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Improving the Quality of Child Care in the Rural South

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A collaborative of six social service agencies and a state university determined that the single most pressing need of families in a 14-county, rural area was child care. The Training Resource Center, developed through a W. K. Kellogg Foundation grant, worked with day care licensing and early childhood professional groups to develop a plan to address the systemic nature of the problem of how to improve the quality of child care. Programs developed included training, mentoring, NAEYC accreditation, and a resource library. After 15 months, some programs show the possibility of sustainability.

Introduction

In January 1996, the sponsoring partners of the Training Resource Center (TRC), a W. K. Kellogg Foundation Family and Neighborhoods, Community/University Partnership project, established a two-year primary focus on improving the quality of child care in the Upper Cumberland region of Tennessee. The time was right for such an initiative as the state's welfare reform plan, Families First, mandated a return to work for many mothers who had formerly been sustained on AFDC. There was an estimated need facing the child care community in the Upper Cumberland for 4,000 child care slots and very little funding or organization in place to meet this anticipated need. Based on their
combined experience in serving families in the areas of public health, human services, and education, the partners (see Figure 1) believed that support of young families through the provision of quality child care was a vital element in ensuring the success of Families First. Meeting child care needs would be critical in assisting families to become economically self-sufficient, to be motivated to attain the necessary education and training for employment, and to function as supportive environments for human growth and development.

Child care needs of the Upper Cumberland reflect not only the unique social and economic character of the region but also of the individual counties. All interventions planned had to reflect knowledge of and respect for the particular situations of each county. The region is a 14-county, 5,000 square mile area in east central Tennessee and is considered the western edge of Appalachia. Communities are quite small and often organized around a fundamentalist protestant church. The terrain is rugged, and secondary roads are often gravel. There is no public transportation system. The majority of employment is farming, light manufacturing, and local crafts and trades. Most (78%) of child care in the Upper Cumberland is in-home and often provided by relatives (Farley, 1997). Family day care homes for over five children must be licensed, and there is voluntary registration for family child care with fewer than five children. The more remote counties have no child care centers. Of existing centers, virtually all are state licensed but none had been accredited by the National Association for the Education of Young Children (NAEYC) at the time the project began.

Cookeville, the largest city in the Upper Cumberland (population 25,000), is the economic, educational, and social services hub of the region. Tennessee Technological University (TTU) (8,000 students) is one of the State of Tennessee Board of Regents universities and is located in Cookeville. TTU serves the higher education needs of the region through on- and off-campus programming. The TRC is located in Cookeville as are six of the seven sponsoring partners. Coordination of most social service programs takes place in Cookeville with activities then taken out to satellite programs in the counties.
Significance and Goals of the Project

The particular significance of the quality child care project of the TRC is the ongoing development of a model and supporting methodology for creation and delivery of services to improve child care in a rural area. As the model unfolds, support for the project is seen most clearly in three ways. First, and most easily observable, is the energizing effect that frequent, local, and high-quality training is having on child care staff and administrators. Second is the forming of links between groups representing various aspects of child care and early education. Third is the greater public awareness of what constitutes high quality child care and why it is important for children to have high quality care.

This paper will present a description of the programs developed by the TRC to enhance the quality of child care in a rural region. The TRC staff members who created the programs conceived of the entire quality child care project as a systems intervention (Powell & Sigel, 1991), one that must address the problem from multiple points of view and take into account a variety of factors that impact on the situation.

Review of the Literature

Intervention programs in the field of early childhood education and child development have long been characterized as requiring a systems approach to both the development and implementation of the program (Bronfenbrenner, 1979). It has been understood that a comprehensive, holistic approach to meeting the needs of children and their families was more likely to produce the desired outcome because of the attention to multiple aspects of the problem. Early intervention programs such as Head Start have made a positive impact on low income families by providing a child support system including nutritional, medical, dental, and social services, as well as preschool education (U.S. Department of Health and Human Services, 1981). The level of education of early childhood teachers and the professionalization of the early childhood workforce have been areas of concern nationally as well as in Tennessee. Research demonstrated that the single most important characteristic in improving quality in early childhood classrooms, either preschool or primary, is the education level
of the teacher (Gestwicki, 1995). In-service training provided by professionals with both appropriate levels of education and classroom experience has been shown to be of value in improving teachers' skills; however, poor quality training had a negative effect on teachers' attitudes toward their jobs (Ayers, 1989). In centers where teams of directors, teachers, and parents work together to achieve accreditation by NAEYC, staff morale was enhanced (NAEYC, 1991).

A critical issue facing child care and all of early childhood education is limited funding from both state and national governments (Kagan, 1989). Child care is still seen as the province of welfare families. This is reflected in the administration of most publicly funded early childhood programs by state and national departments of human services rather than by departments of education. Child care programs funded by public dollars for working families are few and far between. As a result, most of the child care is a small business with all functions tied to what the parents purchasing the service can afford to pay. Most parents cannot afford the complete cost of high-quality child care (General Accounting Office, 1990) and are forced to select child care that is not of high quality. Owners of a child care business are generally not trained in business practices and often are forced to close due to business difficulties. The raising of public awareness of these issues has long been a national focus, but it has been difficult to arrange consistent grassroots support for increased state and federal dollars among child care personnel on the local level.

