the participant stated that she has always worked at licensed childcare centers, but until the age of seventeen, she was being paid under the table. She explained that her mother worked as a janitor for the first center that hired her (the participant) as a childcare provider. Therefore, her mother knew the owner who agreed to "give the hookup." Participant II

explained that she accepted the job as a childcare provider to assist her single mother with paying bills, in order to avoid becoming homeless. Eventually, she developed a love for working with children. The participant is currently, legally employed full-time (forty plus hours per week) at one of the non-accredited childcare centers participating in this study.

Participant II has earned two Bachelor degrees, one of which is in childcare development. In addition, she has a Child Development Associate (CDA) certificate, and cardio pulmonary resuscitation/first aid training. It should be noted that the participant paid for the formal education and training herself. No financial support was provided by her previous, or current administrators to assist her with the career advancements. In terms of professional development, the participant explained, “I did that on my own because I wanted better, and I wanted more pay.” When asked if she noticed a difference, or improvement within herself since obtaining formal education and training, she replied “yes, I do notice some stuff that I never knew about when I went to school that I learned, and I was like ‘oh, that’s why this child was acting this way.’ The more knowledge you have the better you have an understanding of child development.”

Despite her education and experience, the participant earns a low, minimum wage of \$7.25 per hour. The participant stated that aside from one other childcare provider, she is the only one at the center with formal education and training. She stated that her administrator informed her that she must earn the same wages as everyone else, because if she was to receive more money, everyone would want to further their education to receive a pay increase; both of which would have to come out of the administrator’s pocket.

The participant has been employed by her current employer for three months. The children for whom she provides care are between one and two years of age. On average, she

cares for approximately seven children per day. When arriving to the center, it was observed that the center was located in a lower class, but not poverty-stricken community. The center itself was relatively small, but clean. The center had a warm and inviting feel to it. The center, as well as the classrooms were well-lit. The participant's classroom was neatly arranged and well organized. There was a moderate amount of colorful, educational aids located on the walls. The room was free of any clutter, and children's music could be heard playing.

Throughout the observation, the participant was seen immediately addressing the needs of the children when they cried or required attention. Participant II also remained calm while caring for the children, and overall demonstrated patience. However, there were a few moments when she appeared to be agitated. The participant occasionally raised her voice to say "uh-uh, come back this way" and snapped her fingers to get the children's attention. There were very few moments of smiling at the children, holding the children, or even interacting directly with the children during play. At one point, the participant expressed her frustration during the observation by stating, "it's a time to care for kids. Y'all just don't know. And I have to do this all day; a lot of times til late in the evenings too."

At one point during the observation, the participant left the researcher alone with the children for three minutes, stating "I'm sorry, but I really have to use the restroom. Just stay with them real quick." Once returning to the room, the participant stated, "at least I stepped out to use the restroom, instead of going to take a smoke like some people" while nodding her head at the classroom next door. During the interview, the participant described her experience as a childcare provider in stating "you get frustrated." In describing what she does in order to cope with the frustration, the participant stated "yell, just step out of the room for a minute to breathe and sometimes cry to be honest, because you're just frustrated. You don't know what to do, and

you know you have to pay bills, and you're still trying to push yourself to do it because that's all you have."

While further describing her experience of being employed by a non-accredited center (particularly her current place of employment), the participant stated that in addition to a low wage, her experience is negative due to working with colleagues who she described as "coming in in the morning and not speaking, as soon as they see the children they start yelling, screaming, the screaming is constant every day all day, mistreating the kids by handling them the wrong way, grabbing, um, just not treating them right with love and care and giving them hugs, and just because of the pay. That's the main; it's just the main, the pay."

When asked to describe how she in particular is impacted by the low wage, Participant II stated that she and her husband are barely able to make ends meet, and that her family depends on government assistance for survival. Participant II explained that she must also babysit on weekends to help support her family; this means she is never given any relief from caring for children. This lack of a mental and emotional break can potentially have dangerous consequences for the children for whom Participant II provides care, including her own children. Participant II further described her experience in explaining, "being able to, you know, think about things and work is kind of hard, and sometimes you're not able to function while you're at work. You force yourself to come to work, but it's like, is it worth it, it's minimum wage, is it worth it?" She added, "like sometimes we can't like go work at a 9-5 retail store; childcare is like really all we know so it's like we're forced to just say, okay, I'm going to accept this \$7.25. If you're not a doctor, if you're not a nurse, if you're not an accountant, it's like they just look over us, and we're just getting the minimum."

In further elaborating on the effects low wages have on the childcare center, the participant explained, “it’s just not focused; like, the teachers are not educated, they watch TV all day, and they’re not, like, trying to teach them stuff because their pay is low so they’re not motivated.” She also stated that her colleagues’ behaviors are very different from her own. She explained “it’s very different because they don’t have the experience, and they’re not qualified, and certain things that I know they should be doing, they’re not doing. The sanitizer, using gloves as you change a diaper, wiping, bleaching the tables every time you change a child, or wiping their face with sanitizer or baby wipes; different stuff like that. When they’re sick, they come back the next day, not supposed to within twenty-four hours.” In terms of unsanitary practices, during the observation, the participant was seen using the same pair of gloves to change children who made bowel movements, as she did to change children who did not. After changing the children’s diapers, the participant did sanitize the changing table. However, she had to be reminded to relock the lower cabinet which contained cleaning agents. Once being reminded, the participant stated, “I’m usually on top of everything. My mind is so gone right now. My lights are about to get turned off, so I’m trying to figure that out before I pick up the kids and get back home. Otherwise, I’m on my game, unlike other people here at this center.”

When further discussing poor childcare services at the center, the Participant II explained that her own child was enrolled at the same childcare center where she is employed due to her having an employee discount and for the purpose of convenience. However, she stated that the experience was so unsatisfactory that she removed her child. Participant recalled that her child was left to cry the “entire day.” She described how the negligence made her feel by explaining, “that really broke my heart. No one tried to comfort her; they just let her cry, and because I was working with the older kids, I couldn’t go and tend to my own baby.” During the interview, the

participant stated “I would work in a bad environment, but I want my children to be in a better environment.” The participant went on to elaborate by stating “I work at a non-accredited center, but I wouldn’t send my children here. My two kids are at an accredited, four star center; my husband and I scrape up and save every penny so that our kids can get the quality care and education they deserve.” She added, “at the center they go to, the teachers are highly educated and trained. Over here, the children are given the bare minimum. I see first-hand the value of quality care and education because this place lacks that. I feel sorry for the parents who are not able to make the sacrifices to send their kids to better centers. I’m low income, but we sacrifice for our kids.”

Unlike the other participants, Participant II has worked at an accredited childcare center in the past. When reflecting on her experience as a childcare provider at the accredited childcare center, Participant II explained, “we had to do certain things like lesson plans, we had to do that. The cameras were on twenty-four hours; we had more benefits, we were star rated. So when you work in a childcare system, a childcare that has qualifications and star ratings, you’re motivated to come to work, you’re happy, you’re smiling, you’re dressing nice, and you’re excited; so, that’s the difference.” The participant also described her experience with earning higher wages while employed by the accredited childcare center by explaining, “if you are getting paid more, you’re willing to go forward and spend extra time doing extra things.” It should be noted that the participant terminated her employment with the accredited childcare center because she relocated and did not have reliable transportation to make the daily commute.

When discussing the option of utilizing a system such as accreditation to increase the quality of services provided to children attending non-accredited centers, the participant stated

“it would be a challenge, but it would be worth it because every day we are trying to get better at what we do.” She later added “we’ll have more people educated instead of just having anybody.”

The participant plans to further her education by earning a Masters degree in childhood education. She hopes to become a certified teacher within East, Baton Rouge School District. She stated that her interest is to work with elementary school students.

Participant III

Participant III is a fifty-eight year old, African-American female. She is originally from Baker, Louisiana, but has lived in Baton Rouge, Louisiana for the past thirty years. She is single, and does not have any children of her own. Prior to her current occupation, the participant use to work at a hospital as a patient intake coordinator, but had to resign due to severe migraine headaches. She stated “the Lord delivered me from those headaches, which my doctors said that I would always have for the rest of my life.” Because her condition improved she chose to work as a childcare provider.

Participant III is currently employed as a full-time (forty hours or more) childcare provider and earns \$7.25 per hour. Her highest level of education is a high school diploma. Participant III has ten years of experience (all obtained from her current employer) as a childcare provider, and has acquired her CDA certificate as of the year 2013. Since this, Participant III has received, and maintained the state’s mandated twelve clock hours of relevant online coursework. It should be noted that the costs associated with these online courses were covered by the center’s administrator. When asked if she believed the courses are beneficial, she stated “yes, because it helps me to keep up with what’s new in childcare.” In addition to the twelve hours, the participant is certified in cardio pulmonary resuscitation, and first aid. On average, the

participant provides care to approximately eight children per day. These children range between three and five years of age.

When visiting the center, it was observed that the center was located in what appeared to be a significantly impoverished community. Several abandoned homes, and businesses with boarded windows could be seen just a few streets away from where the center itself was located. The actual center had insufficient parking. Most parents were forced to park in the street as they ran in and out of the center to drop off and receive their children. Employees parked on side of the center, placing their vehicles partially in the streets. Once entering the childcare center, the lobby area was dark, with wet, dirty carpet. There was quite a bit of clutter which included book, newspapers, and large boxes. The same was the case for the center's office. There were no visual aids on the walls to stimulate the children. The childcare center overall, could be described as being a bit gloomy, and unwelcoming.

When entering Participant III's classroom, the lights were turned off and the window blinds were opened to let sunlight in. Participant III explained that this was a "way to keep the migraines in check." She added, "the children can see just fine; they've gotten used to it, and I think they even prefer it now, so this is what we do." In addition to being relatively dark in the room, there was trash (e.g. paper, candy wrapping, and empty potato chip bags) on the floor. This was explained later during the interview as Participant III stated, "yeah, I give in to them because they're always asking me for snacks, and they know I have it." When asked how often she provides snacks to the children, the participant replied, "oh, they can get candy every day." During the observation, Participant III engaged very little with the children. She also, did not smile at the children very often, and there was no nurturing, physical contact. Participant III did however, issue snacks to the children. In addition to snacks, the participant gave the children

juice to share from a large cup she brought from home. The participant stated, “I bring a lot of juice and snacks because we have a lot of late days. So this way, I can have something to hold me over until I get home. Also, I know the kids get thirsty sometimes because it can get really warm in here some days.”

In addition to having a significant amount of trash on the floor from snacks, bookshelves were cluttered with oversized, unorganized books and papers. Toys were randomly placed all over the room. There were no educational aids on the walls. There were no tables, or desks (aside from the childcare provider’s desk). The children sat on the floor. When asked about how this may impact the children’s ability to learn, the participant replied “they write on hard books. They like being on the floor because it allows them to play and this makes the day go by easier for me.” When asked what about the arrangement makes her day easier, the participant stated “well, when they play they are entertained so it gives me a bit of down time for myself.” In regards to down time, it should be noted that the participant left the researcher alone with the children for approximately fifteen minutes, as the participant went to “catch up” with a childcare provider in a neighboring room. While observing the participant, it was clear that there was no set curriculum being followed to teach the children. The children were left to their own devices as long as they behaved.

At one point, a child disengaged from the other children on the floor, and began to run around the room. The same child had also been a bit “talkative” from the start of the class. Once giving the child instructions to behave, the participant then stated to the researcher, “okay, she’s been very active since you been here huh? So she is going to be in timeout, uh from the time she got here until it’s time to go home, right?” It was pointed out to the participant that placing the child in timeout for the entire day would affect what the child is able to learn. The participant

replied “um-hum, and guess what, she is a very smart little girl.” The participant then grabbed the child by the arms, lifted the child up from the floor, and placed the child in a corner of the room to face the wall in a seated position. Later during the interview, Participant III stated that she believes it would be beneficial to become developed in an area that “have to do with discipline.” Participant III acknowledged that she can often be too abrasive with the children.

Participant III acknowledged that in addition to discipline, she must improve in time management (in terms of lesson plans) in order to better serve in her function as a childcare provider. However, when asked if she planned to obtain formal education and training, Participant III responded “not at the moment because of costs.” Because of the low wage she earns, Participant III described her livelihood in stating, “you have to live on what you make. You cannot over spend; you cannot spend what you are not going to make.” As a result, Participant III, at that moment was unable to pay for any additional professional development. Aside from the need of further development, Participant III stated that she feels adequately prepared to effectively carry out her job because she “have the tools needed.”

Later, in discussing challenges and frustrating situations she often faces as a childcare provider, Participant III recalled, and heavily focused on a particular situation with an older child who was not potty-trained. Participant III explained that she was upset about having to deal with the child’s lack of progression in becoming potty-trained, as well as the lack of support she received from the child’s mother. Participant III added, “I guess it should not have frustrated me, but it did because it was not my child, I do not have any children.” In describing how angry and frustrated the situation made her, Participant III stated “honey, my hair curled up.” Aside from this, Participant III stated that she has a “good relationship with the parents.” She added “I make sure they know me because I learn their name.”

When further discussing things that are frustrating, Participant III described the educational method (promote learning through play) that is currently in place by state licensing by stating, “it’s confusing to us, but then we need to get our children on point; especially our children of color. They are already facing challenges and we need to get them up to date because so many of them are often neglected in the home. They are looked over in the school and if we don’t start here at the base. Many of them are in one parent homes and their mothers work and I don’t know how much time they spend with them at home on learning. We need to focus more on education because we’re being left behind.” Participant III later added, “the challenge is trying to get children this age to focus.” In describing how she feels when a child is able to focus, and demonstrates that they’ve learned something in the classroom, the participant explained, “oh, it’s just a big old, warm, happy feeling, just hug them, you just grab them and hug them and say ‘oh baby, you were really listening; so proud of you, you’re my baby’.”

In further discussing the state’s role in childcare, the participant stated “uh, I don’t think Louisiana is offering the daycare for childcare enough money. I really don’t, because like that meeting that I went to yesterday, \$350,000 divided among thirty-six centers. I think like \$9,700 per center and then they want to say that each center is not gonna get, they brought up the fact that maybe each center may need the same amount of money. They said the money should be dispersed on the specifics on what the center needed. You see, some of the centers, all of them got the email, but then all thirty-six centers didn’t show up yesterday. They were not there to voice their needs and they may not get their needs met, and they will be left out.” Participant III also stated that an administrator who did attend the meeting received a grant, and that they “used the bulk of the grant to do training, and they actually got computers in each class.” When asked about her thoughts on ways to obtain more funding, the participant replied, “I think if they come

together and be a very cohesive unit and apply pressure, they will get results from the government.”

Though the participant acknowledged that there are some needs for significant changes within the childcare industry, when asked if she sees herself working as a childcare provider long-term, she replied “yes, because I like it. I enjoy it.” When asked if she planned to obtain formal education and training, the participant replied, “not at the moment because of costs.”

Participant IV

Participant IV is a fifty-four year old, African-American female. She was born and raised in Baton Rouge, Louisiana. She is married and has an adult son. Prior to her current occupation, the participant was a stay-at-home mother. She explained, “I didn’t have to work, you know, my husband worked and he wanted me there for our child because of his parents. He was an honor student. He says his parents never made it to an honor day program and he always felt like nothing even though he was an honor student. So, he made sure that I was there for ours. So, I feel, and then I was there for our grandchildren because he still says I didn’t have to work. Now, you know, we’re getting a divorce now.” In addition to the stresses of divorce, Participant IV stated that she also suffers from depression and anxiety. She has suffered with the conditions for the past five years. Participant IV explained that on average, she has panic attacks at least once a month. However, she stated that she has never suffered a “full-on panic attack” while at work because she uses coping mechanisms to calm herself.

Participant IV is currently employed as a full-time (forty hours per week or more) childcare provider, and has been at her current center for one year and nine months. However, she has a total of fourteen years of experience as a childcare provider. Participant IV’s highest level of education is a high school diploma. In addition, to a high school diploma, she has earned

a CDA certificate. Though Participant IV initially obtained the state's mandatory twelve clock hours, she explained that she has been "struggling to maintain the hours" and is "a bit behind now" as she currently only has six of the required twelve hours. The training received was funded by Participant IV's administrator. In addition to the coursework, Participant IV also has training in cardio pulmonary resuscitation, and first aid.

At her current center, Participant IV cares for seven children on a daily basis. These children range between the ages of three and five. It should be noted that Participant IV is employed at the same center as Participant III. Therefore, the description of the childcare center is the same, dark and gloomy, cluttered, and unwelcoming. Upon entering the classroom, it was noticed that like her colleague, Participant IV's classroom also did not have any desks or tables for the children. Children in this room also sat on the floor throughout the day. The classroom itself was bright with three visual, learning posters placed on one wall. There were also arts and crafts (presumably made by the students) on the walls and on the floor. There were piles of books, paper, and board games stacked on the childcare provider's desk. Other items such as posters, paper, and crayons were randomly located throughout the classroom. There was also an active coffee maker located on a bookshelf across from the childcare provider's desk.

