The purpose of this study was to develop a preliminary understanding of the nature of provider-parent relationships in family day care homes, as revealed through interviews with providers and parents and observations of their interactions in a small number of day care homes. The study relied primarily on the theoretical and methodological perspective of interpretive interactionism: an approach that illuminates themes, as they emerge, in the experiences and perspectives of social actors in everyday situations. Included is a discussion of the perspectives of both parents and providers regarding their satisfaction with each other and the extent and content of their communication and collaboration. Findings suggested that there may be little communication or collaboration between providers and parents that is related to their expectations and the children's ongoing experience and development. Possible explanations for this finding and the implications it raises for quality care in family day care homes are discussed. (RH)
Invisible Boundaries:
An Interpretive Study of Parent-Provider Relationships

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Running head: PARENT-PROVIDER RELATIONSHIPS

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Invisible Boundaries:
An Interpretive Study of Parent-Provider Relationships

Abstract
This study is a description of provider-parent relationships in family day care homes, as revealed through interviews with providers and parents, and observations of their interactions in a small number of day care homes. Included is a discussion of the perspectives of both parents and providers regarding their satisfaction with each other and the extent and content of their communication and collaboration. This study suggests that there may be little communication or collaboration between providers and parents that is related to their expectations and the children's ongoing experience and development. Possible explanations for this and the implications it raises for quality care in family day care homes are discussed.
Invisible Boundaries:
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Introduction

Parent involvement has long been considered an important component of early childhood programs, primarily because of the benefits such involvement is understood to have on children's development (Select Committee 1954, Honig, 1982; Becher, 1980). Parent involvement is a broad term which can encompass many aspects of the parent-caregiver relationship. Historically, the focus of parent involvement has been on educating parents in an effort to maximize and maintain the benefits children gain in early childhood programs. Parent involvement programs also arose out of a recognition for parents' rights in regard to their children's programs. Sometimes parent involvement refers to the active participation of parents in their children's programs.

For the most part, as Powell (1978, 1980) and Shapiro (1977) point out, studies of parent involvement have focused on two aspects: parent education and the role of parents in policy-making. Little, however, has been known about the extent to which parents really do participate in their children's programs, and the nature of their participation (Smith & Robbins, 1982), or the perceptions of parents as child care arrangements are made and maintained (Fein, 1980). Another dimension of parent-involvement that has been given little research attention concerns the daily interactions between caregivers and parents,
and the perspectives of both parents and caregivers on these interactions (Powell, 1980).

 Concerns about the parent-caregiver relationship are based on the assumption that a close relationship is in the best interests of the child, as good communication alleviates discontinuity between home and day care (Powell, 1980; Zigler and Turner, 1982). Such a relationship is perceived as a partnership between the parent and caregiver -- a partnership in which each shares information and expectations with the other. This partnership depends on frequent and ongoing communication (Belsky, Steinberg & Walker, 1982; ______ & ______, 1985).

 With few exceptions (Davison, Ellis, & Colliver, 1980; Hughes, 1985), studies of parent-caregiver relationships have focused on center-based programs (e.g. Zigler and Turner, 1982; Powell, 1978, 1980). It is not clear to what extent findings from these studies can be applied to family day care homes, yet the majority of children in day care are in family day care homes (Ad Hoc Day Care Coalition, 1985; Divine-Hawkins, 1981). An estimated 1.5 to 2 million providers care for about six million children (Children's Foundation, 1986). Further, it is those least able to communicate about their day care experiences -- infants and toddlers -- who are in these day care homes. Pence & Goelman (1987) suggest that family day care parents are significantly different from parents who use center-based day care.
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care. These facts make attention to the parent-provider relationship critical.

The characteristics, needs, preferences and satisfaction of parents using day care homes were examined in the National Day Care Home Study (NDCHS) (Fosburg, 1981). The authors found, overall, a positive and high level of involvement between providers and parents (Fosburg, 1981; Singer, Fosburg, Goodson & Smith, 1980). The nature of this involvement was not defined, but the report focused on parent-caregiver communication. Hughes (1985) also gathered information on communication between providers and parents and concluded that providers are a source of information and support for parents but need information on how to talk with parents. Both these studies relied on interviews with parents and/or providers for data about the relationship. Neither study, however, involved actual observations and descriptions of parent-provider interactions or compared the perspectives of parents with the perspectives of the providers.