Project Description

In support of the overall project goal of improving child care in the Upper Cumberland, six types of programming were developed: staff and administrators training, linking child care agencies and professional groups, parent and public awareness of issues surrounding quality care, improved access to resources for child care staff, improved business practices for child care, and NAEYC accreditation. Day care licensing and the Child Care Administrators Association had already generated some activity in these areas prior to the arrival of the TRC. However, the general feeling in the early childhood community was one of resignation.
There were many strong individuals working alone or in small groups who were ready to give in to frustration. Travel times of up to three hours across the region, no training funds, and no central management for training had taken their toll over the years. As one licensing counselor expressed, "It gets to the point where you are embarrassed to ask the same few people to drive across the region and not even be able to pay their mileage."

A critical first move was to identify community child care leaders and support them with mentoring, networking, and an occasional lunch. The perception of the TRC staff was that these directors and licensing counselors would continue to be key personnel for many years and helping them to further develop would have a widespread effect predicted by the systems model. These leaders chose development of a bi-monthly advanced seminar, selection of materials for the library circulation project, and creation of a training calendar committee that would meet quarterly to organize training and develop a calendar to be mailed to all licensed programs as their work. This committee became the central steering committee for quality improvement. Six centers were also involved with the first round of accreditation.

Once the community leadership was in place and familiar with TRC staff and function, the six programming areas were established. Working with directors, day care licensing counselors, and local professional groups, doors opened, and the work began.

Staff and Administrators' Training

Early in the project, training consisted of two-hour topical workshops. Suggestions from the training calendar committee and from workshop participants led to the creation of a variety of formats (see Figure 2). While the TRC staff and other outside professionals continue to present training, some types of training, such as new hire (for new staff) and new director, were presented by center-based staff. Topics for training covered the full range of early childhood interests from prevention of lead poisoning to group games for five- to eight-year olds.

Linking Child Care Agencies and Professional Groups

The original group of child-care leaders who formed the training calendar committee was the first point of outreach for this
initiative. This group and the TRC staff now have representation on most of the boards and committees of all early childhood groups in the region. Other linking activities included sharing responsibility for each other’s meetings and mini-conferences and multi-group trips to state and national conferences such as NAEYC, Tennessee Association for the Education of Young Children, and Southern Early Childhood Association.

Parent and Public Awareness of Issues Surrounding Quality Care

Workshops for parents were held at child care centers and elementary schools. Key topics at these meetings were developmentally appropriate practice, center accreditation, and readiness issues. In addition to center-based parent activities, two speakers of national stature, Kim Means and Madelyn Swift, were brought to Cookeville for public addresses and were taped for later broadcast on the local PBS station, WCTE. Three other television programs on topics related to families and/or child care, Jewish Families in the Upper Cumberland, Celebration of the Week of the Young Child, and Introducing the TRC, were produced in conjunction with WCTE.

Improved Access to Resources for Child Care Staff

The isolation of rural communities often means limited awareness of and access to teaching resources. At one of the early TRC workshops, a child care center director was concerned because she did not know where she could purchase a child-size wooden table. The TRC staff gave her a list of toll free numbers for manufacturers of classroom furniture. As a result of this event, a portable catalog file was developed and taken to all trainings.

A second project involved a cooperative arrangement with two regional libraries, day care licensing, and the TRC. Working with the training calendar committee, print and video materials for teachers, directors, and parents, and books and supporting activity materials for children were purchased and placed at the libraries. Special book packs provided parents and day care home providers with a package including a book, learning materials, and lesson plans for activities for preschool and primary school age children. The regional libraries are resources for local, public libraries and bookmobiles. All child care facilities and local libraries will have the full bibliography of this collection and can
call the regional library to have materials delivered to the closest library.

**Improved Business Practice for Child Care**

Most child care directors have little training in managing a business, yet over half of the child care available in the Upper Cumberland region is proprietary. Day care licensing can assist these directors in fire and safety issues and, to some extent, with programs, but the director must gain business skills on her own. Most learn the hard way. For instance, day care licensing referred a new director to TRC. She had just opened her franchise child care center the previous week. TRC received the call on a Monday. She needed to get a payroll out on Friday and did not know how to do this. At this point TRC began to compile a list of accountants, insurance agents, lawyers, and state and federal regulators who would be willing to work with child care directors. In consultation with directors, TRC has developed training about personnel handbooks, staff management, interviewing, federal labor laws, implications of ADA for child care, and marketing.

**NAEYC Accreditation**

Over a decade ago, the NAEYC created an assessment tool for child care centers based on developmentally appropriate practice, their term for high quality. The assessment is a self study that is validated by an outside professional with training in validation. All of those materials are then judged by a panel of experts at the NAEYC Headquarters in Washington, D.C. When the TRC began its work in child care, there were no accredited centers in the region and, therefore, no designated models of programmatic excellence. Six centers were part of the first cohort of centers to attempt the self study and apply for accreditation. TRC assisted these centers by providing mentoring to the director, training to the staff, taking the six directors to the national conference for direct exposure to staff from other centers that had achieved accreditation, and paying for the cost of the accreditation.