During the observation, Participant IV did not appear to follow a specific curriculum to teach the children. The children were partaking in random activities such as napping, playing with toys, fighting, coloring, or even simply looking around the room. Participant IV was observed walking into a large closet located in the classroom, and closing the door behind her. This was done twice. The first time, Participant IV stayed in the closet for approximately five minutes, stuck her head out to view the children, and went back into the closet closing the door. The second time, which occurred approximately thirty minutes later, Participant IV entered the

closet and stayed there for twelve minutes, before finally coming back to supervise the children. While interacting with the children, Participant IV only smiled twice, and made very little physical contact with the children.

During the interview, when asked about the technique she uses to cope with stress and manage the class, Participant IV explained, “Okay, if I’m in the closet, let’s say they played and we played, and if I’m in the closet I observe them, and I put something up so they really can’t see but they know I’m there and I peek and I will call their name if they do something, I can say, okay, that wasn’t nice, and they know I’m still watching them so I’m doing this. I’m reading a book, but I got my eyes on them, and they think I’m reading this book so they’re going to try something and when I call their name they go like, and so, I do that to calm myself and then I come out of the closet and that’s how I calm myself. and it seems to help them, too, and they’re going to come in there and sit down with me and, so, we’re just there sometimes looking, I bring the newspaper and sometimes we will read the paper.” Participant IV explained that she does not find timeout to be effective, and explained, “that’s why I had to think of something else, the paper; sitting in the closet and said, ‘oh, okay, let me rest my nerves’.” Participant IV stated that after a while of escaping to the closet, the children will enter and ask her to come out. She later explained that having a “time for peace” was important.

Before providing further descriptions of her experiences as a childcare provider at a non-accredited center, Participant IV opened up by reminiscing about when she, herself was a child. In describing the devastating experience she had while in school, Participant IV explained that the experience was not peaceful, but was instead very hostile. She recalled, “I hated it when teachers would mistreat some children because they didn’t learn as easy as the others and they would, like, back in my day, they could spank them and if they didn’t learn they would get a

spanking and I hated this, and I hated school because of this. So, I said in my mind that no child should be afraid to learn, no child should be afraid to go to school, and I never forgot it.”

Following this statement, Participant IV described events that have occurred at her current place of employment, by explaining, “I have seen some things that I didn’t like; I have witnessed things that I didn’t like while I was helping with the children, like, if they spilled their milk, or if they drew a picture, the teacher would snatch the paper saying it’s ugly, I don’t like that. I’m going, like, no, you know, and I have voiced my opinion to that teacher and let her know, no, you don’t do that.” She later added, “I feel and I truly believe that a child has to feel safe and secure they have to know that learning is fun, that they don’t have to be threatened to learn or told that they are dumb, or empty wagon because they didn’t learn like the others. So, I try to make my classroom, and I always have tried to make it as welcome as they could feel, welcoming. I try to make it a safe haven where they can come to because I get very emotional about it.”

Participant IV shared with the researcher that her grandchild once attended the childcare center where she is now employed. However, she removed him. She explained her reasoning by stating, “I wasn’t happy with the way he was being treated, or his classmates.” Participant IV described her experience by stating “I saw no love; I saw no patience; I saw, it’s like this person shouldn’t be working with children and the baby, my grandson, my great-grandson’s mom told me that when she walked in his class she felt evil and she wanted him with me. They wouldn’t put him with me; she took him out because she just didn’t feel comfortable with his teacher.” She added, “I just feel that, that person shouldn’t be working with children.” I feel she shouldn’t be around children, but okay, that’s why I feel. I just feel children should be safe because you don’t know what they’re going through at home. They are being abused and everything so when they

come here they have to feel that they can trust you. They have to feel loved, even though they get on your nerves, give you a little headache; you have to take a Tylenol. They still need to be treated as children. They don't want to be smacked on; they don't want to be called dumb and stupid no more than we do. So, I'm really serious about that."

When asked if this information has been brought to the administrator's attention, Participant IV responded, "I have to limit because I felt tension, but I'm not the only one. I'm not the only one that noticed this and nothing is being done about it. She is still here and everyone says she should not be working with children." Participant IV also explained, "childcare providers who speak up are penalized; everything is hush-hush. The teachers here will give you a show to pretend like they are doing their jobs, but they are not. A teacher here mistreats the kids throughout the day and then give them candy at the end of the day to make up for it. The children complain to other teachers and even to their parents, but no one does anything. This teacher use to beat the children with a ruler. The center was cited and nearly closed down because of it. As a result, the childcare providers were forced to take a class and sign paperwork because of the incident." It should be noted that Participant IV is referring to the actions taken by another participant (Participant III) of this study. When asked why she thinks administrators keep people who aren't adequate in performing their tasks, Participant IV replied, "I don't know. I'm going to be honest with you. I can't figure it out. When you go to classes, you will hear them talk about what goes on in that school and, uh, I could never figure that out. Why would you want someone that could bring you down? That could close your school, literally get it closed. I don't know."

Later, in describing her own faults and challenges in caring for the children, Participant IV stated "at this age or even at the older age that just want to tear up the class all day and they know that you can't do anything but put them in timeout, and timeout really doesn't work

because they make timeout, out of a game and that's frustrating. When you want to engage in something but they want to do it their way, so you try their way and try to ease it back, but they're stubborn in their mind and they're just not, so, that's frustrating. When they just get to the point where I'm grown and that's how children will be. Like, you can't tell me anything and that's frustrating and that no matter how you sit down with them, that's why I like to be on the floor and be with them, it does not work. They will want to fight and we don't fight in class and you'll have to have a camera in here in the rooms to see to really know what teachers go through."

In terms of interacting with the children while frustrated, the participant explained "I have raised my voice and cut my hand like this, but I don't believe in, I might tap them on their butt or tap them like that to get their attention, but yes, I have yelled and then I said, 'Okay that wasn't good' and so I learned how to calm myself down. You know, I learned how to calm down, and so, I am better at it, but I am still working on it, but they can push you to that point where, okay, I have to go use the bathroom." She then added, "I calm down and when I calm down, they learn. They have learned that if I do this, or go to the bathroom, you got a headache so they know something's wrong because they will ask you, 'you got a headache'?"

In describing an additional method used to collect herself, Participant IV later explained, "I have learned to pray and ask God for strength. You need help and I ask him, help me God, so that I won't lose my temper and I just sit quietly and I talk to God. They might not know it, but I'm talking to God on what we have because you have taken me there and, uh, so I have learned to cope better."

In addition to trying to cope with the children's poor behavior, Participant IV added that her experience with the parents is that "they don't seem interested; they don't care." She

explained that the parents do not reinforce what has been taught at the childcare center.

Participant IV also feels that lack of resources at the childcare center creates challenges. She stated, “most of it, construction paper, crayons, and things like that, I bought.” So I think that funds, more money will help, but they’re saying there is none, so.” She also explained, “another struggle with teaching is the fact that they change the rules constantly. One day they tell us to teach, the next day they say let the children play and interact with each other. Now they want us to teach again. It’s frustrating.”

When discussing training and development for childcare providers, Participant IV explained, “I love going to class. So I would go, you know when the paper comes in I would just mark for when I was paying for it, I would just go because I had that money and I just like going and learning it and, uh, but you know, now when the owners pay for it you get your twelve clock hours and if you want more you pay for it.” The participant shared that though she finds the courses to be beneficial, her colleagues, “don’t have the knowledge that they should to say we had to go to these classes.”

In describing her thoughts on what it takes to be an adequate childcare provider, Participant IV explained, “I say it comes from within because you know our grandparents weren’t trained, but it was mother sense and I feel that, okay, now, it’s a new way. They have this way or you do it this way or you do it that way, okay, but it still comes to me working with children; still comes with mother sense. It still comes from within. You could be as educated as you want from top to bottom and it still won’t work in that classroom. You won’t be the best you could be if you don’t have it on the inside of you. I truly feel that.” She added, I have known some that went to college but they just didn’t have it and they worked for us and I interviewed, when I worked with my son, I interviewed a lady we got for a director. I called my daughter-in-

law and I said, hey you have to hire her; she has a booklet with a certificate. She has been to every class, but when she got in there she couldn't do the job even with all the students she had, she couldn't do that job."

Though Participant IV believes that being a good childcare provider is intuitive, she also sees the value in education and training. She explained, "I feel, because everyone doesn't have that inward, but I feel that maybe if they did take these classes and they learn how to deal with them, they could do a better job because they are learning what they don't know. There are some people that just don't like children, but they are good at, uh, at teaching them at guiding them and leading them, if they had the knowledge, but they just don't have that mothering."

When discussing the courses that she herself has taken, Participant IV explained, "I would say they are good because there is a lot that I learned that I didn't know about taking care of them, about teaching them, uh, because I would like for them to learn." While reflecting, the participant expressed that she wishes she had furthered her education in order to better herself. She explained, "when I was volunteering at my son's school and at my grandchildren's school they would always say you're missing out on what you're good in, and I wasn't really paying attention, but now it's all coming back, you should have gone on instead of just volunteering, you should have been going on to school at night or something."

Once educated on accreditation, participant believed that such process would allow childcare providers to offer more to children. Participant IV explained, "They would be better able to feed them, you know, with the knowledge they need to know. It's harder than when we were in school. It's harder than when my grandchildren were in school, so, I mean, we have to stay abreast. We have to know so we can teach them because they're the ones that have to go to, you know, it would need to be from him, to preschool to Head Start, they're failing Head Start

children, I mean, how do you, I mean, first grade they're learning stuff that we didn't learn until we were in middle school. So, I feel it's important that we don't, you know, it's just not playing. To me, I'm going to tell you the truth, they're just not playing all day, with the teacher working with the child; okay, this is a baby doll, okay, what do we do with the baby doll, no, we don't beat that baby doll because it's peeing and pooping, no, we have to teach that baby to go to the toilet. So, I feel that, I'm learning just from watching these children really. I mean, the babies all day long, the babies are being beat." She went on to say, "I'm learning from them; so I feel that all the education that we could get to help these children is good."

Participant IV stated that she plans to continue to work in her current role until she retires because she "love working with children." When asked if she would obtain further education or training, the participant replied, "no, no need to."

Participant V

Participant V is a fifty-seven year old, African-American female. She was born and raised in Baton Rouge, Louisiana. Participant V is married, and has two adult children. Prior to entering into the childcare industry, she worked in retail. However, Participant V expressed that she had a love for children since she was very young. She explained, "when I was a teenager, I use to always bring other people's kids to my mom's house, and I would keep them. I would dress them; I would comb their hair and I would take them home later and I guess that was just something that was inside of me was tending to kids. So I've been dealing with kids since I was a teenager." She added, "I have a passion; you have to have a passion for it. It has to be something within your heart that gives you that yearning to want to see a little child and help. So that's how I got started was because of my kids."

Participant V currently owns her own childcare center, which was one of the three centers observed in this study. In addition to serving as the administrator of the center, Participant V also serves as a childcare provider when needed. Her highest level of education is a high school diploma. Participant V has thirty-one years of experience in both, the role of a childcare provider, and as an administrator. It should be noted that Participant V is the administrator of Participant I.

As the owner, Participant V wears various hats to maintain the childcare center. In observing her, it was evident that she was incredibly overwhelmed. Participant V was seen answering the phone, interacting with parents as they came in and out of the center, completing paperwork, and taking over classrooms when childcare providers needed to briefly step out. Participant V also left the center several times to run business errands. Though she carried out the functions, it was obvious that the participant was a bit rattled by all of the multitasking. During the observation, Participant V was seen talking to herself often, while trying to figure things out. She shuffled through paperwork on her desk while searching for documents. She also misplaced her keys at one point; this kept her from reaching her meeting by approximately ten minutes past the scheduled time. In addition, Participant V was also observed pacing up and down the center several times while trying to remember what it was she needed to take care of. During the observation, Participant V explained, “having a strong support system in the staff is important because I can’t do everything, and I can’t be everywhere at once.” She added, “I got to have people who know what they’re doing so that my job can be easier.”

In describing how she manages and trains her employees, Participant V explained, “I don’t want to come in your room on a daily basis, a weekly basis, and say what are you all doing? I don’t want to come in there and say okay this is the way I want you to do this; this is

how I want you to work with my kids. I am not like that. Once I hire a person and I see that they have the initiative to input their ideas that they can really go in that room and work that room without me standing over them, that's what I'm looking for. So, the training classes, like I say, my old people have been with me since I started the business so it's like we grew together. We developed our program as far as teaching the kids so anybody that's new, we're going to try to adapt them to our program. We try and let them put into our program. So I'm the type of person that when I hire you I expect you to say, okay. I'm self-independent. I know what I'm going to do. As long as I supply the materials for you, you are free to do and take care of my kids and do good. You have free will to just run your classroom the way you want to run as long as my kids are being taught, as long as all their needs are being met, we're good." In addition to this, Participant V stated that she informs her staff of new information and new techniques she learns from other centers. She explained, "I tell them okay, 'let's see what we can do with this and how we can go further'." In terms of performance and management, she explained, "my workers really don't stress me out. I have never had a time where they have really made me angry or disappointed, or to say, uh, or blow up with them."

When asked about her experience with childcare providers who were not, or currently are not so great, Participant V explained, "over the years, I've had to let two go." She stated that this was due to the former employees' failure to comply, and unprofessional fraternizing which interfered in work. She also added, "I had a couple of them leave because of different positions. They were tired of the kids, of working with the kids, and then went to work with the state, or they went to work with Wal-Mart, or something like that." In discussing a particular childcare provider, the participant recalled, "I had one lady that she was not always angry, but she never had a smile and you have to have a smile and you have to make these kids love you. They feel

your expressions. They feel you. They feel how you feel. I used to always tell her ‘you never have a smile, that’s why they don’t come and run to you.’ Any teacher, if we’re out here, whenever my teachers come through the door, those kids will get up and run and greet whoever is coming through that door, and with this one particular lady they would never do that. I used to always tell her ‘they feel your emotions. They feel how you feel, so if you are always down and never smile and those kids know that, so.’ She said, ‘this is not for me.’ I said, ‘I know it’s not.’ She walked away, but that would be, I mean, just to see them get to school, get to college, and make something, that makes you feel like, oh, now I understand what I had to do in that child’s life to get that child to that point.”

In describing the former childcare providers’ performance and issues, Participant V explained, “they gave it their all, but they just couldn’t hack the children. Their patience was there, but they just couldn’t, they couldn’t see this, I think, as a day to day duty. I’m going to come here. I’m going to hear the baby crying. I’m going to hear him; he can’t tell me what’s wrong with him. They just couldn’t, they didn’t have that special, that oomph about them, and they never could do it, so as far as work wise, they come in here and work. They come in here and do a lesson plan. They come in here and play with the kids, but it just wasn’t there and it was not.” She later added, “those with a passion play like if they would go one step beyond the call of duty; whereas those with a paycheck, they say, ‘oh well, as long as they’re dry, fed, and aren’t crying, we’re good’.”

In discussing her new approach to hiring employees, Participant V explained, “now the cause of daycares are changing now. We are now hiring mostly older people because they have more patience. I don’t hire anybody twenty-five and under because they have kids that they have to go home to in the evening and they already came here with kids, and they go home with their

kids, they're going to lack something somewhere. It might be something they lack here or something back at home." In further describing her experience, the participant explained, "I've had, I would say, about three or four people that I could just say I know came in and the next week they weren't here because, well, I have kids, I can do it. Oh, okay, it's not just having kids and raising your own kids, and dealing with a daycare setting or a school setting of kids is totally different. And then it entails more than just sitting here and watching kids."

Participant V acknowledged that childcare providers play a very active and crucial role in children's lives. In discussing childcare provider's low wages, and lack of government funding for the center, Participant V explained, "It's just a lot; people look at it and say, well, you're making the money. No. Black daycares, see, like, KinderCare and those particular big corporation daycares, they could make the money. We are beginning to make the money because of the Star program but we just found out about the Star program. If the majority of my children have low income parents that work for McDonald's, Popeye's, or something like that, and our \$24.00 a day, that's 120 dollars a week, that's \$550 a month, and you are only bringing home \$800 or \$900 a month, and then we have to pay 500 of that to childcare, what would you do? So, in order for us to get better with a staff in this, as far as paying them an amount that we think is appropriate for the amount of work that they do, we got to get more positive parents that are making the money. As long as we dealing with the low income parents because they have to work also, so, we have to kind of work with that."

