

**Crystal Stairs, Inc.
License-Exempt Assistance Project
“Community Pre-K”
Evaluation Report
Year 2 (2008/2009)**

Evaluation Conducted by:

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Introduction

What is Community Pre-K?

Community Pre-K, (CPK), is a “play and learn” experience designed for children three and four years of age in the care of license-exempt providers. A small team under the License Exempt Assistance Project (L.E.A.P.) provides structured, center-like pre-school “play & learn” activities for children and their providers. Play & Learn models of professional development for Family Friend and Neighbor child care providers are a new strategy emerging in several communities around the country that show increasing promise in regards to enhancing quality of care and children’s school readiness (Organizational Research Services, 2006; Porter & Vuong, 2008; Porter, Paulsell, Del Grosso, Avellar, Hass, & Vuong, 2009).

Logistics

Community Pre-K is held Monday through Thursday from 9:00 a.m. to 12:00 Noon at the Crystal Stairs Degnan Office location in Lemeirt Park Village. CPK takes place under the outside patio owned by the office’s landlord, *Community Build*. Providers remain with the children the entire time they are participating in CPK activities.

Philosophy of Training

The objective of CPK is to provide children with a quality early learning experience and building providers’ caregiving skills and knowledge of child development. This is accomplished through the CPK staff modeling developmentally appropriate activities and interactions for the providers who remain with the children during CPK. In addition to attending CPK with their preschoolers, providers are also encouraged to attend bi-weekly workshops, have scheduled Technical Assistance home visits, attend CPK field trips, and maintain a reflective journal.

Curriculum

Community Pre-K's curriculum is based on the belief that children learn through their play experiences. CPK is influenced by a constructivist framework, meaning that children can construct their own ideas of the world and how it works through child-directed experiences. The adult role is that of a facilitator of play, setting up the play environment, and of a co-player.

The implementation of the curriculum is done through the environment and the interaction of the children and adults. The environment plays a key role because it showcases the children's interests as well as their individual needs and reflects the values of the program. The classroom environment



is outside, but it has elements traditionally found inside a typical preschool classroom, such as interest areas. The interest are as follows: Book Area, Math/Manipulative, Science/Sensory, Physical Play, and Art .

Evaluation Rationale

There is a great need for more research and evaluation on family, friend and neighbor care (license-exempt care). Despite the importance of quality child care experiences for children's present and future well being, relatively little research has explored practices that “work” with this group of caregivers. This is mostly due to the many challenges involved with conducting research and evaluations on family, friend and neighbor child care projects. Some of the challenges include

sample variability, inadequate theoretical frameworks, recruitment issues, methodology concerns, and a limited ability to generalize results. Nevertheless, it is imperative that we gain a deeper understanding of the link between license-exempt child care quality and children’s developmental outcomes. While we have decades of research that has indicated which aspects of formal child care are predictive of children’s future and concurrent social and emotional outcomes, we have yet to discover components of family, friend and neighbor care that are distinct from more formal care as well as predictive of children’s current and future success.

Our aim in conducting the evaluation on *Community Pre-K* (CPK) is not only to improve future delivery of the program, but to also add to the literature base on FFN child care initiatives that aim to support quality in license-exempt child care. The research literature will offer useful insights for developing future initiatives to support these caregivers. Findings from research provide information about the characteristics of the initiatives, their implementation, and the outcomes for participants. Data on characteristics of the initiatives can help us understand the range of service delivery strategies that have been used to date; content, service delivery strategies, and intensity of these programs; and the fit between these features and caregivers’ interest in supports.

Methods

This year we proposed to conduct an evaluation with participants from the ‘08-‘09 CPK cohort as well as last year’s CPK cohort. This evaluation was exploratory and used focus groups to examine participants’ experiences in CPK and the effect of CPK on providers’ caregiving practices at home with the children in their care. We chose this methodology because we were interested in providers’ perspectives and reflections. Focus group interviews have proven an effective

methodology for this purpose as they are best used in situations where the concept or area that researchers are interested in is relatively less known, and the evaluation is expected to gain much from involvement of the interested community (Edmunds, 1999). In fact, at a recent national meeting of FFN child care, researchers suggested that evaluations of new initiatives should focus on gathering exploratory data that will, in turn, shape the design of more outcome-driven quantitative designs (Toni Porter, personal correspondence, 2009). In the case of CPK, gathering exploratory data will enhance the baseline data collected during last year's evaluation.

Results from focus groups can also produce new data and insights that might not occur through individual interviews alone, and result in research findings that can stand alone or be combined with other sources of data as part of a comprehensive evaluation (Morgan, 1998). Focus groups have been used with FFN providers in particular as an effective way to gather nuanced perspectives on FFN care (Drake, Unti, Greenspoon, & Fawcett, 2004; Porter, 1998; Porter 1999; Porter et al., 2003).