**Outcomes and Discussion**

The quality child care program has completed 15 months of work at this writing. We have learned far more than we have taught. We have worked hard, much, and well, but the work yet
to be done is staggering. Some of our work has sustainability and will continue after our two-year project ends, but most cannot.

One center achieved NAEYC accreditation this year. One is in self study. Two are still “looking at it”. Two have decided not to proceed with the process at this point. At least three centers in the Cordell Hull Head Start program (part of our region) achieved accreditation. This success is very important not only for the professionalization of child care in the region but also for attracting state and block grant funding, which often requires the presence of accredited centers.

The training calendar committee has always been housed with day care licensing because of the mailing lists. The licensing counselors have a need to seek out and/or provide training that meets state in-service requirements. The committee has been successful in bringing diverse groups together to meet each other’s needs.

The group of business and professional community members that has loosely organized to meet the needs of the child care community will continue to be available to the centers and homes. They have discovered that child care businesses are good clients. However, new directors and owners need to know of the availability of these resources.

The library circulation materials will be available as long as they remain current and in good condition. There is no money to replace or repair items.

Over 1,200 directors and staff have been trained in the past 15 months. Training has been held in 10 of 14 counties. After ten months, we averaged 23 people at a training session. TRC staff was told that child care staff would not travel, would not come out late, and would not come out on weekends—this had been the recent experience of other trainers. We charged no fees, we served refreshments, we had nice door prizes, and we presented interesting, appropriate, and relevant training. The day care licensing staff promoted our training, and word-of-mouth was significant. The child care staff came! In fact, some came from as far away as 100 miles.

Some directors and staff have attended as many as five training sessions this year. One director who drives as many as 60 miles to a session with a car full of staff said, “These workshops
are always good. My teachers can take home something to do the next day, and I have things to think about until we come to another one.” Another attendance award winner is a Head Start cook who finds that, “What I learn here is important on my job even if I’m not a teacher. I’m around the kids, and I need to talk right to them. I also try everything out on my daughter.”

The television programs and speakers the TRC sponsored this year had a potential audience of 150,000 people. During the year people would report seeing us on television, but it was difficult to know if they had heard us as well. One viewer did comment after seeing the segment on Jewish Families in the Upper Cumberland that she had never thought before how difficult it must be to be part of a very small minority.

Sadly, two of our leader/directors left the child care arena for the less stressful, better paying jobs in public school. This is a problem child care faces everywhere as the work pays very poorly, has long hours, has high stress, has virtually no benefits, and offers no extended vacation away from children. As long as child care staff must subsidize the children’s parents’ salaries by taking a lower salary themselves, the talent drain will continue.

Conclusions

The Upper Cumberland needs the TRC. Every neighborhood needs a TRC as an investment in its children and a support for families. In the Upper Cumberland, the TRC has facilitated the development of several committee structures that have the potential to live beyond TRC support. Groups of people with interests in early childhood education can now dialogue and plan for the betterment of all. Centers were accredited, and teachers were supported. Information was exchanged, discussed, and applied. The TRC staff walked with child care allies, and everyone grew. Perhaps the words of a brand new teacher say it for all of us, “I learned that what I am doing is really important work, and I should be proud of myself.”

The lesson learned here is no different from what colleagues nationwide have learned. Substantially more resources must be made available to child care providers to support programs, staff, and administration. Unless that is accomplished, training committees and library resources are only temporary solutions that
build morale for one more day but do not address long standing needs of families and communities. Child care has depended upon the good will of the providers. However, the work funded by the W. K. Kellogg Foundation has been the beginning of long term partnerships among families, communities, and the partners of the TRC to address the long standing child care needs of the Upper Cumberland.

Figure 1

*Training Resource Center Sponsoring Partners*

<table>
<thead>
<tr>
<th>University (current host agency)</th>
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<tbody>
<tr>
<td>Tennessee Technological University (current host agency)</td>
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<tr>
<td>Upper Cumberland Community Services Agency (original host agency)</td>
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<td>Upper Cumberland Human Resources Agency</td>
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<td>Tennessee Department of Health</td>
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<td>Tennessee Commission on Children and Youth</td>
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<tr>
<td>Rural Cumberland Resources</td>
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<tr>
<td>Livingston, Byrdstown, Jamestown, and Cookeville Head Start, Inc.</td>
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Figure 2

*Types of Child Care Training Developed*

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<th>State funded</th>
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<td>In-service administrators</td>
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<tr>
<td>New hire training</td>
<td>Tennessee Early Childhood Training Alliance (TECTA)</td>
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<th>Topical workshops</th>
<th>Topical workshops</th>
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<td>Make-n-take workshop</td>
<td>Consultation</td>
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<td>Center-specific training</td>
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<td>Special topics group</td>
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<td>Mini-conference</td>
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References