Powell has suggested that "parent-caregiver relations are embedded in a highly complex day care-family relationship," and that this "relationship is best understood within its socioecological context" (1980, p. 222). For parents and family day care providers, part of this context is the day care home setting in which the interactions between parents and providers occur. Therefore, an understanding of the parent-provider
relationship necessitates observing and recording what actually transpires between parents and providers in the day care home setting.

The purpose of this study, then, was to develop a preliminary understanding of the nature of parent-provider relationships, regarding the extent and content of their communication and collaboration and which would incorporate the perspectives of both parents and providers, as revealed through interviews and observations of their daily interactions.

Method

This study relied primarily on the theoretical and methodological perspective of interpretive interactionism, developed by Norman K. Denzin (1988, 1987). Interpretive interactionism builds upon the traditions of symbolic interactionism, interpretive phenomenology and hermeneutics. The primary focus of interpretive investigations is to describe, interpret, and understand the ongoing experiences and perspectives of others in everyday situations, illuminating themes as they emerge. For the purposes of this study, this encompassed describing and interpreting the perspectives of parents and providers, as revealed by them during open-ended interviews, and observed interactions between them.

The data for this report were collected in three phases, as part of a larger study of family day care (see ______ and ______, 1986; ______ & ______, in press). The first phase
involved open-ended interviews with day care home providers. The second phase involved immersion to the day care home setting, as participant-observers. The third phase included interviews with parents of children enrolled in these day care homes.

Phase I: Interviews with Providers

Provider selection. A total of 31 providers were interviewed regarding their relationships with parents. They were representative with respect to race, income, and education of a sample of 150 providers who had previously participated in a telephone survey (see ________ & __________, 1986). The sample of 150 providers included 94% of all practicing licensed day care home providers in a midwest university community (population 100,000). (See Table 1 for demographic characteristics of the 31 providers.)

Insert Table 1 about here

Interviews. The interviews were open-ended, ranging from 30 minutes to just over an hour. Providers were asked what experiences they thought parents wanted for their children, about the frequency and content of their communication with parents, and their feelings in general about the parent-provider relationship. Each interview was tape-recorded and transcribed. Interview responses were classified according to themes which emerged from a review of all the responses. These themes are presented in Tables 4 and 5, and will be discussed later.
Phase II: Observations

Participants. Given the preliminary, exploratory nature of this interpretive study (see _____ & ______, in press), only six providers were selected for the observational phase from among the 31 providers who were interviewed. Selected providers cared for a minimum of four children, at least two of whom were under the age of three. We attempted to select providers who were different from each other, but still representative of the range of experience, education, race, training and age among the original 31 providers (see Table 2).

Data collection and interpretation. Over a 10-month period, four researchers, as participant-observers made approximately 20, two-hour visits to each home. Times of the visits varied systematically to make possible a description of the entire day. Of particular relevance to this report, an effort was made to schedule a number of visits during transition points when most parent-provider interactions were likely to occur (Powell, 1978). Over the 10-month period, more than 45 children and 60 parents were observed.

Detailed descriptions of each visit were recorded by the researcher, as she reconstructed and reflected on the day's events. Thus, collection and interpretation of descriptive data were ongoing and interrelated processes.
Phase III: Interviews with Parents

Towards the end of the 10-month observational phase, researchers approached parents whose children had regularly attended to ask their participation in interviews. These parents were familiar with the researcher's presence in their children's day care homes, having signed consent forms and frequently having seen the observer during their arrivals and departures. From a total of 22 families that were asked to participate, 17 families agreed to be interviewed in their homes. (Characteristics of these parents are presented in Table 3.)

Interview procedures and analysis were the same as for provider interviews. See Tables 4 and 5 for parents' responses to questions regarding the day care experiences they desire for their children, the frequency and content of communication they have with providers, and their attitudes in general about the parent-provider relationship.

Understandings from Interview and Observation Data

Over time, understandings related to parent-provider relationships were revealed upon analysis of both the interview and observational data. These understandings are presented in the following pages.
Desired Experiences for Children

A comparison of interview responses of providers and parents (see Table 4) regarding what experiences parents want their children to have in care, and what providers think parents want, revealed few differences. Both, although more often providers, wanted the children to receive "motherly attention" and general supervision while in the day care home. These themes were revealed by providers with such comments as, "to give children the tender, loving care their parents would give them at home," and "to keep children safe and well-fed." Parents, although less often, expressed these ideas similarly: "to be supervised, have time to play, have a good, hot lunch."