Participant V specified that she has twelve childcare providers on staff. She stated that her center could service over one hundred children, and once did. However, she explained that due to certain challenges, she was forced to decrease the number of children she provided service to; in turn, reducing the center's income. When describing the challenges Participant V

explained, “the difference in the kids and the parents started to change when they became younger, the parents became younger, and when the kids start to, my staff would send homework home, which wasn’t much homework, it was maybe, each classroom would make up a group, and they would do here, and they would send some home once a month, and they would tell the parents to work with the kids at home. Well, when my staff started not to get the response back from the parents and the input that they were looking for, it caused, just caused a change in the daycare. It was like we were pulling tooth and nail to get the participation from the parents as well as the children. If they were learning here, they were excited, but once they go home and they came back from the weekend, it was like we had to take a child and re-transition them all over again from a Friday to a Monday and it became frustrating. Then, as the older kids started to change, different attitudes and the talk backs and it was just a lot that I wasn’t going to take from kids, and when the parent is not there and not being supportive. So it caused me to sit back and revamp my center and say ‘you know what, I’m gonna downsize’ and that’s what I did. I sold my van. I stopped picking up the kids and stopped taking them home. So those kids that had the transportation to get here were the only ones that stayed.”

Adding to her list of challenges in operating the childcare center, Participant V discussed the negative experiences she has had with licensing. She reflected on an incident where she was cited for an outing with the children. The participant explained, “she said ‘Mrs. Speaker, I’m going to have to cite you on this field trip.’ And I asked her why. She said ‘because you have thirty something people on this one log sheet.’ And that meant that I had thirty something people in my van at one time. So I told her, I said, ‘be for real; I don’t have but a sixteen passenger van.’ ‘What do you think, I had people sitting on top of each other, on top of the car?’ So she said, ‘well, it has to be cited.’ I said, ‘well, wait a minute, I’ve had three surveyors to come in here and

all of y'all saw this same documentation; it's a year later and you're going to cite me for a year later?' Well, she said, 'they had a complaint.' I said, 'no, ma'am, when you came in my daycare you introduced yourself as specialist for licensing and you said you were here for my annual. You didn't say anything about a complaint.' So I told her, 'you know, what I see now is that you're going to try to find something to write me up for and I don't think that's fair.' So then she asked me about fundraisers and she wanted to just exactly find something and at that particular time I told her 'this is over; this is over. I am not answering anymore questions; I don't have to. I am not required by law to answer your questions, which I think are kind of stupid.' So that's the last, that's the first time and the last time I had an incident where I've been mad with the industry because nobody came out after I called and told them what was going on. Once I submitted my letter, nobody gave me a reply and after that, I mean, I just heard that she was moved to another department because I know the incident happened at other centers. And like I said, we have once a month meetings and someone had an incident with her prior, after that and we discussed it and I told her what I did, so. Well, after I wrote my letter I heard nothing else about it. You heard something in the wind, but as far as them coming back and writing me, or citing me, or whatever, they didn't."

Participant V stated that she knew the state official was being dishonest regarding the complaint because she has had a complaint filed against her in the past, she explained, "I have had other people call Child Protection to come in only from time to time, and I know when they come in the first thing they say is I'm here on a complaint. When they come for a complaint, Child Protection comes and they come with their pad, and they tell you they're here for a complaint, and they tell you who did the complaint, and they tell you what it was about. I had one of my teachers, a parent, her little girl said the teacher pulled her hair and, uh, she called

Child Protection. They came out and, uh, they didn't find any evidence as far as saying that it was something done intentionally or it was something done, or she pulled the hair and pieces came out. They didn't find anything. So they came out and, uh, that was it. They gave me a clearance letter saying no evidence or whatever and the child was still here." The participant explained the procedure in stating "well, we had to bring the teacher in here, and that particular day the teacher said the only thing that she could remember was one of the kids was in line for the water fountain, she would help them down and maybe a little girl thought by her helping her down that she pulled her hair."

Following the discussion of what her own center was recently investigated for, Participant V discussed how another center left a child in a van. She explained that the child passed away and that she thinks the workers "got off with negligent something." She added, "they do have five years of probation", and that "the owner of the daycare hasn't been to court yet." The participant believes that the passing of the child, while under the childcare center's supervision is what caused licensing to become more stern.

In discussing ways to improve non-accredited childcare centers, Participant V discussed the new Star system. She explained "Uh, they come in and they assess your classroom, uh, that's my star there. You have to have maintained certain things in your daycare center, and they come in and look for it to make sure the kids have access to different areas in a center, not just sitting at the table doing ditto sheets, uh, they want to come in and see, uh, a home center, just for different centers, I can't think of the name of them right now, but it's like reading, home, a science center, and having a science center you have the sand and your water table, you have like outdoor stuff so they can recognize what's a leaf and different things like that. It makes a daycare center focus more on the education of a child instead of just bringing a child in your center and

they play all day. You can tell from the child that's playing out there from a child that is being taught. Uh, there is nothing that I don't like about it because it's nothing that's hard to do. It's not hard to upkeep. It's not hard to; there is nothing hard that they are asking us to do. It's nothing hard that is required of us. It is something that we do anyway."

In terms of improving the center by having educated staff, Participant V explained, "at first, that is all that we did hire was someone coming straight out of high school but the education dealing with the kids wasn't there, so if we do a lot of training we do a lot of finding yourselves, you find yourself during the classroom instead of them doing it and they're watching you do it. I don't knock it because they do learn from it and when I started out the majority that everybody I had was out of high school, but over the course of the years, even if you hire a person with just a high school diploma that person stayed there. Say, okay, start getting them involved in the online courses, uh, get your book and let them read that book and it will give them information. It tells you exactly what to do with a certain child, what to do in certain areas, you know, to teach them."

Participant V was given information regarding the process of accreditation. She stated that this would be something she would possibly be interested. The participant acknowledged that education (not necessarily a Bachelor's degree) and training could be critical in developing childcare providers. She stated that in getting the proper education and training, "that person is learning different ways to deal with the kids. It's not just 'I'm going to sit here and watch y'all play.'

Participant V plans to continue to serve in her current functions until she retires. She stated that she would obtain formal education, or training "possibly, if mandated."

Participant VI

Participant VI is a fifty-eight year old, African-American female. She is originally from Jackson, Mississippi, but has resided in Baton Rouge, Louisiana for the past thirty-four years. She is married with one adult child. The participant has been in the childcare industry for twenty-six years, which is also how long she has been operating her own childcare center. The participant currently functions as the owner, and administrator of one of the three childcare center observed in this study. It should be noted that Participant VI is the administrator over both, Participant III, and Participant IV.

Prior to her current role as an administrator, Participant VI was an English teacher in the Baton Rouge, public school system for ten years. She stated that though the childcare industry is “not much money,” she chose to enter it because of “the love for kids.” Participant VI’s highest level of education is a Bachelor’s degree in child development. In addition to this, she has earned a CDA certification and has maintained the state’s mandated, twelve clock hours of training. Participant VI is also certified in cardio pulmonary resuscitation, and first aid training.

Although Participant VI is qualified to work directly with the children, she stated that she only briefly fills in for childcare providers when it’s absolutely necessary. She added, “I don’t get in the habit of having to do other people’s jobs.” Even though Participant VI no longer functions as a childcare provider, she stated that she did during the developing stages of her business. Participant VI explained that functioning as a childcare provider was “very hard” because she was “sure to take extra care” since it was her own childcare center.

In observing Participant VI, she seemed incredibly stressed and overwhelmed with administrative duties. She was seen placing orders for supplies needed in the office. She answered the phone each time it rang, and she received the children and parents as they entered

the building. At one point after speaking with a parent who stated that her child's medication was not sent home the previous day, Participant VI stated, "girl, I just wanna pull my own hair out sometimes. It gets to be like a zoo in here, and I'm the one left to deal with all the crazy."

Participant VI took a deep breath before sitting at her cluttered, unorganized desk. She placed her hands over her face, and shook her head left, to right before writing a note on a memo pad. Once completing the note, Participant VI walked into the classroom, and collected the child's medication which was left on the teacher's desk, rather than in a locked cabinet. Once retrieving the child's medication, Participant VI stated, "Lord, why do I even bother?"

Later during the observation, Participant VI walked down the halls and stuck her head in the classrooms to "check in on things." She explained, "it's sad that you gotta do this sometimes." While looking into one room, the participant walked in on a childcare provider talking on the phone with a friend. The participant shook her head and said, "get off that phone. Now you know you not supposed to be on that phone. Why would you do that, knowing we have a visitor here today? Oh, trust me, I will deal with you later." The participant then walked back into her office, grabbed a form from the file cabinet, filled it out, and then went back to completing administrative tasks.

Throughout the observation, Participant VI was pulled away from her administrative duties to respond to childcare providers' inquiries. After the third childcare provider walked into the office to speak with Participant VI, the participant stood from her desk and yelled, "what's the matter? Y'all don't wanna be in y'all classrooms today? What's the problem? Ya'll know I don't operate like this." It was clear that Participant VI was quite agitated with her employees, and overwhelmed by her duties. In addition to management and administrative functions, she also operates the center's van on a daily basis to pick up, and drop off several children.

In discussing the childcare providers at her center, the participant stated that some of her employees do not always supervise the children as they should. This was witnessed by the researcher while observing two childcare providers from the center, who also participated in the study. Participant VI feels as though she is unable to fully rely on her childcare providers while she is away; she explained, “and then, when you come back from somewhere, you know, when the boss away the cat will play. And then when you come back, okay, they’re out of their room, then they’re in trouble. So it really makes you frustrated.” This is a major issue for Participant VI especially since she often leaves the center to take care of business errands, and to transport some of the children.

Participant VI explained that leaving a child unattended is “really bad in licensing’s eyes.” In discussing how the state regulates the issue, the participant explained, “use to be, they write you up, you know, and put it on your record. Now the new law and the new rate just came out, they’re going to fine you \$250 and after you get three; then they’re going to terminate your license.” In describing how she addresses the issue of her employees failing to comply with regulations, Participant VI explained, “they get written up first. Second time they get days off. Third time, they’re out the door.” She later added, “if somebody is getting me written up, I’m not going to keep them. I’m sorry. Because it’s hurting me. Whatever I have to do. I’m Sorry. I’ll start over. I’d rather start over, train somebody, send them back to school than to keep somebody that’s going to; sooner or later, you’re going to get your license, you know, revoked.”

In addition to employees not complying with regulations, Participant VI stated that she sometimes has problems with the childcare providers engaging in “mess.” She stated, “that I cannot stand. I’ll fire you in a second.” She further explained, “Yeah, because if you keep doing that it’s always going to be a confusion. If you have confusion, then you can’t deal with the

children because you're always in a mess. So how are you going to teach my child anything and you're in a whole big mess? No, I can't stand it. I like smooth sailing. I do not like mess, period." Participant VI stated that she terminated two employees over the years for this reason. Later, she added, "I am not going to let nobody run my business that I have built and worked, and scraped, and borrowed, you know, to put it together. And everybody in Baton Rouge knows Ms. Speaker and I'm not going to risk that. I would get rid of you in a minute. Hire me a child that just came out of high school, send them to school, and train them."

In discussing training and development for childcare providers, Participant VI believes that in order to improve the quality of the childcare centers, childcare providers should "get more education like they are going to. Like whatever comes out then educate us so we can educate the kids." She added, "because if they don't train then we don't know how to enforce it or how to administrate it to the kids. And if we don't know how to do it then the kids can't get it." The participant later added, "now I have the really good staff because they know what they're supposed to be teaching, they know what, how to teach it and everything, whereas back then you didn't know how to administer, or how to do it. Now we can help the kids more because now we know how to do." Participant VI also explained, "at one time they were classifying us as babysitters. Now the bar is going up so now you have to get certified. See that's what they're pushing for it now. Everybody that works in a Class A daycare now is going to have to be certified. You have to get your CDA or you have to go to, what's that college I went to Ashford's because its accreditation. So they accept that; Ashford's or you get your CDA or something that's higher than your high school education."

It should be noted that childcare centers are not required to participate in the Stars program, or to become categorized as Class A. Participation is fully at the discretion of

owners/administrators. Though participation can result in additional government funding towards the centers, not every center will opt to participate due to initial costs (e.g. education and training, resources, etc.). Participant VI does plan to participate in the program; she explained, “see we were getting ready to submit the application to be qualified for the program. Okay, so now they accepted us so East Baton Rouge Parish is in the pilot program. So now they are going to come and train us how to do strategy, teach with strategies and all that. So that’s what we’re fixing to do now. And then their qualifications; yesterday they decided it probably was going to be higher. So we don’t know what credentials we’re going to have to get. But we’re going to learn because it’s really going into effect 2014 is our training year and everything.” She added, “so that’s how they, so they’ll train us and they’re going to be training us just like they did for the star. You know, we all had to be trained for how to stop teaching and start learning through play, set up stations and everything. Okay, so now we got to throw that out and pilot’s going to come in and train us how to teach the way they want us to.” Participant VI was educated on the process of accreditation and expressed interest. She stated that she is open to considering all available resources to develop her staff.

Participant VI understands that the more relevant education and training a childcare provider receives, the more money the childcare provider will expect to earn. Her response to this was “and then we, you know, the state pays us for most of the kids and they are the ones that sets the rate on pay. So that’s what we have to deal with.” She added, “well at least with the high school, you can train them, you know, you can pay what you’ve got to pay anyway.”

Administrators are responsible for the first twelve hours of relevant coursework obtained by childcare providers and mandated by state regulations. This can sometimes be a financial burden on administrators, especially because childcare centers often have high turnover rates. Participant

VI explained, “so you pay, and get it and hopefully they stay with you because it’s your money that’s training them. And nine times out of ten they do. They find something better or somebody offer them more.”

Participant VI plans to remain in her function until she retires. She does not plan on obtaining education and training outside of what is required by licensing.

Participant VII

Participant VII is a thirty-five year old, African-American female. She was born and raised in Baton Rouge, Louisiana. She is married and does not have any children. She currently owns her own childcare center, which was one of the three observed in this study. Prior to entering the childcare industry, Participant VII worked as a social worker/case manager. She stated that she chose to end her former career, and open a daycare center because she “think and honestly feel that early education, early childhood education is very, very important.” She added, “um, I found that, um a lot of childcare centers um, had more of a traditional approach to early education, and the industry’s changing.”

Participant VII serves as the administrator, and also as a childcare provider at her own center when needed. She has three years of relevant experience, which was all obtained at her own childcare center. Her highest level of education is a Bachelor’s degree in General Studies. In addition to this, Participant VII has also obtained certification in cardio pulmonary resuscitation and first aid training, and has completed the training necessary for director’s credentials. Participant VII has a small staff of five childcare providers. It should be noted that Participant VII is the administrator over Participant II.

In observing Participant VII, it was noticed that she was well-organized, and systematic in operating her center. Books, binders, folders, and paperwork were all neatly arranged. There

appeared to have been an appropriate place for everything. Her office was small, but functional. Participant VII had a very professional demeanor while interacting with the staff, parents, and children. Throughout the observation, she was seen carrying out multiple tasks. She answered the phone, signed parents in and out, responded to the needs of childcare providers, and managed classrooms as needed. When discussing her many efforts to develop a positive reputation, and to provide a good environment, Participant VII explained, “licensing and everybody” “don’t see that I work hard. They don’t see where my heart is a lot of times.”

While performing the many tasks, it was clear that Participant VII was overwhelmed. She would often look at her watch, and worked at a very fast pace. During the observation, she explained, “it gets tough sometimes, but it has to be done. I just have to do it without thinking about it. Otherwise, it can become overwhelming because I do it all.” Later, during the interview, in further describing her role as an administrator, Participant VII explained, “basically, we do a lot of resolution, the administrators do. We resolve a lot of problems and issues. The teachers are the ones who have to deal with it on a day-to-day basis. So I need people who are stronger than me. You really need people who can think on their own, who can pull from their education, and who can make good, informed decisions. I don’t need followers; I need leaders in those classrooms.” She described what her idea function would be in stating, “um, I think that I would have uh, it would be more of a relief if I did not have to work in the classroom. I would much rather prefer to take care of all of my administrative tasks from my office, and be more of a support in the classroom with the teachers.”

When asked to describe what her experience has been with most of the childcare providers she employed in terms of performing in their function, Participant VII replied, “oh wow, you know they, everybody comes in with, everyone comes in or starts off with a desire to

learn and with a sincere heart and a love for children, and they all seem to have an interest in your vision for your center. They're enthusiastic, they're on time for work, uh, and they're ready to, to do whatever it is that you ask them to do. And some of them are will even go beyond that because you ask about their level of creativity. You ask about things like that in the interview. Um, I, I even go as far as having them to bring me a sample lesson plan. Some of them, I've even had them to come in and I've asked them to be prepared to do a sample lesson so that I could see how they interact with the children. But once they really got into the job, um lesson plans aren't turned in, they're no longer punctual, they're, they're needing to leave throughout the day. Their performance, it just got to the point where it's unbearable, it's poor. Walking into a classroom, and the teacher doesn't know that you're coming through the hall, the children are up tearing books, destroying equipment, and she's sitting there um, I guess on social media, or texting. Um, walking into a classroom and, well walking into my center, walking into my center with um, a bag of breakfast in the morning and you're gonna clock in and sit on the clock and eat breakfast. And these parents have paid for you to come to work and be ready to work."