Participants

We conducted a focus group with this year's CPK participants and last year's participants. The participants were fifteen (15) Family, Friend and Neighbor (FFN) child care providers, licensed Family Child Care providers and parents from the Crystal Stairs service area, which is located in South Central, Los Angeles. All served children birth through 5 years. Almost half of the participants were grandparents (47%). Thirty-four percent (34%) were parents, and 20% were licensed providers. This mix of participants is consistent with other "play & learn" programs that are also designed for FFN providers, but end up opening the program to others in the local community (Organizational Research Services, 2006).

Almost all the participants were women – there were only two men. Overall, 73% of the participants were African American, and 27% were Latina. Three providers spoke Spanish as their primary language. Nearly all of the providers who participated in these focus groups were connected to additional child care training and support provided by Crystal Stairs’ License-Exempt Assistance Project. The training and support programs consisted of bi-weekly workshops and / or technical assistance.

Procedures

The focus group lasted approximately 2 hours. We held the focus group at a time and location that was convenient and familiar to participants. The focus group was held at the same location and during the same time as their normally scheduled CPK activities. Prior to beginning the focus group, we informed participants that although we would be tape recording the session, their responses would be completely confidential. We began the questioning during the session by exploring broad topics about their experiences caring for children – this was done to engage all participants in a comfortable, open dialogue. See Appendix for sample guiding questions.

The session lasted approximately two hours and was conducted by an African American female researcher who is an experienced focus group moderator and who also has extensive experience conducting trainings, home visits, and research with FFN providers. Because we had two participants who were monolingual Spanish speakers, an interpreter was present (simultaneous translation with ear phones was used). The moderator described the purpose of the evaluation and explained how the interview would be conducted. She guided the discussion through the use of the open-ended questions that invited participants to comment on their insights, experiences, and opinions. Follow-up questions and prompts were used to clarify questions or to expand discussions around an issue (e.g., “What aspects of the CPK activities were most useful to your child care

practice at home?” and “In what ways did you share CPK experiences, information, and resources with parents?”). As a way of letting the participants pace the conversation and to ensure that all group members had the opportunity to speak, the moderator asked if participants had anything more to say before moving from one question to the next. During each focus group discussion, extensive notes were taken and the discussion was audio-taped.

Content Analysis

We based our analysis on aspects of grounded theory methodology (LaRossa, 2005; Strauss & Corbin, 1998). Using open coding, we first conducted a constant comparative analysis of the content of the participants’ responses (Strauss & Corbin, 1998). Responses were first clustered into chunks of text that could be assigned a single category, and then we developed a final set of more general categories by collapsing multiple categories based on theme similarities (e.g., format, dissemination, sharing material with parents). Second, axial coding was conducted by exploring the relationship between and among categories. Finally, we used selective coding whereby we selected a core variable(s) (category) that had enough analytic power to pull together all other categories and form the focal point for telling a coherent “story” with the data (Glaser, 1992; Strauss & Corbin, 1998). In this case, the core variable we selected was consistent with our theoretical framework in using a community-based approach to exploring professional needs and interests of FFN caregivers.

Findings

1. What were some of the reasons you decided to participate in CPK?

The biggest theme in this question was related to caregivers wanting their child to have some sort of structured exposure to other young children. Many providers expressed concern that the child in their care was only exposed to adults during the day. They wanted their child to learn how to interact with other children. Another big theme that was expressed by the group was that providers wanted their child to spend more time outdoors, and less time watching TV. Other responses included wanting their child to have a structured weekly routine, and another grandparent wanted her child to be exposed to and learn English.

2. Where was your child(ren) emotionally upon enrollment?

The major theme that caregivers discussed all revolved around their child's social skills. Some providers were concerned that since their child was only around adults all day long, their child needed to learn how to share, compromise and cooperate with other young children. Providers reflected how when their child first started CPK, they had a lot of difficulty sitting still for an activity or sharing toys with others.

“When my grandchild first started CPK, he was out of control and used to having everything go his way.”

Others shared that their girls were shy, inhibited and very cautious about approaching other children and trying new things when they first started CPK.

“When we first started [my grandchild] was really connected to the TV. He did not have a lot of interaction with other children. He was a loner.”

Another mentioned concerns about being worried that their grandchild needed to spend more time learning how to be “two” instead of “fourteen.” And another licensed provider was worried that the one girl in her care (the provider also cared for 3 other boys) needed to learn to play more like a “girl.”

3. What were your expectations of CPK?

There were two major themes under this line of questioning – providers’ expectations revolved around 1) learning and cognitive development, and 2) social and emotional development. In regards to learning and cognitive development, providers expected that CPK would help their child develop an age-appropriate love for learning and a love for books. Providers also discussed expectations about successful transitions to Kindergarten. In regards to social and emotional development, providers expected that CPK would help their child in developing emotional skills that would help them in school.