Parents emphasized opportunities for social interaction and play considerably more often than providers; as suggested by responses such as "mostly just learning how to get along with other children." A few parents believed the amount of attention and developmental stimulation was inadequate, but none thought it was important to teach academics, although a small number of providers did.

All parents expressed the belief that their children were having the experiences their parents desired for them, with comments such as "I think the care there is exactly what they would get at home." Some parents elaborated, stating that their children benefited by being in a "family" environment and having the opportunity to interact with other children. Parents
expressed beliefs that their children's development was enhanced by attending the day care home, as typified by these responses: "Jamie has learned to do more on her own," and "Chris has increased social ability."

**Observation in the day care home**

Spending time in the day care home may be one way parents learn about the nature of their children's care. Yet almost half of the parents said they never visit or observe the home during the day; those that did, did so only "occasionally" or only at arrival/departure times. Given that parents reported they rarely, if ever, observed in their children's day care homes, a question emerges regarding the basis for their confidence in the care their children were receiving. How did parents gain awareness of their children's experiences? Reports on and observations of the communication between parents and providers were looked at for possible explanations of how parents arrived at understandings about their children's ongoing experiences, as well as their confidence in the providers' care.

**Attitudes toward communication**

During interviews, 82% of the parents said they felt it was very important to talk with the provider, "to keep informed" about their child's day and ongoing development. Consistent with this were the reports of the majority of parents and providers that when conversations did take place, the focus was on the
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children. Parents also reported more general conversation and exchanges about day care business, for example, schedules and fees, than did the providers. Parents who felt talks with their children's provider weren't very important said this was "because we know what each other's doing."

Amount of Communication

Parents and providers differed in their reports on the amount of time they spent talking with each other. While all the parents reported they spent at least some time talking with providers each day, 17% of the providers said they didn't talk much with parents at all. A number of parents and providers said the time they spent in discussion "varied" from day to day. Some said they spent 10 minutes or less per day talking. More than half of the parents reported they talked as much as 20 minutes each day with providers, but only about a third of providers agreed with this estimate.

The observational phase of the study provided another perspective on the time parents and providers spent talking. Although there was some variation, as reported, observed interactions between parents and providers typically were brief, rarely lasting more than a few minutes.

Content of Communication

Ongoing observations during arrival and departure times revealed, in spite of what parents and providers reported, that very little information may actually be exchanged about
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the children. Most often a brief comment on the day, the child's health, or progress in toilet training was the extent of the observed exchanges. The following field notes provide some typical examples.

Emily's mom, smiling, arrived and began to dress Emily (21 months). She asked the provider how Emily was today. Emily's mom was told that Emily only wet her pants twice today. Mom reacted pleased, "That's good!" While Emily's mom looked for her coat, the provider played with Vicki (25 months). Mom returned from the bedroom and commented that she liked how the children's cots were arranged. The provider did not respond. Emily's shoe was missing and everyone but the provider, who did not get up from the couch, looked for it. Mom said the car was running. The provider left the living room to go to the bathroom; meanwhile Mom began to look for a tissue. Just then the provider's teenage daughter came upstairs and gave Mom a napkin because the tissue was in the bathroom. Mom then dressed Emily, saying, "You used the potty today," in a pleased tone. As they left they called, "bye-bye, see you tomorrow." The provider, out of the bathroom now, responded and smiled.

Patrick's Mom dropped him off at 8:30. She seemed very at ease with the provider. She told the provider:
that Patrick (22 months) hadn't slept well the night before and that he hadn't had a bowel movement. She also said she had given him some cough medicine. The provider said that he hadn't coughed much yesterday, maybe it was just when he gets up in the morning. Patrick's mom said goodbye and left without further discussion.

Very rarely were providers observed talking to parents about their ongoing goals and the experiences provided for the children. When such conversations did occur, they were also brief, as the following field notes illustrate.

Maggie's Mom commented that Maggie (30 months) was starting to count. The provider said that they work on counting and naming colors everyday. I have not seen this yet, although it seems the provider does name colors and count when an informal occasion arises to do so.

Some providers rarely initiated talks with parents; moreover when parents initiated conversations, these providers' responses were limited. The following field notes illustrate:

Roberta's father arrived to pick her up. While he waited by the door for Roberta (5 years) to put on her coat, he talked to the provider about lice. She replied "yea, well," and smiled. Dad asked if Mario (9 months)
was walking now or just able to hold on. The provider replied, "holding on." Dad was soft spoken and conversational, showing interest in the other children. The provider did not get up while he was there, and talked to him from the couch.