While discussing a particular former employee, Participant VII explained, "I may have had an incident, especially in one classroom, um, I may have had an incident at least once a month, which is too much. Sometimes twice a month." She later added, "so that's the worst, having to try to put the pieces together and defend someone uh, which is your teacher and you weren't in the classroom. And then a lot of times, um, the explanation that you put on the incident report from that teacher is very vague, and it's questionable even for me because, were they being supervised properly?" In describing this, she explained, "I think that's the worst; feeling as if, the person that you've hired is not doing what they're supposed to do to protect and love on those children, and having someone from the outside come in and wanna know why

there's so many incidents in this particular classroom, um with children, or a child in particular.” She added, “and sometimes, you'll get a worker (state official) that's um, it, it's not that they're lenient, their, they understand, um, and, and sometimes they'll give you, they'll know from your track record that you're usually good with paperwork and that's what they know about me. Um, and sometimes they'll have a lil counseling session with me to find out what's going on and I've had them to advise me to let certain staff go. Um, and sometimes I listened, sometimes I didn't.”

When asked why she sometimes chooses to not take heed of the advisement of a state official, she explained, “Wow, because finding another person to work is hard. Letting someone go the day of, if you don't have anybody to come in, what do you do? Um, subs are not as plentiful as they are in the school system. And if you are a small center, uh, having more than enough people on staff can really destroy your budget, and you can't afford to have more than the staff needed in the center at one time.” She later added to this by describing a situation in stating, “you may have a staff person that you may not be very pleased with their performance but they may be dependable and they show up for work every day. And then you know that person too. So you know what they're capable of as opposed to bringing someone in that you don't know. You don't know if he or she is really going to show up for tomorrow or not or if they're going to stay all day. At least you know that the person that you have, they may not be the best fit for your center based on your vision, but there are certain qualities about them that you can depend on and being in child care, having someone that you can depend on means a lot, a lot.”

When describing how she addresses employees who fail to comply, Participant VII explained, “um, I think for me, I try to find out what's working, what's not working, what's causing this behavior, uh, also, um I, I guess thinking about them, and their responsibility, most

of them have children of their own, and obligations so, I'm, I'm considering all of these things when ultimately, I should not. Those things are personal, I should be just looking at it from the business standpoint. and that's the place where I am now. I think a lot of times too, it's easier to allow someone to terminate themselves because if you haven't kept a good record of you needing to counsel them, or different things that they have not done, you fall into a place where you may have to pay unemployment benefits for this person, and most childcare centers don't wanna do that." She also explained, "my experience is that most of them just want a job. And I have told them before, this is not just a mall job. This is not just a job in a fast food restaurant; you're caring for people's children. That's just my experience. And that's not to say that everyone who doesn't have a formal education in early childhood education acts in the same manner."

In discussing the education and training of her childcare providers, Participant VII stated that the majority of the childcare providers who perform poorly, are those who have "mostly high school diplomas." She added, "you have to have at least a high school diploma, and in most cases have a willingness to learn and to work with children. So for the most part, owners of childcare centers will hire you." When asked about options that are available for childcare providers to obtain additional education and training, Participant VII explained, "um, so basically, they can get a free education and still get paid at the same time." She added, "And um, it's puzzling that everyone says yes to these things in the interview, but once they actually get on the job, and their thirty days, or sixty days into their position, however many days you must be working in order to qualify for, um free tuition assistance through the job, through the center, um at that point, they don't have time to do it. Or they'll if there's a computer in the center that they can use, um, it just happens that on their lunch, or at that time, they have something that they

need to do, somewhere that they need to go. Um, which causes them to leave off the property and not be able to go in for an hour a day to dedicate themselves to the online program.” She later explained, “and if your center has certain requirements, I honestly believe that they feel as if when it comes time for them to meet those requirements, they’ll just quit and go somewhere else.” She then added, “anyone can get a job. They know the childcare centers are always hiring.”

When asked why she believes many childcare providers choose to not further their education, or obtain relevant training, Participant VII replied, “I, I think that, to be honest with you, I think it’s too easy to get a job at a childcare center. And um, I think that everybody knows that you don’t have to have, uh an Associate’s degree, or a childcare, um early education diploma. Which is different than just a high school diploma.” The participant added, “And a lot of times childcare owners are forced to hire people who only have high school diplomas because of what it, the rate of pay to hire someone who has the levels of education that we want in our center.”

Participant VII described her own situation in stating, “I have a teacher who has an Associate’s degree and I have one who has a Masters degree, and it takes everything that I have to, that I bring in, my revenue to pay them. And it really took everything in them um, to actually work for me at the rate of pay which is double digits per hour, but of course, that teacher with a Masters degree, she has worked in a school system before. She can go back at any time. She is certified. What I’m paying her is nothing compared to what she’s use to making, and even the teacher with the Associate’s degree in early childhood education, um, I’m sure that she can go to a center who has more technology, uh a center who’s a little bit more modern; a center who has more policies and procedures in place because they’ve been around a lot longer, or maybe

because they're a franchise center like a KinderCare or something like that." She later added, "I've always, especially since they've been there, really appreciated the teachers that I have now. And appreciating what they can bring to the center because I actually brag on them. Somebody calls me on the phone and they want our rates, and I tell them, I say, 'well, you know, you can shop around, but I don't think you're going to find this at any other center'."

When discussing accreditation systems, which is used by centers such as KinderCare, Participant VII stated that she believes that utilizing such a system "would help to pull in a better quality of people overall; just being realistically." In addition to attracting better qualified childcare providers, she feels that such a system "would also validate the cost of tuition." She added, "the more you charge; it doesn't matter if you have a few or many; the more you charge for childcare a week, the better the position is of the center. With that, you're able to hire people who have higher levels of education." In addition to this, the participant stated, "And I want to see the center grow and develop, not just so that I can benefit financially from it, but so I can pay them more money so they'll stay. Because I want to keep the teachers with education in my center. I don't want to lose them, and I've thought about it. If they were to quit, am I going to have to go back to the same kind of teachers that I had before. And I said, I'm not going back to those kinds of teachers." In comparing the government regulated, Stars rating system that she is participating in, to accreditation systems, Participant VII explained, "it's probably somewhat similar to the accreditation, but it doesn't have a whole lot to do with how much education. They can get that CDA and not go to a bachelor's, and you can have a five-star center." The participant stated that the Stars system is more focused on contents in the classrooms, and how each classroom is sectioned off for designated areas (e.g. science station, or reading area). The participant also explained, "some of the benefits the networks provide may also be in the

accreditation. But the accreditation would be better for you in the beginning, and in the long run than the affiliation.”

When asked why she believe most administrators are not aware of, or do not inquire about systems such as accreditation, she replied, “a lot of times we’re only aware of what licensing says we have to have. And sometimes between staffing and that, if you tell people what you have, staffing is one of the major; it’s a benefit and it’s a downfall. Not having to worry about all these staffing issues we probably could extend ourselves past the minimum requirements that licensing has. I think if we didn’t have to worry about staffing issues it wouldn’t be so hard for childcare owners to comply with all of the licensing regulations. But because staffing is such a problem because, we don’t have a set criteria of really what kind of people we should be hiring outside of the fact that they need to have a clear background check and only clearance really of any type of activity involving abuse and neglect. It leaves us the opportunity to be able to decide if that person has a history of theft. You know if you want to hire them because you think they’re a good person and they haven’t had an abusive situation, you can hire them.”

Participant VII continued to explain her experience in stating “African-American centers we do have it hard. We have to, there’s so many things out there that’s available to childcare owners and directors that we don’t know anything about. There are all sorts of ways to improve your center, there are all sorts of financial, there’s a lot of stuff out there that we don’t know about. And it’s weird, cause how do they find out about it and we don’t know about it; for instance, this pilot program that the state is doing for four year olds. And I like the directions it’s going in, I do, they did not make it a requirement for all childcare centers to participate either directly or through partnership. They made sure that the financial gain of participating in the

pilot program went to the centers that had three, four, and five stars. Most African-American centers or African-Americans who own childcare centers don't have three, four, or five stars."

When asked why she believed most African-American owned childcare centers have lower rankings, she explained, "well, for the most part, most of our parents are low income. And they're price shopping opposed to actually enjoying the experience of looking for a childcare center for their child. So with that being said, most African-Americans will have larger childcare centers with staff persons who have less education and they have centers who are full to capacity and that owner may be making pretty good money but as far as the quality in there. It's not there. Then, on the other hand, you have some centers that are owned by Caucasian-Americans and they may be in a new building, a more renovated building with lots of expensive equipment, doesn't necessarily mean that they're doing anything with the kids but they're able to get those stars because they can start off at a higher price point. The income levels of their parents are going to be higher so immediately they're going to make more money."

In order to improve the quality of her own childcare center, Participant VII plans to further her education in order to "become a better teacher and understand the process of early childhood development. She plans to continue to serve as the administrator of her center, and to continue to ensure that the educational and training needs of her childcare providers are met. Participant VII hopes to become a five-star center within the next five years. She also hopes for her center to become accredited in the "near future."

Composite Thematic Textural-Structural Descriptions

Moustakas (1994) suggests utilizing the Individual Textural-Structural Descriptions to configure a Composite Description of the "meanings and essences" of the lived experiences, to signify the group as one (p.121). Therefore, this section utilizes the data collected from each

participant to provide the Composite Thematic Textural-Structural Descriptions. In building the Composited Thematic Textural-Structural Description, it was evident that though participants' Individual Textural-Structural Descriptions varied to some extent, data collected from participants were found to be more parallel than not.

All of the participants in this study are African-American females ranging from the ages of thirty-one to fifty-eight. All, but one of the participants are married, and all but two participants have children of their own. Most of the participants' highest level of education is a high school diploma; aside from three participants (with two being administrators, and one being a childcare provider) who have earned Bachelors degrees. Six out of seven of the participants began working as childcare providers at very young ages. For example, some started as early as their teenaged years. Participants entered the profession due to different circumstances. Some entered because they enjoyed interacting with children, while some entered in hopes of developing a progressive career. Others began working as childcare providers because they simply needed a job. However, regardless of their reasoning for entering the childcare industry, participants all stated that they overall appreciate working with children. This is also despite the complexity of their occupations.

Participants' Functions

All of the participants in this study found their roles to be quite overwhelming. Childcare providers explained that the ability to multitask is a must in their occupation. During the observations, participants in this study were seen carrying-out multiple functions while managing their classrooms. For example, one childcare provider was expected to listen out for the phone in the event that the administrator was unavailable, while also having to supervise and care for children in her class. Like the childcare providers, the administrators in this study were also

overwhelmed from serving in multiple functions. During the observations, all of the administrators appeared to be scattered and unfocused while completing tasks. For example, one administrator was addressing issues with documentation, when she was pulled away to assist a childcare provider with managing a child who was misbehaving.

While discussing their thoughts on being called away to assist in classrooms, administrators explained that they should not have to “stand over a teacher.” Administrators in this study expressed that they would actually prefer childcare providers who are capable of working independently without seeking frequent direction. For example, one participant explained, “If I’m not there, I need somebody who can handle it just as if I am there. I need someone, you need people who can get the job done and do it right.” Administrators are often afraid to fully entrust their staff with the daily responsibilities of operating the centers. Therefore, administrators have a tendency to remain at the centers from open-to-close. Administrators confirmed that they only leave during business hours to address pertinent needs of the childcare centers.

Participants reported that their responsibilities frequently result in long work hours, which can sometimes interfere with personal matters. However, overall, participants accepted that having to sometimes work long, and inflexible hours is a part of their jobs. To address the issue regarding long hours, childcare providers must have contingency plans in place. For example, one participant arranged for her mother to receive her children from school as needed. Another participant arranged for her husband, or her sister to pick up her children from daycare. One participant who does not have any children of her own, brings extra food and drinks to work in anticipation of long hours. Though childcare providers often work long hours, it was found that administrators work the longest hours, as they open and close the centers and are also

present during hours of operation. Frequent, extended work hours may lead to mental, emotional, and physical exhaustion. This in turn, can impact the quality of childcare workers' performance.

Attitudes Towards the Occupation

In describing their occupations, the group's consensus is that the day-to-day experiences are often "challenging", "stressful", "frustrating", and a "struggle." Participants explained that their functions are multifaceted and can sometimes become quite overwhelming. Each of the participants explained that their jobs entail a lot of time, energy, and effort. However, participants explained that people often think of them as babysitters, despite their actual day-to-day functions as it relates to caring for children.

All of the participants agreed that they play a critical part in the cognitive and emotional development of children. Participants agreed that in many ways, they are responsible for children's overall outcomes (e.g. cognitive, emotional, physical/safety). Participants reported that because of their level of involvement with the children, their attitudes are that they, themselves are just as much of parents to the children as the biological parents are, which participants sometimes found frustrating. Childcare providers in this study reported that due to lack of support from parents and in some cases their own administrators, they often feel unvalued and taken for granted.

Because of participants' close involvement with children, and the various components of their occupations, their daily experiences can vary. When asked to describe both, a good and bad day, each of the participants' responses explained that the daily outcomes are dependent upon the children's behaviors and attitudes. For example, participants described a good day as being a day when the children are well-behaved and everything goes as planned. Whereas, a bad day was

described as being a day when the children are problematic, misbehaved, or get if they get injured.

Intrinsic Rewards

Because children are temperamental, participants explained “you never know what the new day will bring” and “every day is different.” However, though sometimes difficult, participants agreed that their roles are very rewarding in the sense of interacting with children and providing them with knowledge, care, and love. Though different circumstances brought each participant to serve in their function, they all believe that in order to be effective childcare providers, there must be a “love for children” and that providers “must have a passion for the kids to be successful.”

Even when faced with the everyday challenges that are associated with their jobs, participants each expressed that the delayed gratifications are worth overcoming the obstacles. For example, all of the participants explained that they are most content when they are able to get through to, or transfer knowledge to children who were not easily reached. Participants stated that they enjoy hearing success stories of current and former students, knowing that they contributed to the children’s success. For example, one participant explained, “I have some that are, when I say excellent, they are doing excellent and to say that you took part in that, it makes you feel good.” In addition to interacting with and providing care to children, participants also agreed that helping struggling parents also provided an intrinsic reward. Participants understand that the childcare services they provide, allow parents to participate in the workforce, and in turn, support their families.

Participants agreed that the intrinsic rewards are greatly valued. It was confirmed that in addition to having adequate education and training, in order to be an effective childcare provider,

individuals must enjoy working with, and caring for children. Caring for children requires compassion, attentiveness, responsiveness, and patience. Therefore, one can postulate that these attributes are more likely to be present if individuals have an interest and true desire to work with, and care for children. However, though participants reported having a “love for children” several of these attributes were absent. These absences were associated with factors including: occupational burnout, low wages, the environments in which participants work, and limited relevant education and training.

Wages

Childcare providers in this study reported that they are extremely dissatisfied with the minimum wages they earn. Childcare providers agreed that low income is a prominent disadvantage associated with their occupation. Every childcare provider in this study reported earning \$7.25 per hour. However, when speaking with one administrator, it was stated that some of the childcare providers employed at her center (including one who participated in this study) earn more than \$7.25 per hour. Childcare providers and administrators alike, feel that childcare providers receive inadequate incomes.

Most attitudes were that the daily tasks of childcare providers go beyond what the childcare providers’ in this study, wages reflect. For example, childcare providers explained, “they don’t pay me enough for this” or “we get peanuts for what we do.” Participants’ consensus was, “we are just not babysitters.” All of the participants, including administrators, agreed that childcare providers are significantly underpaid considering their day-to-day functions and the critical role they play in children’s lives. Childcare providers expressed that the low wages earned, often impact the way that they are able to function in the classrooms.

Participants also reported that the low wages earned results in stresses outside of the workplace such as their inability to fully support their families. Each of the childcare providers who participated in this study stated that they are struggling to maintain. Participants explained that they are able to get by with having restricted budgets, combining incomes with spouses, working side jobs, and/or relying on government assistance. Childcare providers expressed that the significantly low wages make them feel undervalued and very frustrated. When discussing their wages, several participants became emotional and began to cry. However, some participants explained that they have learned how to budget and survive, as they are accustomed to financial hardship. Most of the participants were low income prior to gaining employment as childcare providers.

The administrators, who have also served as childcare providers, similarly expressed dissatisfaction with their inability to afford to hire high quality childcare providers, or to adequately pay the childcare providers they currently employ. Administrators explained that they are often forced to hire individuals who only have high school diplomas, are underqualified, and sometimes no relevant experience due to their inability to pay above the minimum wage. The administrators' consensus was that the poor experiences they have had with employees, were all childcare providers whose highest level of education were high school diplomas. It was explained that "a lot of them are just not professional." On the other hand, the administrators also stated that there are some cases when childcare providers with only high school diplomas, complete relevant courses and training, and perform well in their functions. Participants feel that wages can affect performance. For example, one administrator explained, "and a lot of times when you pay people more, people tend to be a little bit happier, and they tend to want to work a little bit harder." Most of the participants felt the same way.