“I was not worried about [my child’s] learning – she already knew her numbers and ABC’s and shapes. I wanted her to learn how to figure things out for herself more. More thought in working it out – perseverance. More imagination.”

Several providers also expected that CPK would give them a break from all the stress of caring for children every day.

4. What differences have you noticed in your child(ren) since you've started attending CPK?

Almost all of the providers noted that their child(ren) is now very excited about coming to CPK. Some of the past participants were happy about the way their grandchild transitioned into Kindergarten and how she now loves going to school. Most of the Spanish-speaking providers were happy to report that their child loves to read and loves to sing. Several mentioned that they now have library cards, and regularly visit the library as a family. Others mentioned that they have noticed their child to develop more confidence and a sense of security. Another provider also mentioned that her grandchild is not as “hard-headed” and is demonstrating more affection towards the grandparents.

5. What did you learn about the way children develop? Did you learn new parenting or child rearing strategies?

The three main themes that emerged in this section are activities, environment, and relationship.

Activities:

“As a male, I didn’t realize how creative you can be with stuff around the house!”

“We use a lot of the activities from CPK. I was ‘old-school’ in my approach to teaching – now I’m more creative.”

“I still use the activities I learned from CPK. Less TV – more outdoor playing – more reading.”

“Even though we had four different teachers, it wasn’t so negative. Everyone had their strengths. I enjoyed learning so much about children’s music and singing. I learned to participate in the singing and using our bodies. To incorporate development and learning with the songs. It’s so uplifting for both [my child] and for me.”

“I’m more creative in my teaching – I teach while we play and we play while I teach.”

Environment:

“I learned to be more open. I used to be more traditional. I’ve incorporated more playing. We do more playing, learning and activities outside.”

“I’ve incorporated more playing centers at my home.”

“We use more playing and learning materials outside now.”

“CPK is a ‘protected space’ for children. I see how important it is that every child has that.”

Relationships with children:

“I’ve learned to let children work things out themselves. I’m used to being very protective of [my daughter]. Now I’ve learned to let her defend herself. She’s learning to defend for herself.”

“Now we talk more – point out shapes and colors. He still watches TV, but not as much. Even though I don’t let him get away with as much as he used to, I’m more patient with him.”

“I learned how to understand my child better. CPK taught me how to not just sit back and watch [my son] it taught me to really *observe* my child.”

“I’ve learned how we always tell children ‘no’ or ‘stop that.’ But we don’t explain why we say those things. I’m learning how to use more positive discipline instead of ‘traditional’ discipline.”

“I have learned to be very patient with my son. I’m learning along with him – he’s my first child. When we play, we play together. Now when his father is home he comes and plays and it feels like a family even more.”

“I even speak more English. The teachers have taught me how to talk to [my child]. How to speak to him in a way that he can understand – as a way of using discipline.”

Another provider talked about what she learned about herself:

“You not only learn to educate your child at CPK – but as a human being, you’re also realizing that part of your dreams need to be fulfilled too. When you’re at home, it’s just routine – day after day. As an adult you need to do new things too. CPK gave me that outlet to start dreaming again.”

6. What did you learn from each other?

The providers talked a lot about being a “village.” They often referred to the respect they had for one another’s learning process, and how seeing another provider struggle with an issue helped them see themselves in a more compassionate way. They also talked about how they share resources and ideas with one another – they even talked about learning English and Spanish from one another.

“Even the people who said they were ‘old-school.’ I noticed they were open to learning and trying new things. It made it easier for me to try those new things.”

“When I was at my wit’s end, the other providers would help me calm down. They were reassuring. Everyone would step in. Sometimes I was at my wit’s end!”

“We have respect for one another – and there is respect among the children.”

7. How have you shared some of your CPK experiences with the children’s parents?

Providers mentioned several ways that they share their CPK experiences with the children’s parents. First and foremost, the providers all mentioned how the parents already know a lot about CPK because the children take their experiences home with them. But beyond that, providers share resources and handouts with parents. They also share activities like songs and arts and crafts ideas with the parents. And finally several providers talked about the use of the CPK journal. They like showcasing the children’s art-work and sharing the journals with the parents.

8. What other features of CPK did you enjoy?

- *Location* – they all loved that CPK was outside and that it was held in a closely-knit and culturally rich community like Leimert Park.
- *Convenience* – providers talk again about being able to walk to CPK if they wanted to. They also mentioned the clean bathrooms.

- *Field Trips* – all the participants in the focus groups loved the trips. They were even inspired to look for other free “cultural” activities around Los Angeles. Many of the providers also continued to visit the library after the CPK field trip to the public library.
- *Journaling* – the providers who were introduced to the journaling thought it was an excellent way to share the CPK experience with the child’s parents.
- *Staff* – throughout the focus group, the providers alluded to many things they learned from the teachers. They are proud that their children are learning and experiencing many of the same things that children in centers experience.