In this same home, it was often observed that neither parent nor child was greeted upon their arrival:

Rachael's mom arrived while the provider was in the middle of a conversation with me. The provider did not greet the mother. The mother looked at us while she dressed Rachael (18 months). When she was ready to leave, she had Rachael give the provider a kiss goodbye. Then Rachael hugged me and went into the kitchen to say goodbye to the adults in there. Then Rachael and her mother left, with no words having been exchanged between the mother and the provider.

Other times, it seemed interactions were limited because the parents come and go in a hurry.

The baby's mother came in and asked the provider, "is she in the playpen?" She went to her child and said "Hi, sexy," and "Hi, beautiful." She got her diaper bag together, picked up her baby, and left with no further exchanges between her and the provider.

Shortly after I arrived a mother came in and dropped off her kindergartener. The provider stayed in the
kitchen while Mom was at the door. The child undressed himself without help. He told his mother he didn't want to stay. Mom impatiently said "Come on!" and left. The boy came in the living room and immediately began talking to me, whom he had never seen before. The provider stayed in the kitchen.

**Parent-Provider Relationship**

Although not apparent in the above descriptions of parent-provider interactions, both parents and providers reported positive feelings about their relationships. Most parents described the relationship as "friendly," describing the provider as "a person I'm comfortable with and that I feel like she's real responsible, someone I can trust with my kids." Some went so far as to describe the relationship as like "family," saying of the provider, "if she were a relative, she'd be like a grandmother to me, or an older sister." Fewer providers described their feelings about parents this way, but the majority characterized the relationship as "good." No parent or provider reported negative feelings during interviews, but, as will be discussed later, during the participant-observation phase of the study some providers did reveal negative feelings.

Parents' feelings that the relationship was friendly or family-like were often revealed in the interest parents demonstrated in children other than their own. Even during short transitions parents frequently acknowledged and often took
for friendly interactions with other children who were present in the day care home. The following field notes provide an example.

Cindy (22 months) arrived with her mom and dad. They had brought a lot of toys and handed them out to the different children as they talked to each. They brought three play phones and gave one to Danny (9 months), one to Ed (24 months), and the last to Lorrie (5 years). The parents also took out three plastic horses and three books. The children played with all these things and the parents talked to each of the children.

**Parent-Provider Partnership**

Although neither parents or providers described their relationship as a partnership, emphasis in the literature on parent-caregiver relationships stressing such a partnership influenced us to look for evidence of such during our observations. In only one home, however, did the positive feelings between parents and provider seem to fit the description of a partnership. In this home, the parents regularly stayed and talked for several minutes when they arrived. The provider often asked questions about the families and seemed to know about their daily activities. For example, she knew all about one family's adoption plans and regularly discussed the child's evening and weekend activities with his parents. This provider also knew how another child got a black eye and how his mom broke her ankle at
a softball game. Discussions with families also included children's eating and sleeping routines at home and at the day care.

Parents from this day care home also expressed considerable personal concern for the provider:

The provider mentioned that the parents were very concerned over her illness. They cooperated when she was really feeling bad by only bringing the children when absolutely necessary. They called to find out how she was doing and remembered when she was to get her lab results back and asked about them.

When the provider was feeling pressured and overwhelmed parents communicated their concern:

They suggested that maybe she had too many part-time children coming in and out and that it made it difficult on both her and her full-time children. They offered to pay her more money if she'd consider taking fewer children.

Providers' Problems With Parents

Parents in this study consistently expressed satisfaction with their children's caregivers and the quality of care. Few parents expressed criticisms of the provider, although some desired more attention and developmental stimulation for their children, or wished that the provider had more space or toys. In a survey of 150 providers, which included the six homes in
this study, only 10% reported dealing with parents as one of the least satisfying aspects of their job (_____ & _______, 1986). So it would appear that, on the whole, parent-provider relationships are positive. During the in-depth interviews, however, only 26% of the 31 providers said they had no problems with parents; some said this was due to clarifying expectations and policies at the beginning of enrollment. The other 74% of providers reported problems with parents related to payment, scheduling, procedures when children were ill, and personality conflicts. A few reported problems involving differences of opinion over child rearing issues, e.g. discipline.