Though administrators seemed discontent with childcare providers' wages, they did not have the same level of "sadness", or "hurt" as the childcare providers as it pertains to the subject of low wages. Administrators seemed to be more accepting of the low wages as they are not as directly impacted as the childcare providers in this study. When discussing how childcare providers are reported as being one of the lowest paid professions, one administrator stated, "I don't know that we're the lowest paid, but we do the most work." Another administrator agreed that the wages are low, but explained that as long as the parents are low income "we have to kind of work with that." However, the third administrator in this study explained that a lot of the larger childcare centers earn high revenues, but stated that it is common for some administrators/owners to pocket most of the government funding and earnings, rather than to actually improve the centers, or adequately pay the childcare providers on staff.

Behaviors, Actions and Detriments Towards Children

Though participants have taken child development courses, and considered them to be helpful, the childcare providers equally expressed that they, as well as some of their colleagues, do not always demonstrate positive behaviors (smiling, hugging, or being responsive) when interacting with the children. While observing each of the participants, seeing them smile while interacting with the children were rare occurrences. Childcare providers were often found to be dismissive when interacting with the children. There was also limited physical contact made with the children (e.g. hugging, holding hands, touching shoulder). Children were often ignored by the childcare providers. Children who were considered to be "too talkative" or "too active" were often yelled at, or simply overlooked by the participants. However, when participants were unable to ignore the children's behavior, the children were unreasonably punished (e.g. given long periods of timeout, or prohibited from interacting with other children). During one

observation, a child was seen being mishandled by the childcare provider. For example, the child was aggressively pulled by her arms and forced to turn her back to the class, while facing the wall.

Each childcare provider in this study expressed that they are sometimes overwhelmed when interacting with the children. Therefore, they have each developed their own method to cope with the children's poor behaviors, or "constant needing" and to manage their own levels of stress. This included actions such as ignoring the children, leaving the classroom, hiding out in a closet, taking medication, and putting ill-behaved children in timeout (for the entire day).

During the observations, all of the childcare providers (including one administrator who also serves as a childcare provider) seemed to view the researcher's presence as an opportunity for relief. This became evident as participants took advantage of the researcher's ability (though unlawful) to supervise the children as they, themselves slipped away for a few moments. The participants did not mind that the researcher was a stranger, and instead perceived their actions as leaving the children with another adult, regardless of the potential consequences. Each of the childcare providers left the researcher alone with the children for the amounts of time ranging between three and twelve minutes, sometimes leaving on multiple occasions. The administrators who participated in this study appeared to recognize that they have employed several inadequate childcare providers who do not properly supervise the children. This became evident as administrators discussed how they are too afraid to entrust their center with staff members. Therefore, administrators tend stay on the properties as long as possible during business operation hours.

Another detriment realized during the observations were unsanitary practices. During one observation, children were allowed to drink from the same container provided to them by the

childcare provider. During another observation at a different center, children's soiled diapers were changed using the same gloves. It should also be noted that none of the centers required visitors (the researcher included) to remove their shoes, or to wear shoe coverings when entering the rooms. Failing to require these actions could result in sickness for younger children who are placed on the floors to play.

Adding to the safety concerns of negative behaviors, poor supervision, and unsanitary practices, all but one childcare center allowed the researcher to enter the facilities and classrooms without asking for identification, and a background check as required by state regulations. Most participants were cavalier with following this safety protocol. However, once arriving to the classrooms, the researcher provided the documents prior to beginning the study. Failure of ensuring that all guidelines are met could be due to the centers' lack of structure and organization.

Curriculum and Resources

In this study, none of the childcare providers seemed to follow set curriculums. Rather than educational instructions (e.g. practice writing letters, repeat ABC's, count to ten, etc.) children were provided with general directions (e.g. "go sit down and color", or "I want you guys to play nice and stay quiet"). Students did not have uniformed books or workbooks to allow them to have unified classroom participation. For example, in two classrooms, students were given copies of single sheets torn from one coloring book. Students were given the option to color, nap, or to play quietly. Students were ultimately allowed to engage in various unrelated activities, as long as they did not misbehave. Administrators in this study explained that they allow childcare providers to use their own "understanding" or "creativity" to design lessons. However, during the observations, there seemed to be no developed lesson plans being utilized.

Childcare providers explained that they are flexible with their daily classroom activities due to limited supplies. Participants explained that due to lack of funding, there are lack of resources. Participants explained that administrators often do not provide adequate provisions (e.g. pencils, tracing paper, books, flash cards, etc.). Participants explained that they, themselves must often come “out of pocket” to obtain educational resources, which they are usually unable to do. Two of the participants have young children of their own. Therefore, when they provide resources to children at the childcare centers using their own finances, they may be taking away resources from their own children. Participants blame the lack of resources for their lack of curriculums. During the observations, the absence of curriculums appeared to contribute to the children’s lack of focus, and in turn caused behavioral issues within the classrooms.

Environment

All of the childcare centers were located in low income communities, with some being more impoverished than others. Each of the centers (except for one) visited during the study were fairly chaotic, and all but one was disorderly. This lack of organization extended to all but one of the classrooms observed. It should be noted that the one well-organized center, was the same place with the one well-organized classroom observed in this study.

Overall, the classrooms were reasonable in size, with some being smaller than others. Two of the classrooms observed did not have proper seating (e.g. desks or tables) for the children. It should be noted that these two classrooms were located within the same childcare center. All, but one of the childcare centers were well lit. The exception being a classroom in which the childcare provider opted to turn off the classroom light, and instead, use natural sunlight from a window located in a corner of the room. Most of the classrooms had visual learning aids on the walls.

During the observations, it was evident that classroom management skills were poor. Children were often seen running around the room, throwing toys and books, fighting each other, and resisting childcare providers' instructions. Most participants agreed that classroom management was an area they need to improve. In dealing with lack of resources, poor classroom management skills, and children's unruly behavior on a daily basis, participants all feel challenged by the chaos. Every participant in this study expressed that they feel greatly overwhelmed most of the time. Participants' consensus was that their roles require them to "do a lot." As a result, participants believe that maintaining order and organization within the classrooms is often impossible.

In addition to being chaotic, some participants also described their work environment as being hostile. Childcare providers stated that they have poor relationships with other childcare providers. Some also reported having poor relationships with their administrators. Upon speaking with all three of the administrators, it was realized that the lack of comradery was encouraged by the administrators. Administrators explained that they do not want their staff to become "too buddy-buddy" with each other for the sake of minimizing "mess" or confusion. However, interestingly enough, each of the administrators also stated that they and their staff are like "extended family."

In addition to being a hostile place for participants, the childcare centers also appeared to be hostile environments for the children. Children were not properly cared for. Some were left to sooth themselves as they cried, and some where blatantly ignored as they tried to communicate with childcare providers. Two participants explained that they believe their place of employment is unfit for their own children.

Childcare Providers' Education and Training

Several participants' consensus was that they are not as adequately educated, or trained as they would like to be. The majority of participants only completed twelve hours of training as required by the state. Most of the childcare providers expressed an interest in furthering their education and training to specifically assist with the improvement of their classroom management skills, and their ability to positively interact with the children. All of the participants recognized the benefits of formal training and education. Participants explained, "I enjoy learning" and "I feel that all the education that we could get to help these children is good." However, they also explained that due to high costs and financial restraints, they are unable to pursue professional development outside of what is offered by their administrators.

In addition to the childcare providers' interests in advancement, the administrators in this study expressed an interest in wanting their employees to obtain relevant education and training in order to better serve the children's cognitive and emotional needs. However, the administrators' levels of interest regarding education and training varied. For example, one of the three administrators explained that she encourages her childcare providers to partake in professional development initiatives. She stated that in addition to the assistance she provides for developmental initiatives, there are other government funded programs available to cover the costs of relevant, formal education and training. She explained that her employees are made aware of various opportunities for professional development. Another administrator ensures that the childcare providers she employs complete the state's regulated twelve hours of relevant education and training. However, she does not urge or mandate the childcare providers to obtain any education or training outside of these bounds, as she will not be responsible for the costs associated with further professional development. The next administrator does not enforce the

state mandated twelve hours upon her childcare providers. This administrator expressed that though formal education and training are helpful, she sometimes values experience more. She believes that she and her staff can train and development each other (from information obtained from meetings and other centers), as well as new childcare providers entering the center.

Administrators agreed that they have a responsibility to ensure that they are providing parents with adequate childcare services. Because of this responsibility, administrators acknowledged that they are responsible for funding the costs of state required training for childcare providers employed at their centers. Overall, the participants understood and agreed that the more relevant, formal education and training received, the higher the quality of childcare providers will likely be. In turn, the centers could impose higher fees for the services provided at the childcare centers, which can ultimately enable childcare providers to earn higher wages. However, developing childcare providers is only one aspect needed to promote higher wages.

Parents' Level of Participation

Though participants understand that the role of an effective childcare provider requires a hands-on approach, participants believe that children could further develop if parents would also contribute to developmental efforts. All of the participants reported that there is usually a lack of support from parents in terms of reinforcing positive behaviors (e.g. being polite, potty-training, completing assignments etc.) with the children, as well as reiterating and practicing the educational materials (e.g. ABC's, numbers, shapes, etc.) that have been taught by the childcare providers. Participants reported that while being home during the weekend, children often lose the skills and information that was obtained during the school week. Participants explained that in their experiences, this is especially the case for potty-training initiatives; which participants find to be "frustrating" as it often interferes with teaching.

The participants believe that many parents are “uninterested” in what is going on with the children. Participants believe that parents’ lack of interest contributes to some of the issues pertaining to participants’ inability to effectively manage their classrooms. Both, childcare providers, and administrators expressed that the children exhibit behaviors at school that they believe are learned and practiced at the children’s homes. It was explained, “if they’re play hitting at home, they’re going to play hit wherever they go.” Participants reported that some children often demonstrated violence towards other children in the classroom, and have even been heard using profane language while at the childcare centers. It was explained, “well see, we try to encourage them to listen, and um, it’s hard to get them to listen if they don’t have any structure at home.” The participants formed a consensus that the parents are responsible for such behaviors. Participants feel as though they are the only ones rearing the children, as parents’ involvement is limited.

Participants are aware that most of the parents they serve are single parents with low incomes, working multiple jobs; which in turn, may result in children’s needs being neglected. With this in mind, participants stated that they are “willing to work with parents” and that it makes them feel good to be able to help people in such “desperate situations.” The participants, being parents with low incomes themselves, have empathy with the parents whose children they provide care to. Participants have expressed that they “feel sorry for” the parents, or that they “know what they are going through” because they, themselves have “been there.” Though participants were able to relate to the parents of the children, participants also feel that parents must make the effort to promote children’s development. In terms of the children’s development, participants have explained that they believe “it starts with the parent, and it really does start at home.” Some participants even feel that parents should also be required to complete the same

child development classes that childcare providers complete in order to work together for the greater good of the children.

Attitudes Towards State Regulations

Most of the participants in this study demonstrated very lax attitudes regarding state regulations. At each of the centers in this study, state regulations several state regulations were broken. For example, children were left unattended on several occasions, and parents were not required to sign their children in and out of the facility, as required by state guidelines.

Participants agreed that it is best to follow the state regulated guidelines, but admitted to not always doing so. All of the participants expressed that they are well aware of the implications that are associated with failing to comply with the state's licensing guidelines. Administrators agreed that they are responsible for ensuring that all state regulations are being met by themselves and by their staff members.

In addition to lack of compliance with basic state regulations, participants expressed that they do not have a clear understanding of what is expected of them. Most participants feel as though the state's regulations are constantly changing, in turn making their jobs more challenging and affecting the services provided to children. For example, most participants were perplexed by a new teaching method implemented by the state. Participants explained that they were instructed by the state to "stop teaching the children" and instead to allow the children to "learn through play." Most childcare providers in this study demonstrated that they did not have a clear understanding of what was being asked of them. Childcare providers believe that they are literally not supposed to teach the children. However, administrators in this study seemed to have a better understanding of the learn through play concept. An administrator explained that while engaging in certain play activities which may require children to use their imagination, the

children can learn. She stated, “so a lot of us don’t understand that’s the concept of what they are telling us, not telling us to stop teaching them, but to teach them through play.” When particularly discussing childcare providers’ understanding of the concept, the administrator explained, “see that’s what they look at. ‘Oh, they told us to stop teaching.’ No, they told us to stop sitting them at a desk teaching them.” She also added, “so, that’s what they don’t, a lot of daycares don’t understand.” Most participants seem to be indifferent towards, or confounded by what is required of them.

Relationships with State Licensing Officials

Most of the participants reported having a “negative experience” with state licensing officials. Administrators explained that they feel “vulnerable” and “unprotected” when dealing with certain licensing officials. It was explained, “they will walk into the center and will not speak, will not even identify themselves.” “And walk straight through and then come back and want to ask questions, and I think that that is wrong.” Participants also reported being harassed by certain licensing officials who “nitpicked” in order to have something against the centers. One administrator stated, “I think that, especially, and I’m going to tell you, with every other agency that governs childcare centers, the only division that I have had an ill feeling about has been licensing. And it just depends on the person that they send. And when you talk to other people, some of them have the same experience with that same person.” Administrators explained that they have filed reports against some licensing officials, all to no avail. It was explained, “yeah, and there’s nobody to defend childcare centers.” Some participants believe that certain state appointed personnel are “harder on African-American centers.” Participants expressed that rather than viewing licensing as a system to improve the centers, they more so view it as a stressor to the operation of the centers. Participants explained that they do not mind being reviewed or

investigated by licensing. However, they do not like the manner in which they are often treated by some licensing officials.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENTATIONS, AND IMPLICATIONS

The purpose of this chapter is to summarize the procedures used to conduct this phenomenological research, which examined the lived experiences of childcare providers employed at non-accredited childcare centers, serving low income families. This chapter also presents the appropriate conclusions and recommendations which are based on the study's findings. Finally, this chapter discusses implications for practice, and implications for future research.

Summary of the Study

The primary purpose of this phenomenological study was to examine the lived experiences of childcare providers of local non-accredited childcare centers that serve low income families. A secondary purpose of this study was to explore potential influences of these lived experiences on the need for accreditation systems. This study is of great significance to the population of childcare providers, the children whom they care for, parents who enroll their children in non-accredited childcare centers, stakeholders, and policymakers. This is because, there is very little research available which closely examines the lived experiences of childcare providers employed by non-accredited childcare centers, serving low income families. Also, there are very few research studies derived from direct observations of non-accredited childcare environments.

This investigation sought to answer the research questions which includes: 1) what are the lived experiences of childcare providers at local non-accredited childcare centers 2) do these lived experiences reveal weaknesses in non-accredited childcare environments which demonstrates a need for systems such as accreditation. To answer these questions, this

phenomenological study investigated and holistically examined childcare providers and the environment in which they worked. The study sought to obtain an in-depth understanding of the day-to-day experiences, behaviors, perspectives, and attitudes of the childcare providers employed at non-accredited childcare centers.

In this phenomenological research study, participants were selected based on three factors: 1) Participant must be at least 18 years of age. 2) Participants must be employed full-time (at least 40 hours per week) at a non-accredited childcare center predominately serving low income families 3) Participants must have at least one year of experience working as a full-time childcare provider.

Participants' descriptive, written and oral communication were investigated through an analysis following the modified Van Kaam method as presented by Moustakas (1994). Interpretative data analysis revealed that participants feel negatively towards their occupations mostly due to low wages. In addition, participants were often given responsibilities outside of their functions (e.g. administrative duties) as childcare providers which contributed to occupational burnout, or feeling incredibly overwhelmed. Adding to this matter was the lack of parental support received. During the study, overwhelmed or highly stressed participants were found to be withdrawn, and less attentive to the children they provided care to. For example, participants who were visibly distressed, had a tendency to ignore and neglect children who attempted to interact with them. This often resulted in children being left unsupervised, as participants sometimes responded to the children by simply leaving the room.

Most participants in this study lacked adequate, relevant education and training, and were unprepared to effectively serve in their functions. For example, participants did not demonstrate organizational skills, classroom management skills, or the ability to develop and successfully

execute curriculums or lesson plans. In addition to this, each of the childcare centers and classrooms that participated in this study were extremely limited on educational tools and resources. As a result, participants were unable to effectively provide children with a quality education and healthy developmental skills.

The participants in this study expressed that their experiences as childcare providers are strenuous to both, their professional, and personal lives. However, participants believe that the services they provide greatly impacts the lives of both children and parents. Though participants agreed that their daily functions are rather challenging, each participant stated that they love the children and are passionate about their work. Participants in this study agreed that interacting with children was the greatest reward of their occupations.

Conclusions and Recommendations

The conclusions in this phenomenological investigation were formed utilizing the themes that emerged through the process of data analyzation. The themes in this study were found to be factors that influenced the lived experiences of childcare providers employed at non-accredited childcare centers serving low income families. It should be noted that there were eleven non-overlapping themes identified in this study including: participants' functions; attitudes towards the occupation; intrinsic rewards; wages; behaviors, actions, and detriments towards children; curriculum and resources; environment; childcare providers' education and training; parents' level of participation; attitudes towards state regulations; and relationships with state licensing officials.