9. What are some features that could have been improved?

- *Materials* – the biggest area of improvement seemed to relate to the rotation of materials. Providers complained that the same materials came out every week, and that many of the materials were not challenging enough for the older preschoolers. They also wanted to see more music materials.
- *Activities* – ideas for future CPK activities included: planting herb gardens; teaching children (and providers) about recycling; teaching Spanish to the English-speaking children (and providers).
- *Teaching style* – similar to last year, this year’s group also had a debate about the balance of play and structured learning in CPK. While most of the providers felt CPK was appropriately challenging for their children, there were several providers who voiced rather strongly that learning through play does not necessarily mean that the providers and teachers should just sit back and let children initiate all their play without any scaffolding from adults. These providers would have liked to see more cognitively-challenging activities for the children and also more intentional structured learning time. In short, they wished there could

have been more integration of didactic, scaffolded approaches to guiding children through their play experiences.

Conclusion

Crystal Stairs' Community Pre-K is a high-quality program for preschool-aged children who are cared for by Family, Friend and Neighbor child care providers. It is progressive and unique in its design as well as its implementation. The major findings from the focus group indicate that CPK has helped children in their socialization skills; has helped providers learn new ways of interacting with children; has helped providers learn new teaching methods that incorporate play and creativity; and finally have helped providers feel supported in the work they do. These findings are consistent with our industry's recommendations for providing effective learning experiences for children by 1) providing stimulating experiences for children, 2) putting relationships and responsive interactions at the center of all learning, 3) making connections with the child's family in a meaningful way, and 4) creating an environment and culturally and linguistically sensitive and responsive (NAEYC, 2005).

Although findings from this focus group indicate that CPK is successful, there are some major limitations to drawing final conclusions. First and foremost, this evaluation did not include a pre assessment of providers and children. Without knowing how participants were before CPK, we cannot confidently determine whether and to what extent CPK influenced change. In addition, although providers reported changes in their interactions at home with the children in their care, without any observational data collected in the providers' homes, it is difficult to know the impact of their experiences with CPK.

Nevertheless, the findings from this evaluation do indicate that all those involved with CPK are headed in the right direction. Los Angeles is one of the few communities in the country where the “play & learn” model is being tested with Family, Friend and Neighbor child care providers (Porter et al., 2009). It is imperative for this project to grow and increase its reach, and equally imperative for those involved with this project to remain committed to collecting evidence of its effectiveness. Despite the fact that many young children are spending their formative years in FFN arrangements, and communities are now spending more resources on training and support for FFN providers, we still know far too little about the elements of those training and support projects that ultimately impact children’s outcomes for success in school and life (Powell, 2008; Porter et al., 2009).

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Appendix

Focus Group Protocol 2009

Introduction

1. **Welcome** and thank you for coming. Emphasize important work they do and how much we appreciate their feedback and input.
2. **Purpose:**
 - a. To understand the impact CPK has had on them and the children in their care
 - b. To determine the effectiveness of various elements of CPK – how were they particularly useful, supportive?
 - c. To get suggestions for improvement
3. **Ground rules.** Reassure participants that:
 - The information they share today is confidential;
 - No names will be associated with any feedback;
 - Remind them about it being a short period of time to cover a lot of material so you apologize in advance for moving people along—not meaning to cut people off.
 - We are recording the meeting so people should not talk over each other or have side conversations or it will be hard to hear what people are saying.
4. **Background info on providers**
 - Date started coming to CPK
 - Relation to CPK child(ren) – grandparent; parent; licensed provider
 - Number of children in care
 - Note to myself – primary language spoken

Questions

What were some of the reasons you decided to participate in CPK?

Where was your child(ren) emotionally upon enrollment?

Probe: What were their concerns, if any, about their child's development?

What were your expectations of CPK?

What differences have you noticed in your child(ren) since you've started attending CPK?

What did you learn about the way children develop? Did you learn new parenting or child rearing strategies?

Probe: What did you learn by watching the teachers interact with children?

What did you learn from each other?

What are some of the things that you've "borrowed" from CPK that you now do at home?

Probe: activities; behavioral strategies

How have you shared some of your CPK experiences with the children's parents?

Evaluation of CPK Features

Location:

Convenience: (bathroom, parking facilities, etc.)

Journaling: (It's a place for the providers to hold their work and art examples from CPK)

Overall environment:

Interactions with Teacher:

Activities:

Schedule:

Field Trips:

Other suggestions for CPK improvements:

Has being in CPK changed the way you see your role in your [grand]child's life?

Ideas for Next Year's Recruitment