Conclusion I

Based on the results of this study the researcher concluded that the daily roles of childcare providers and their administrators are often multi-layered, strenuous and overwhelming. For example, though childcare providers are responsible for caring for children, they are also given the tasks of being teachers, disciplinarians, and sometimes even playing the role of parents to the children for whom they care. In addition, childcare providers are often charged with the responsibility of managing their own classrooms, while completing other tasks. For example, one childcare provider was asked to receive parents as they dropped off children, and to maintain the sign in/sign out log, all while supervising a large group of active children. This resulted in one duty being neglected, as the other duty was carried out. For example, while receiving parents who entered the center, the participant left her students unsupervised. This could have resulted in detrimental outcomes for the children. Another childcare provider was asked by her administrator to listen out for the office phone while also managing her classroom. Participants expressed that their jobs are “stressful and overwhelming.”

Like the childcare providers, the researcher also concluded that administrators are overwhelmed, as they are responsible for serving in various functions (e.g. administrator, childcare provider, van driver, clerk, etc.). All three administrators were dissatisfied with their own lack of concentration which was due to extreme multi-tasking. In fact, administrators in this study were found to have the desire to improve the preparation and skills of the childcare providers, mostly to minimize their own workload. Administrators in this study were often pulled away from administrative functions to assist childcare providers. As a result, administrators reported that administrative duties such as completing relevant documents were

sometimes neglected. This negligence results in noncompliance with state regulations and policies.

To address this issue, the researcher recommends that administrators provide childcare providers with a clear summary outlining what their responsibilities and job descriptions are. Clearly defined roles may benefit childcare providers by enabling each to stay on task according to the agreed upon roles and responsibilities. Appropriate concessions should be made for childcare providers who are pulled away from their defined roles and responsibilities. For example, if a childcare provider is called away from supervising children in his or her classroom, another staff member should be available to immediately provide the children with adequate supervision. Both administrators and childcare providers must understand that complete and uninterrupted supervision of children is at utmost importance.

To alleviate both, administrators, and childcare providers from administrative functions, administrators may consider employing administrative assistants to aid. If this option is not fiscally feasible, developing schedules and practicing effective time management may prove to benefit administrators. For example, administrators should designate certain times to review and complete documents, or certain days to order products and supplies. This will allow administrators to be more flexible during other times. In turn, enabling administrators to complete other relevant duties in an organized, systematic way. This includes appropriately assisting childcare providers when necessary.

Conclusion II

In this study the researcher concluded that childcare providers' attitudes towards the occupation is a key component which can influence childcare providers' experiences as well as the quality of their performance. It was revealed that childcare providers often feel as though

they are the parents of the children they care for due to close interactions with the children. For example, Participant I stated “I feel like I’m the parent all the time. I feel like I’m the parent to every child in here, so you know, that’s a constant struggle.” Participant III explained, “yeah, we’re the mama from 6:00 to 5:30.” Though participants believed their functions are substantial to children’s outcomes, participants reported that due to their daily functions (e.g. providing care, potty-training, managing children’s poor behavior), and circumstances (e.g. lack of parental support, limited resources, low wages, and sometimes long hours) they often feel negatively towards their occupations, and even experience occupational burnout. For example, in describing what frustrates her about her occupation, Participant II explained “...We do really work long hours, probably sometimes overtime, and the fact that we are the first ones that they see as one, two, three, and actually newborns, I’m sorry six weeks, and nurses and doctors get paid more than us, and we’re the ones teaching the nurses and doctors basically.” Participant II also expressed that her job is physically challenging, especially with having to lift older children who are not potty-trained. In addition to Participant II, Participant IV also described her stresses in stating “we have some children that will fight, all they know is fighting...” To cope with occupational burnout, Participant IV enters and sits in a walk-in closet located in her classroom, closing the door behind her. In further describing the stresses that causes her to feel burned out, Participant IV later added that parents do not offer support with children’s progress (e.g. behavior, potty-training, and school work). When discussing parents, Participant IV explained “Yeah, they don’t seem interested in the work...” “...And then there are some moms that are like ‘that’s not important to me’...” In turn, childcare workers can often disengage, or become withdrawn while providing care to the children. It was also found that childcare providers often leave children unsupervised in order to address feeling burned out, or overwhelmed.

To help address this issue the researcher recommends that childcare administrators make childcare providers feel valued and appreciated. Administrators can accomplish this by offering assistance to childcare providers as needed, especially when it directly involves children. For example, if childcare providers are having issues with aiding ill (e.g. vomiting or diarrhea that disrupts classes) children, or managing unruly children, administrators should appropriately assist childcare providers with resolving issues rather than stating “do your job”. In addition, participants in the study reported that simply being told thank you by administrators and parents would make them feel more appreciated. For example, when discussing what makes her feel appreciated, Participant I explained “...certain parents, they come in and they’ve given me things; always showing appreciation...” Participant II stated “when my director tells me, ‘oh you’re doing a great job,’ gives me a pat on the back...” when describing what would make her feel appreciated, Participant III explained “You real reward is gonna be in heaven, but you could, uh say something or show that you appreciate what we do for your children because I know you have to know that your child was not clean like this when you brought her here, or her hair was not like this when you brought her here.”

In addition to support from administrators, encouraging and requesting the support of parents may also help alleviate childcare providers from some of the daily stresses pertaining to caring for children. For example, parents can reinforce learning and developmental initiatives when the children are home after daycare, and home on weekends. This may result in childcare providers not having unnecessary pressures, or the burden of feeling like they themselves are the children’s parents. Soliciting the cooperation of parents can be done by consistently sending forms home on a daily basis to inform parents on what was learned, what issues the child may have had during the day, what needs to be addressed (e.g. behavioral issues), and/or what

progress the child has made. In addition to this, the researcher recommends that childcare providers take the opportunity to get to know parents when possible, and open a positive line of communication. This can be facilitated when parents drop off and pick up children, or through parent-teacher activities (e.g. open houses, conferences, or initial and follow-up phone calls). Building rapport can result in collaborations between childcare providers and parents, which may relieve childcare providers of several challenges, and can also lead to successful outcomes for children.

Conclusion III

Based on the findings of this study, the researcher also concluded that wages influence childcare providers' experiences and the quality of their performance. Childcare providers in this study reported that they often feel unmotivated when performing in their functions. Therefore, participants expressed that sometimes, the bare minimum is done while caring for the children. For example, rather than interacting with the children to promote development, children would sometimes have only their basic needs met (e.g. being fed, having diapers changed, and/or being safely contained in the room).

Participants reported being distracted while at work because they are more focused on not having enough money to pay their bills. For example, during an observation Participant II explained "I'm usually on top of everything. My mind is so gone right now. My lights are about to get turned off, so I'm trying to figure that out before I pick up the kids and get back home. Otherwise, I'm on my game, unlike other people here at this center." In this study, the researcher found that participants' distraction led to children being unsupervised, or overlooked. As a result, children who craved attention were sometimes left to soothe themselves or each other. Participants expressed that their low incomes sometimes caused them to have negative attitudes

towards their occupation; which in turn, affects the manner in which the children are treated. In conducting interviews, participants expressed that children are often mistreated, or mishandled due to childcare providers' agitation (mostly caused by finances). Participants in this study confirmed that childcare providers' high levels of frustration are mostly associated with the low wages earned. For example, when describing her colleagues' behaviors, Participant II explained, "coming in in the morning and not speaking, as soon as they see the children they start yelling, screaming, the screaming is constant every day all day, mistreating the kids by handling them the wrong way, grabbing, um, just not treating them right with love and care and giving them hugs, and just because of the pay. That's the main; it's just the main, the pay."

To address the issue of low wages, the researcher recommends that administrators seek out, and take advantage of various government funding that can be obtained through grants (such as those awarded to small businesses, educational settings, for profit, and/or non-profit organizations). Additional funding can be obtained from contributions provided by stakeholders/entrepreneurs, or from small donations offered from members of the community. Taking advantage of all available resources would allow administrators to appropriate funds to improve the quality of their centers and the services provided to children. This may include providing childcare providers with resources needed to effectively perform their functions. In addition, ensuring that children have the proper tools and resources available to promote healthy learning and development is essential to develop high quality childcare centers. For example, the classrooms of Participant III and Participant IV did not have proper seating (e.g. desks, or tables and chairs) for children. As a result, children were forced to sit on the floor.

By utilizing all available resources, and funding options, administrators may also be able to hire better qualified childcare providers, adequately educate and train current employees, and

appropriately offer higher wages. For example, because the costs of education and training initiatives, and tools and resources can be supported by various grants and scholarships, childcare providers are able to become better prepared, and administrators are able to save money. In turn, money saved can be allocated to childcare providers through higher wages. Also, administrators can utilize grants to specifically provide childcare providers with stipends that can go towards their wages.

Though funding can alleviate administrators of financial burdens, administrators often do not have the skills or the time to locate, and apply for additional funding. Because funding is a critical aspect of the development and sustainability of quality childcare centers, the researcher recommends that the state partners with reputable grant writing agencies, or directly provide state licensed childcare centers with assistance from state appointed grant writing officials. These officials can be used to aid administrators in both locating and applying for funding offered through various grant programs.

In addition to this, the researcher recommends that stakeholders and administrators address childcare providers' low wages by making initiatives to inform parents of resources and services that can afford parents with better employment opportunities. For example, Louisiana Workforce Commissions (LWC) offers various resources through the Office of Workforce Development. These resources and services include: basic skills enhancement programs; job readiness skills courses; job counseling; job placement assistance and referrals; training scholarships, employer-based training; education and curriculum information; financial aid and planning; etc. In addition to this, LWC partners with several other agencies to offer grants to assist low income individuals with their livelihood. For example, the Community Services Block

Grant (CSBG) offers low income individuals assistance with transportation, housing needs, utility costs, supplemental nutrition, money management skills, etc.

Helping parents to obtain employment that maximizes the use of their knowledge and skills, and offering high quality childcare services may enable childcare centers to raise the cost of tuition. In turn, this can result in higher wages for well-qualified childcare providers.

Conclusion IV

Based on the results of this study, the researcher concluded that there are several frequently occurring negative behaviors and actions towards children by childcare providers, that can greatly, negatively impact the health, safety, and development (cognitive and social) of the children. This includes: lack of attentiveness, lack of supervision, lack of responsiveness, and lack of encouragement towards children. During the observations, participants rarely demonstrated positive behaviors, as identified by NICHD (2006) towards children such as smiling, or being encouraging. In addition, participants made very little physical contact with children (e.g. hugging, or holding hands). As a result, the researcher observed that children were not provided with adequate emotional support, and were also not provided with self-esteem building practices that could be used to strengthen children's confidence. For example, children who attempted to show childcare providers what they have built with blocks, colored on sheets, or a picture in a book were dismissed rather than encouraged. Participants in this study did not praise children for their efforts, accomplishments, or positive behaviors. The researcher found that some childcare providers were aware of their own negative behaviors towards children, as well as the negative behaviors of their colleagues. For example, participants acknowledged that they often disengage when interacting with children, even when children directly seek attention from them. For example, Participant IV expressed that she frequently goes into the closet or to

the restroom and remain there until she collects herself, even though the children ask her to rejoin them. This behavior was also observed with other participants who dismissed children who tried to talk to them, or show them pictures that were colored. Participants also expressed that they are displeased with the manner of which some colleagues are often seen behaving towards the children. For example, two participants explained that their place of employment is unfit for their own children because they believe children are treated poorly at the centers. Participants reported witnessing children being ridiculed and sometimes physically abused by other childcare providers. For example, Participant IV stated “I have seen some things that I didn’t like. I have witnessed things that I didn’t like while I was helping with the children, like if they spilled their milk, or if they drew a picture, the teacher would snatch the paper saying ‘it’s ugly, I don’t like that.’ I’m going like, no, you know, and I have voiced my opinion to that teacher and let her know, ‘no, you don’t do that’.” Participants expressed that they believe negative behaviors and actions are due to the fact that childcare providers are often overwhelmed from their many responsibilities, in addition to children’s poor behavior (e.g. fighting with each other, running around, or not doing what is asked of them) in the classrooms. Though some participants were aware of their own behaviors, others were oblivious to their negative behaviors and actions towards children.

To address the issues of negative behaviors, and actions towards children by their childcare providers, the researcher recommends that childcare providers receive relevant education and training (e.g. child development, child behavior, and classroom management skills) to teach them how to interact with children in a positive and effective manner. It may be particularly helpful for childcare providers to be trained in child behavior, and classroom management skills. The researcher recommends that administrators ensure that childcare

providers are equipped and prepared to teach and care for children. This should be done prior to childcare providers' employment, or shortly after. Having appropriately developed childcare providers can create positive experiences for both children and childcare providers. For example, properly trained childcare providers may be more likely to demonstrate positive behaviors towards children, making children feel safe and confident. Also, well managed classrooms and encouraging environments may result in less disciplinary issues among the children.

To avoid detriments that may be caused from children being unsupervised, or mistreated, the researcher recommends that administrators take appropriate actions in a timely manner when childcare providers' behaviors are in violation of regulations. To promote positive behaviors among childcare providers, the researcher recommends that administrators inspect their childcare centers regularly, check classrooms, talk to both children and parents about their experiences at the centers, and have open discussions with childcare providers. This particularly includes discussing challenges that childcare providers may experience that could lead to negative behaviors towards children.

The researcher recommends that administrators inquire about, and privately discuss specific circumstances with childcare providers who are involved in incidents. Administrators should also speak with everyone regarding general issues during weekly, or monthly staff meetings. The researcher also recommends that administrators conduct both employee evaluations and counseling sessions with childcare providers. Regular evaluations can help childcare providers to become more conscious of their behaviors and actions towards the children for whom they provide care. Regular evaluations can also be a way of documenting and monitoring childcare providers' records (e.g. progression, or regression). In turn, the researcher recommends that administrators consistently and directly utilize childcare providers' evaluations

when taking appropriate actions (e.g. write-ups, raises, and/or termination). Counseling sessions can be a method of identifying and addressing childcare providers' strengths, weaknesses, and areas that may need improvement. Counseling sessions can also serve as teachable moments for administrators. Through counseling sessions, administrators can have the opportunity to guide, advise, and instruct childcare providers as needed. Regular evaluations and counseling sessions are relevant as participants reported mostly being counseled only when there are problems, or new policies being implemented.

Conclusion V

In conducting this study, the researcher found that the mental and physical state of childcare workers can have profound effects on the experiences and behaviors of the workers. Though participants enjoy interacting with children, some disclosed that there are internal challenges that sometimes interfere with the performance of their daily duties. These challenges include mental, and physical health. For example, three participants who serve as childcare providers reported suffering from illnesses including depression, anxiety, and migraine headaches. Two of the three individuals explained that they believe their occupation contributes to their illnesses. For example, one participant explained that her environment is sometimes so overwhelming that she must use calming practices when interacting with the children for whom she provides care. These techniques include going to the restroom, taking medication, or locking herself in the closet to manage her high levels of anxiety. When discussing how putting the children in time-out was ineffective, Participant IV explained "that's why I had to think of something else, the paper. Sitting in the close and said, 'oh, okay, let me rest my nerves'." She added "I have learned to pray and ask God for strength. Even though I do that, but with this you need extra..." Participant IV later added "...they get on your nerves, give you a little headache.

You have to take a Tylenol.” Another participant explained that she was diagnosed with depression shortly after entering the profession. Therefore, she believes that the occupation may have been a contributing factor that led to the diagnosis. The participant who was diagnosed with migraine headaches explained that she keeps the lights off in her classroom to help prevent migraines from occurring.

During the observations, and through conversing with the childcare providers, it was evident that their illnesses often impact the way they interact with the children. For example, participants who suffer from mental illnesses were found to be more withdrawn, inattentive and unresponsive when interacting with children. Which in turn, can impact the children’s experiences and outcomes (e.g. if and how they are taught, if they are supervised, and/or how they are treated). Administrators are responsible for ensuring that their employees are mentally stable, physically capable, and suitable to work closely with children. To do this, administrators should recognize and address signs of unmanaged mental, or physical illnesses. Otherwise, the wellbeing of children may be compromised.

The researcher recommends that administrators make all possible efforts to ensure that the needs (e.g. mental, physical, and/or emotional) of childcare providers are properly addressed. The researcher recommends that this is done by first acknowledging the mental and emotional strain of the occupation, and then providing childcare providers with information regarding outreach programs, or other forms of free, available counseling. The researcher also recommends that administrators serve as strong support systems for their employees. The researcher recommends that this is effectively done by completing an end-of-day, or end-of-week debriefing with childcare providers as applicable. This may allow administrators to learn of any struggles childcare providers may be coping with in terms of their functions, or any other relative

issues. During this time, administrators should ask childcare providers for suggestions that may improve their experiences.

Conclusion VI

The researcher concluded that non-accredited childcare centers that predominately serve low income families have a tendency to lack educational curriculums and adequate resources to facilitate children's learning and development. During this investigation, none of the participating childcare providers followed a curriculum while teaching, or interacting with the children. Participants explained that they often have to be creative and flexible while teaching their classes. During the observations, no focus was placed on teaching the children material that should be known prior to entering kindergarten (e.g. alphabets, counting, patterns, etc.).

Childcare providers in this study expressed that the lack of resources is what most affects their teaching methods. The researcher postulated that lack of curriculums and educational resources (e.g. books, flashcards, pencils, paper, building blocks, etc.) resulted in behavioral issues among children. These behavioral issues included children fighting one another, running around the classrooms, and failing to follow instructions given by their childcare providers. Because of the lack of curriculum and limited resources, children were left idle and bored which led to them finding ways to entertain themselves. Based on the observations, it was evident that the absence of curriculum and inadequate resources led to unproductive activities and negative behaviors involving both children and childcare providers (e.g. yelling at children, reading the newspaper, or using cellular phones). In turn, children were not provided with courses leading to quality education and healthy developmental practices.

To address the issue of limited resources, the researcher recommends that administrators seek government grants and private funding which can provide subsidies to address the needs of

the childcare centers. The researcher recommends that administrators and stakeholders participate in fundraising events in order to obtain additional resources. These events can be hosted within the communities of the childcare centers, and the participation of the children and parents should be strongly encouraged. Many childcare centers provide transportation for children using the centers' vans. These vans can also be utilized to provide transportation to individuals who are willing to participate in the efforts to raise funding for the centers.

To address the issue of lack of curriculum, the researcher recommends that administrators require childcare providers to complete relevant courses and training initiatives that will prepare them in areas including curriculum development, lesson planning, instruction, and classroom management. In addition, the researcher recommends that administrators observe childcare providers in the classrooms in order to provide them with guidance and relevant feedback that may strengthen areas of weaknesses. The researcher recommends that administrators implement these actions before, or shortly after employing individuals to serve as childcare providers. It should be noted that accreditation systems assist participating childcare centers with implementing and maintaining all of the above training components discussed. Utilizing accreditation systems can be a viable option for administrators and stakeholders who wish to improve childcare centers, but do not know how, or where to begin.

Conclusion VII

The researcher concluded that environments of the childcare centers can influence childcare providers' experiences, as well as the quality of the services provided to children. All, except one of the childcare centers and classrooms observed in this study were disorganized and chaotic. During the observations, the researcher observed that most classrooms were filled with trash and other distractions including toys spread throughout floors. In addition, most of the

environments of participating non-accredited childcare centers serving low income families did not foster or promote quality childcare services. For example, two of the classrooms observed in this study did not provide students with desks or chairs and tables. Instead, children were forced to sit on the floors. As a result, children were not provided with traditional, or basic educational approaches (e.g. tracing letters, writing numbers, completing worksheets, etc.). Children were given the options of playing with toys, coloring, or taking a nap at random times. Therefore, children's educational and developmental needs were often found to be neglected.

The environments of childcare centers in this study did not appear to be very motivating, and instead seemed a bit discouraging to both childcare providers and children. For example, childcare providers were rarely seen smiling. Participants reported having tension between themselves and colleagues (administrators and other childcare providers) due to lack of support and teamwork. As a result of the strain, childcare providers expressed feeling as though they are working in hostile environments. Such negative settings were found to result in participants being frustrated, and uncomfortable. Perhaps due to childcare providers' displaced aggression, the researcher observed that children were often yelled at, mishandled, ignored, and/or left unsupervised. While some children behaved poorly, others sat quietly without interacting with each other, or with their childcare providers. Based on participants' behaviors, it could be postulated that some of the children were withdrawn due to fear of doing something wrong, or fear of punishment.

To address environmental issues, the researcher recommends that administrators first improve the culture of their organizations. Administrators in this study admitted to discouraging, and even frowning upon close relationships between their employees. As a result, rather than behaving as a team, childcare providers had a tendency to work more independently, and

ultimately seemed to fend for themselves. This approach seemed to have dampened the relationships between the childcare providers. To build workplace comradery, administrators should consider developing or utilizing effective team building initiatives. This may consist of something as simple as taking field trips together with the children, participating in community service activities (e.g. soliciting school supplies, or participating in clothes, food, or toy drives for low income families), or attending professional development workshops together. Engaging in such activities as a team may lessen environmental tensions, and enable childcare providers to build a sense of community. This sense of community can help childcare providers to understand that their work serves a greater purpose, which is to ensure and secure the well-being and development of the children in their care. In understanding this, childcare providers may be more eager, rather than reluctant to help each other, which in turn can help provide quality services to the children.

Also, to improve the environments of non-accredited childcare centers serving low income families, the researcher recommends that policymakers and stakeholders require administrators to appropriately (as required by children's ages) furnish the basic needs of all classrooms. This includes proper seating (e.g. desks, or tables and chairs), and educational tools and resources. Ensuring that basic educational needs are met can help foster a positive learning environment that can promote adequate education and healthy development among children. The researcher also recommends that administrators inspect classrooms to ensure organization and cleanliness. Having classrooms that are free of clutter and distractions may also promote a positive learning environment.

Conclusion VIII

The researcher also concluded that childcare providers' level of relevant education and training can impact their experiences and the quality of the childcare services provided to the children in their care. Most of the participants' highest level of education was a high school diploma. In addition, most childcare providers had only taken twelve hours of relevant training from online institutions. Participants' expressed that the lack of resources in addition to limited education and training was results in poor classroom management skills, inability to develop and execute curriculums or lesson plans, negative behaviors and attitudes towards children, and other detriments (e.g. leaving children unsupervised, mishandling of children, or unsanitary practices). These issues were also realized by the researcher during observations. The researcher observed that the children did not receive quality care. This especially relates to receiving quality education, and exposure to healthy developmental practices.

To address these concerns, the researcher recommends that policy makers, stakeholders, and administrators mandate childcare providers to have more than just a high school diploma. For example, the researcher suggests that administrators require childcare providers to receive adequate and relevant training (e.g. child development, child behavior, classroom management) and certifications (e.g. Child Development Associate) prior to, or shortly after entering the occupation. These professional development initiatives and certifications should also be regulated and maintained.

During the study, a point was well taken from Participant VII who explained that individuals must have licenses to do hair, and that the same should apply to childcare providers. Participants in this study referred to childcare providers as teachers. Teachers working with pre-kindergarten through twelfth grade must obtain certifications. Therefore, the same should be the

case for childcare providers/teachers functioning in childcare centers. It is critical to set such standards considering that childcare providers are responsible for the safety, well-being, and development of younger, and therefore more vulnerable children. These children will indirectly, and in some cases directly impact our future. Therefore, we should invest in them. Improving childcare providers' knowledge, skills, and morale through adequate education and training may result in a higher quality of childcare services provided to children.

Conclusion IX

The researcher concluded that parental involvement has a substantial impact on the lived experiences of childcare providers. Participants reported feeling taken for granted, and overwhelmed due to lack of parental support. Childcare providers expressed that they often feel as though they themselves are the parents of the children for whom they care. As a result, childcare providers are often burned out when interacting with the children. The researcher observed that children were often left unsupervised, and improperly cared for. Participants reported that parents appear to be uninterested in what is going on with their children, and that most only get involved when there is a problem. For example, Participant IV stated "I usually try to keep a professional relationship with my parents, and also make them feel comfortable enough that they could ask me and I could talk to them about something and we could help each other do better by their children, but I, you know, have felt frustrated when a parent doesn't seem interested, like, okay, they're new, if they don't seem interested in the welfare that does make you feel uncomfortable and frustrated." It was also reported that parents quickly drop their children off to school, and rush off once picking the children up from school. Participant IV expressed that parents demonstrate lack of interest when picking up the children, she explained "you know, you can see it on their face, 'come on, let's go', and then I have a parent board and

they never go up to it. So yeah, it's a bit frustrating that way..." This haste has led to nonexistent, or negative relationships between childcare providers and parents.

During the study, Participant IV explained that she believes that parents should be required to pick their children up directly from the classrooms, rather than receiving the children at the front office. When discussing things that she would improve if given the authority, Participant IV explained, "I would make sure that, well, I would try to make sure that the parents got more involved even if it was for a minute. If they, the involvement between the child and uh, the parent was better, that each parent had to come to that room, not someone come and say 'hey, that parent is here', make that parent come in and see where that child is all day. Uh, give the teacher at least a minute." Participant IV added, "they could come, but they mostly send somebody to get them, and I'm not too keen on that, but that's their rules. I would rather my parent come in. I would rather my parent come in and ask me questions about their child..." The researcher recommends that this method be implemented to encourage parental presence in the classrooms. In having children collected directly from classrooms, childcare providers and parents can form positive relationships. These relationships can result in taking positive approaches using team efforts to provide children with quality services, and better educational and developmental outcomes.

For parents who are unable to meet with teachers on a daily basis, the researcher recommends that administrators and childcare providers seek nontraditional methods to increase or improve parental involvement. For example, administrators can periodically designate certain days or evenings to conduct open houses, or to offer meet and greets for parents and childcare providers. Such activities can serve as icebreakers and may help childcare providers to obtain more insight about the children for whom they provide care. Many childcare centers own vans to

transport children. These vans can be used to collect parent who are interested in participating, but lack transportation.

The researcher also recommends that childcare providers consistently send daily reports (or letters when appropriate) home with children in order to promote parental involvement. These reports should provide parents insight on what the children are learning, children's strengths, weaknesses, and areas of improvement. In addition to the reports, the researcher recommends that occasional phone calls are made (when possible) to uninvolved, or seemingly uninterested parents. The purpose of daily reports and occasional calls should not be to judge or to scold parents, but instead should be to open a positive line of communication and to reach out to those parents for the greater good of the children.

Conclusion X

The researcher concluded that many childcare workers, even if presented with other choices, would choose to continue to work with children. This was demonstrated in the study by three participants who have Bachelor's degrees, with one participant having a significant amount of experience in the field of case management. Though workers in the childcare industry are often overlooked and undervalued, participants were pleased to say that they have jobs that can greatly impact the lives of children and their parents.

Participants expressed that though they are faced with many obstacles and hardships, they choose to continue to serve in their functions mainly due to the love they have for children. Every participant in this study indicated that they plan to continue to work with children. Administrators plan to remain administrators, one childcare provider hopes to become an administrator, another childcare provider hopes to become a teacher in a local school district, and two other childcare providers plan to remain childcare providers until retirement.

In addition to having a “love for children”, most participants also expressed that they plan to continue employment within childcare centers because they do not have any other experience. Most participants have served in their current function for over ten years, and explained that they would find it difficult to start a new career. Participants also expressed that their families depend on them to provide. Therefore, they must continue to have a guaranteed income. Another reason for employment in their functions is because most participants do not have formal education or training. Most participants expressed that furthering their education and training is not a feasible option due to financial constraints.

Conclusion XI

Based on participants’ responses during interviews, the researcher concluded that participants were aware of various systems which could be utilized to provide relevant training and education to childcare providers, provide resources for children’s cognitive development, and improve childcare centers. For example, when discussing funding issued to childcare centers by the state, Participant III explained, “they said the money should be dispersed on the specifics on what the center needed.” Participant III also stated that an administrator who did attend the meeting received a grant, she explained, “they used the bulk of the grant to do training, and they actually got computers in each class.” The researcher found that though administrators are aware of multiple ways to improve the quality of their childcare centers, many choose to not take advantage of the opportunities. For example, Participant III explained, “You see, some of the centers, all of them got the email, but then all thirty-six centers didn’t show up yesterday. They were not there to voice their needs and they may not get their needs met, and they will be left out.”

In discussing methods to utilize aside from licensing regulations to improve childcare centers, only two participants were aware of accreditation, with one having been previously employed at an accredited childcare center. However, all participants were aware of government supported programs such as obtaining certain class levels, using the Star rating system, and even government funded pilot programs. When speaking with participants, it was evident that neither of the centers in this study, or possibly many other non-accredited childcare centers opt to maximize the use of either of the processes. An administrator explained, “they didn’t want to participate anyway, it’s more work, something else they have to do and if it’s not a whole lot of money involved, a lot of times we tend to not want to do it. And then when the mandates come down we want to complain about it.” The researcher explained to participants that accreditation systems aim to enhance the professional development of childcare providers, while ensuring that children are receiving high quality care and education.

All of the childcare providers who participated in this study believed that accreditation would be beneficial to their careers, as well as to the development of the children they provide care to. Two of the administrators saw the value in a system such as accreditation, and stated that they are interested in learning more about it, and would consider utilizing accreditation processes in the future. However, they were careful not to suggest that they would commit to implementing an accreditation system. The third administrator was greatly interested in gaining accreditation for her childcare center regardless of the time, money, and efforts associated with the processes. She explained, “I think also when potential families come by to take a look at your center, when you’re able to tell them your teachers’ credentials that means a lot.” She added, “it means a lot. Even if, I mean, some of your parents may not have a high school diploma, but it makes them feel real good to know that, that particular teacher has done more than just working in a childcare

center. That teacher has taken the, she has the desire and she's moved forward in getting an education."

The researcher recommends that policy makers, stakeholders, and administrators fully take advantage of utilizing any and all systems that may lead to the improvement of non-accredited childcare centers serving low income families. Regardless of their incomes, most parents want the best for their children. This may especially be the case in terms of an education. Because many low income families do not have many options due to financial constraints, it is the responsibility of those who oversee and offer childcare services to ensure that the services provided to children are adequate. Children's educational and developmental needs must be met in order to ensure a productive, and successful workforce and economy in the future, during which these children will be adults.

Implications

Implications for Practice

According to Rossman and Rallis (2012), "systematic inquiry produces new information" (p. 11). "When this information is used to improve the human condition, it becomes knowledge" (Rossman & Rallis, 2012, p. 11). Based on the findings in this study, several implications have been noted. The implications are discussed based on relevance to practice, and those proposed for future research.

The first implication for practice is the acknowledgement from parents, policymakers, stake holders, administrators, and childcare workers of the significance of the quality of care provided to children enrolled in childcare centers. This implication is especially critical regarding the quality of services provided to children who are enrolled at non-accredited

childcare centers that predominately serve low income families. This is because these centers have the least amount of resources and the least amount of well-developed childcare workers.

The second implication for practice is for administrators to seek and obtain as many resources as possible from various, available sources. These resources can be utilized to properly and adequately develop childcare providers, possibly increase childcare providers' wages, provide technological components (e.g. desktops, tablets, etc.) for children to learn with, and address other pertinent needs of childcare centers. This in turn can improve the overall quality of non-accredited childcare centers that predominately serve low income families.

The third and final implication for practice is for administrators to ensure that childcare providers at the very least, complete all relevant coursework and training programs as required by the state. Though more should be obligatory, the very least of what is required by the state should be mandated and reinforced by administrators. In addition, administrators should consider exploring and utilizing systems such as accreditation to improve the quality of their staff (through accreditation systems' guided developmental initiatives), their childcare centers, and the services provided to children. Accreditation is one way to facilitate quality learning and development, as well as safety for children. Because accreditation processes can be costly, administrators should take advantage of government funded grants, investments provided by stakeholders, and small donations made by community members. Administrators who may opt not to obtain accreditation should consider other, but similar (e.g. Star rating system) avenues to improve the overall quality of their childcare centers.

Implications for Future Research

Due to the steadily increasing numbers of parents, especially women entering the workforce, the issue of quality childcare is not only relevant to parents, but is also crucial to the

workforce, employers, and even to the economy. To obtain applicable data that can be utilized to improve the quality of the childcare services offered by childcare providers, we must first consider and examine the attributes of the childcare providers. Because there are few studies which closely examine the lived experiences of childcare providers employed at state, licensed (specifically non-accredited) childcare centers serving low income families, there is a significant need for additional studies to be conducted in this area.

Because the participants in this study were employed full-time, with several years of relevant experience, future research may examine the lived experiences of childcare providers who are employed only part-time, and who have limited, or no relevant experience. These differences in the sampling strategy may produce new data which can potentially be used to illuminate other issues on the subject matter, or to propose additional implications for future research. Also, because this particular study utilized a qualitative approach for examination, the number of participants included in the study were limited. Therefore, it is suggested that future researchers also consider utilizing mixed, or quantitative methods to collect and analyze relevant data. This will allow the researcher to collect data from a large number of participants (e.g. via surveys) who are employed in various childcare settings (e.g. non-accredited, accredited, private, etc.) throughout various states.

Finally, investigators should research the extent to which legislatures are aware of the issues associated with childcare providers working in childcare centers that serve low income families. In future research, investigators should inquire about legislatures' perceptions of childcare providers serving low income families. This inquiry should include exploration of childcare providers' low wages and the minimum qualifications required to be employed as a childcare provider. Investigators should also solicit the help of legislatures (e.g. via interviews)

to identify ways to increase funding for childcare centers serving low income families.

Identifying concrete and consistent ways to increase funding can improve the quality of low income childcare centers.

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APPENDIX A

Application for Exemption from Institutional Oversight

Unless qualified as meeting the specific criteria for exemption from Institutional Review Board (IRB) oversight, ALL LSU research projects using living humans as subjects, or samples, or data obtained from humans, directly or indirectly, with or without their consent, must be approved or exempted in advance by the LSU IRB. This Form helps the PI determine if a project may be exempted, and is used to request an exemption.

- Applicant: Please fill out the application in its entirety and include the completed application as well as parts A-F, listed below, when submitting to the IRB. Once the application is completed, please file the completed application to the IRB Office or to a member of the Human Subjects Screening Committee. Members of this committee can be found at <http://sites01.lsu.edu/wp/acad/human-subjects-screening-committee-members/>

- A Complete Application Includes All of the Following:

(A) A copy of this completed form and a copy of parts B thru F.

(B) A brief project description (adequate to evaluate risks to subjects and to explain your responses to Parts 1&2)

(C) Copies of all instruments to be used.

*If this proposal is part of a grant proposal, include a copy of the proposal and all recruitment material.

(D) The consent form that you will use in the study (see part 3 for more information.)

(E) Certificate of Completion of Human Subjects Protection Training for all personnel involved in the project, including students who are involved with testing or handling data, unless already on file with the IRB. Training link: (<http://php.nihtraining.com/users/login.php>)

(F) IRB Security of Data Agreement: (<https://sites01.lsu.edu/wp/acad/files/2013/07/Security-of-Data-Agreement.pdf>)

1) Principal Investigator: Chantel Brown

Rank: Doctoral Student

Dept: Human Resource Education

Ph: (225) 402-8061

E-mail: _____

2) Co-Investigator(s): please include department, rank, phone and e-mail for each

*If student, please identify and name supervising professor in this space

Dr. Michael Burnett

3) Project Title:

A Qualitative Analysis of the Lived Experiences of Childcare Providers Employed at a Non-Accredited Childcare Center

4) Proposal? (yes or no) No

If Yes, LSU Proposal Number _____

Also, if YPS, either

☐ This application completely matches the scope of work in the grant.

OR

☐ More IRB Applications will be filed later

5) Subject pool (e.g. Psychology students):

Childcare providers employed at a non-accredited childcare center

*Circle any "vulnerable populations" to be used: (children <18; the mentally impaired, pregnant women, the aged, other). Projects with incarcerated persons cannot be exempted.

6) PI Signature

Chantel Brown

Date

11-1-13

(no per signatures)

** I certify my responses are accurate and complete. If the project scope or design is later changes, I will resubmit for review. I will obtain written approval from the Authorized Representative of all non-LSU institutions in which the study is conducted. I also understand that it is my responsibility to maintain copies of all consent forms at LSU for three years after completion of the study. If I leave LSU before that time the consent forms should be preserved in the Departmental Office.

Screening Committee Action: Exempted ☒ Not Exempted _____

Category/Paragraph 2

Signed Consent Waived? Yes ☒ No _____

Reviewer

Robert Mathews

Signature

Mathews

Date

11/5/13

LSU

Institutional Review Board
Dr. Robert Mathews, Chair
130 David Boyd Hall
Baton Rouge, LA 70803
P: 225.578.8692
F: 225.578.5983
irb@lsu.edu | lsu.edu/irb

IRB# E8542 LSU Proposal # _____

☒ Complete Application

☒ Human Subjects Training

☒ IRB Security of Data Agreement

STUDY EXEMPTED BY:

Dr. Robert C. Mathews, Chairman
Institutional Review Board
Louisiana State University
130 David Boyd Hall
225-578-8692 / www.lsu.edu/irb

Exemption Expires: 11/4/2016

APPENDIX B

Consent Form for Participation in a Research Study

Study Title: A Qualitative Analysis of the Lived Experiences of Childcare Providers Employed at a Non-Accredited Childcare Center

Institution: Louisiana State University

College: Education and Human Sciences

Department: Human Resource Education

Principal Investigator: Chantel Brown, MPA, M.S.

Email: celli15@lsu.edu

Cellular phone number: (225) 402-8061 Availability: M-F, 8am.-6p.m

***This study has been approved by the Louisiana State University (LSU) Institutional Review Board (IRB). For questions concerning participants' rights, please contact the IRB Chair, Dr. Robert C. Matthews at (225) 578-8692, or at irb@lsu.edu.

Introduction

You are invited to participate in a research study which examines the lived experiences of childcare providers working at a non-accredited childcare center. In this study, participants' work environment, behavioral characteristics, interactions, and responses will be observed and examined by the researcher.

This consent form will give you the information you will need to understand why this study is being done and why you are being invited to participate. It will also describe what you will need to do to participate and any known risks, inconveniences or discomforts that you may have while participating. You are encouraged to ask questions now and at any time during the study. If you decide to participate, you will be asked to sign this form and it will be a record of your agreement to participate. You will be given a copy of this form.

What is the purpose of the study?

The purpose of this research study is to explore and understand the lived experiences of childcare providers who work at a non-accredited childcare center. The researcher has the intention of understanding and promoting human welfare by improving the quality of childcare centers, along with the experiences and outcomes of childcare providers. The researcher seeks to examine, understand, and describe the phenomenon experienced by childcare providers while working at a non-accredited childcare center.

Subject Inclusion: Participants must be employed as a childcare provider working at a non-accredited childcare center.

Number of participants: Between 5 and 10

What will I be asked to do? What are the study procedures?

If you agree to take part in this study, you will be asked to carry-out your job duties as you normally would while being observed by the researcher. The study will take place in your natural workplace setting. The setting will not be controlled by the researcher in any way. The researcher will first observe the environment and all participating childcare providers at the same time. This will occur for approximately two weeks, from the time the center opens, to the time it closes. Next, the researcher will observe individual childcare providers for one full work day. Following the observation period, participants will be asked to participate in an interview with the researcher where participants will be asked several questions regarding their functions and experiences working as a childcare provider at a non-accredited childcare center. Sample questions include: 1) How long have you worked as a childcare provider? 2) Do you have any formal training, and/or education in child development or other related areas pertaining to your function as a childcare provider? 3) Can you describe what a typical day is like for you at the center? Your interview session is projected to last 30 minutes or less. The length of the interview depends upon the participant's responses. Each interview will be recorded by the researcher.

Once the interview has been completed, the researcher will transcribe, code, and interpret the information participants have provided. All aspects of participants' own information will be shared with them by the researcher. Participants will be included in the researcher's findings throughout the study. This will ensure that the information provided by participants is interpreted correctly by the researcher. Participants are encouraged to ask questions and to provide feedback. Following the observation period, and the interview process, participants may be asked to do a reflection exercise. In this exercise, participants will be asked to write a short, one page summary (independently at their own home) which describes the depth of their role and experiences as a childcare provider working at a non-accredited childcare center. This will provide participants with the opportunity to provide any additional information they may have forgotten, and/or failed to mention during the interview. This may also provide the researcher with significant information. The researcher will then take this information, and code and interpret it in the same manner the interview was done. Again, participants will be included in every step of the process.

What are the risks and inconveniences of the study?

One risk of the study could be legal implications for related parties in the event that cases of child abuse, and/or neglect occur or is disclosed during the time of the study. Under such circumstances, the researcher would be mandated to formally report the incident (s). However, because participants are fully aware that they are being observed, cases or mentions of child abuse, and/or neglect is less likely to arise or be brought to the researcher's attention during the study. Another risk could be the possible effect the study could have on employment if participants' data were inadvertently revealed to employers. However, the researcher will carefully control this risk by protecting the confidentiality of each participant through securely locking away all data including audio recordings. Therefore, this risk does not pose a likely threat to participants. Participants will not be subjected to any excessive, and/or unnecessary risks. The researcher does not predict any physical, emotional, and/or social risks to participants as a result of the study procedures.

Because the study is being conducted at participants' natural work setting, the only inconvenience may be the time (30 minutes or less, depending upon the participant's responses) it takes to participate in the interview.

What are the benefits of the study?

This research study will provide participants with the opportunity to contribute to the enlightenment of researchers, stakeholders, and policy makers in efforts to implement systems that may improve childcare providers' workplace environment, experiences, and professional outcomes, which thusly is likely to improve the outcomes of the children for whom they care. This research study has the potential to provide increased knowledge and understanding which can significantly and positively impact the childcare industry, the field of human resources, and society. Participants may or may not directly benefit from this research. However, due to the nature of the research and the prospective benefits it may have on society, participation is greatly promoted and encouraged.

Will I receive payment for participation? Are there costs to participate?

There are no financial costs for you to participate in this study. Also, you will not be paid to participate in this study.

How will my personal information be protected?

This research study will be confidential. The following procedures will be used to protect the confidentiality of participants' data. The researcher will keep all study records (including any codes to your data) securely locked in a file cabinet located at the researcher's home office. Participants' names will not be given at any point during or after the research study. Research records will be labeled with a code. The code will be derived from a number (e.g. sequential 3 digit code) that reflects how many people have enrolled in the study. A master key that links names and codes will be maintained in a separate and secure location. The master key and audio recordings will be deleted after 3 years. All electronic files (e.g., database, spreadsheets, etc.) containing identifiable information will be password protected. Any computer hosting such files will also have password protection to prevent access by unauthorized users. Only the researcher will have access to the passwords. Any data that will be shared with others will be coded as described above to help protect participants' identity. When there is no more data to be collected, the researcher will destroy the master key which links names and codes. At the conclusion of this study, the researchers may publish their findings. Information will be presented in summary format and participants will not be identified in any publications or presentations. The researcher will take every necessary measure to protect the confidentiality of all gathered information, but cannot guarantee 100% confidentiality. Data will be kept confidential unless release is legally compelled. Confidentiality cannot be guaranteed in such cases where child abuse, and/or neglect occur. Such cases will be required to be reported by the researcher. Also, the Louisiana State University Institutional Review Board (IRB) and the Office of Research Compliance may inspect study records as part of its auditing program, but these reviews will only focus on the researchers and not on participants' responses or involvement. The IRB is a group of people who review research studies to protect the rights and welfare of research participants.

***In addition to protecting the identity of each participant, the researcher will also protect the identity of the childcare center where the research is taking place. The name of the childcare center will not be disclosed in the research data at any point in time.

Can I stop being in the study and what are my rights?

Participation in the study is completely voluntary. Participants have the right to choose not to be in this study. There are no penalties or consequences of any kind if you decide not to participate. You do not have to answer any questions you do not want to answer. Also, you do not have to participate in any activities you do not want to participate in. If you choose to be in the study, but later change your mind, you have the right to drop out at any time without penalty or loss of any benefit to which participants might otherwise be entitled. Participants will be notified of any significant findings during the course of the study that may affect their willingness to continue with the study.

How do I contact the researcher about the study?

The researcher will be happy to answer any question you have about this study. If you have further questions about this study or if you have a research-related problem, you may contact the primary investigator (researcher), Chantel Brown by email at cellil5@lsu.edu or by phone at (225) 402-8061, Monday through Friday between the hours of 8a.m. to 6p.m.

Documentation of Signed Consent:

The study has been discussed with me and all my questions have been answered. I may direct additional questions regarding study specifics to the investigators. If I have questions about subjects' rights or other concerns, I can contact Robert C. Mathews, Chairman, LSU Institutional Review Board, (225) 578-8692, irb@lsu.edu, www.lsu.edu/irb. I agree to participate in the study described above and acknowledge the researchers' obligation to provide me with a copy of this consent form if signed by me.

Participant Signature:

Print Name:

Date:

Administrator Signature

Print Name:

Date:

STUDY EXEMPTED BY:

Dr. Robert C. Mathews, Chairman
Institutional Review Board
Louisiana State University
130 David Boyd Hall
225-578-8692 / www.lsu.edu/irb

Exemption Expires: 11/4/2016

APPENDIX C

The guiding questions presented to childcare providers are as follows:

1. Why did you choose to work with children?
2. Can you describe what a typical day is like for you?
3. Describe to me what a good day looks like for you.
4. Describe to me what a bad day looks like for you.
5. Tell me about why you enjoy caring for children.
6. Can you tell me about a time when you felt proud or rewarded for being a childcare provider?
7. Why is caring for children challenging?
8. Can you think about a time when you were really frustrated? Tell me about that.
9. Tell me about a time when you may have felt uncomfortable with performing a task or dealing with a parent.
10. Tell me about the things that motivate you to come back to work every day.
11. Tell me about the things that make you feel appreciated, and/or unappreciated by parents and administrators.
12. What are some of the things you would change about your job? Why would you change these things?
13. What are the most meaningful tasks your job? Tell me about why these tasks are more meaningful than other tasks?
14. What would you consider to be your strengths and weaknesses as a childcare provider?
15. What behaviors do you believe separate you from other childcare providers?

16. What behaviors of your own would you like to build, and/or improve?
17. In many low income families, parents are forced to work multiple jobs; meaning they are not full-time parents. Because of this, the responsibilities of parenting (e.g. potty training, teaching ABC's, counting, and even teaching obedience, and sharing) is often placed on childcare providers. Can you tell me what this means for you?
18. Occupational Burn-out: Tell me about the times when you became exhausted and just felt like giving up, or finding a new line of work?
19. Sometimes what we do for a living can weigh heavily on who we are. Tell me about how working as a childcare provider effects your personal life (e.g. parenting style with your own children).
20. Childcare providers are reported as being one of the lowest paid professionals in the workforce. Can you tell me how this impacts you and your family's livelihood?
21. What are some of the things parents, administrators, and society should know about the role of childcare providers?

APPENDIX D

The guiding research questions that were given to the administrators included the following:

1. Why did you choose to work with children?
2. Can you describe what a typical day is like for you?
3. Describe to me what a good day looks like for you.
4. Describe to me what a bad day looks like for you.
5. Can you think about a time when you were really frustrated, whether it was with your workers, the parents, the children, or the system? Tell me about that.
6. Tell me about those you had to terminate. What were their behaviors?
7. What was the worst thing your center has been cited for? How did this effect your center?
8. What is the worst thing you have seen or learned of while working in the childcare industry, particularly pertaining to childcare providers?
9. What are some of the things you would change about your center, or the childcare industry as a whole? Why would you change these things?
10. What do you believe are the most meaningful tasks performed by your childcare workers?
11. What would you consider to be your strengths and weaknesses of your center?
12. What do you believe separate your center from others?
13. Occupational Burn-out: Tell me about the times when you became exhausted and just felt like giving up, or finding a new line of work?
14. Childcare providers are reported as being one of the lowest paid professionals in the workforce. What are your thoughts on the low wages provided to childcare providers?

15. I understand that administrators often do not have the financial capability to hire an individual who is highly educated and highly certified. Tell me about your method and logic of hiring childcare providers.
16. Do you believe there is a difference in the quality of work provided by someone who is educated and trained versus someone who is not?
17. Would you be willing to provide financial assistance for the education and training of your childcare workers?
18. Would you be interested in having your organization gain accreditation?
19. What are some of the things parents, stakeholders, researchers, and/or society should know about the childcare industry, and the significance of the role childcare providers play?

APPENDIX E

Demographic Form

Name _____

Race _____

Age _____

Marital status: Married ___ Divorced ___ Separated ___ Widowed ___ Single ___

Do you have children of your own? Yes ___ No ___ If so, how many? ___

Where are you from? _____

Highest level of education completed: _____

Employment status: Full-time ___ Part-time ___

1. How long have you worked as a childcare provider?
2. Have you ever worked as a childcare provider at an accredited childcare center?
3. How long have you worked at this childcare center?
4. How many children do you care for per day?
5. What are the children's range in age?
6. Do you have a current state license, and/or any accreditations or certifications related to childcare services? If so, which do you have?
7. Do you have any formal (school based) early childhood development, or other childcare training?
8. When was the last time you've participated in childcare/child development courses, and/or training programs?
9. Do you believe it was beneficial? Why or why not?
10. Do you plan to obtain formal education, and/or training in childcare? Why or why not?

11. Do you have emergency training such as CPR/first aid?
12. Do you feel adequately prepared to effectively carry-out your job functions? Why or why not?
13. Do you see yourself doing this long-term as a career? Why or why not?

VITA

Chantel M. Ellis Brown was born in New Orleans, Louisiana to Lorenza Mealancon and Cornelius Ellis. Chantel graduated from L.W. Higgins High School, located in Marrero, LA in May 2002. Chantel later obtained a Bachelor of Science degree in Psychology from Southern University Agricultural and Mechanical College located in Baton Rouge, LA in December 2009. Chantel went on to receive a Masters degree in Public Administration (MPA) from Louisiana State University Agricultural and Mechanical College, also located in Baton Rouge, LA in December 2011. Following this, Chantel obtained a Master of Science degree in Human Resource Education and Workforce Development from Louisiana State University Agricultural and Mechanical College, Baton Rouge, LA in December 2012. Chantel plans to receive a Doctor of Philosophy degree from Louisiana State University Agricultural and Mechanical College, located in Baton Rouge, LA in December 2016.

Chantel's field of interest is in human resources and workforce development, specifically in the areas of organizational training and development, and workforce policy. Once receiving her Doctorate, Chantel plans to conduct research and practice in her field of interest, and later obtain a tenure-track faculty position at an accredited, research based university.