Observed interactions between parents and providers did not reflect these conflicts or disagreements expressed during interviews. An understanding of the tenousness of the parent-provider relationship was revealed, however, during the observational phase of this study. During the researchers' visits, providers often expressed to the observer resentment towards, and attitudes critical of, the parents. This finding is consistent with recent studies (see Kontos & Wells, 1986) revealing negative attitudes of center-based caregivers towards parents and contradicts Hughes (1985) conclusion, based on interviews alone, that providers were sympathetic, supportive and encouraging towards parents. The resentment of providers in this study sometimes seemed due to a
perception that the provider was being taken advantage of, as explained in the following field notes.

The provider related a story about how Shelly’s Mom owed her money for a period of two or three weeks that Shelly was at her grandmother’s house (the provider charges for holidays and vacations). After a few phone calls back and forth to find out when Shelly would be returning to day care, the day came when Shelly was supposed to return to day care, and the provider hadn’t heard from the parent. She waited until the next day and then called the place where the Mom worked. She was told that the parent no longer worked there, and had left town last week. The provider was upset that the mother hadn’t told her that she was leaving, that Shelly was not coming back, and that she owed her money. The fact that the mother wasn’t considerate about letting her know she was moving seemed to be the most irritating.

Some of the providers’ criticisms of parents reflected their disagreements with their view of the parents’ child-rearing practices, especially as these practices affected the providers’ care of the children.

The provider suggested that David’s parents promoted a dependency with which she did not agree. She complained that they reinforced his “whining behavior” and said
twice that she couldn't understand why he still took
two naps a day at his age (19 months).

The provider complained that Cindy's parents let her
run their house and get away with everything. They
don't make her eat breakfast and then let her take it
to the day care home to eat later. Cindy (2 years)
doesn't have a bedtime so she gets different amounts of
sleep each night, and is often tired the next day at
the day care home. The provider said she wouldn't put
up with a kid running a house - that's so different
from how she was brought up. The provider said she
doesn't let Cindy control things - that if Cindy is in
one of her moods she just ignores her and that she
can't just sit and hold one kid all the time.

These revelations of providers' critical attitudes
towards parents' child rearing practices are significant in
light of the NDCHS finding that parents felt, in general,
that they were in agreement with their caregiver on
important aspects of child rearing (Singer, et al., 1980).
It is also significant because it seems providers are unable
to discuss and resolve these feelings with parents. Kontos and
Wells (1986) suggest that these negative attitudes may affect the
content of provider-parent communication, and the degree to which
the day care program is a family support service.
Discussion

Interviews with this small number of providers and parents, and observations of the interactions between them, suggest that there may be little communication, collaboration, or coordination between these providers and parents that is related to the expectations of both groups and the children's ongoing experience and development in these day care homes. Why aren't these providers and parents becoming partners in caring for the children? Possible answers to this question may emerge from an examination of some of the characteristics and issues influencing providers' and parents' perspectives, as well as the influence of the day care home setting itself.

Providers' lack of training

Providers' negative feelings about parents and their reluctance to discuss differences of opinion with parents may be exacerbated by the fact that few providers have any specialized training in child care (the majority have a high school education or less) which might prepare them for working with parents. And so, as Almy (1982) found, providers do not find collaboration and communication with parents easy. The idea of most providers that their major responsibility is to "mother" and to provide supervision of a custodial nature (see ______ and ______, 1987) may also explain the lack of collaboration. Providers may be relying on the expertise they've gained through experience as
mothers. This experience may make collaboration with parents seem unnecessary — providers already know how to do their job.

Parents' Perspectives

Consistent with other studies (e.g. Fosburg, 1981; Fuqua & Labesohn, 1986) the parents in this study in the main expressed satisfaction with their children's care. The positive impressions parents have of the care their children receive is difficult to understand given parents' limited communications with providers and the limited time spent observing. Examining the parents' perspective may provide some possible explanations for parents' continuing satisfaction with their providers' care.

Parents' initial perceptions of the quality of care in these homes at the time they decided to place their child may influence their subsequent perceptions. During interviews parents reported that initially they chose their day care home because of specific provider characteristics, for example, her experience and her apparent love for children, as well as perceived program characteristics e.g. a clean house, the ages of other children in attendance. Those parents who knew providers previously may be relying on their prior understandings. Others might still be relying on provider's reputations and the recommendations of others, as almost half did when making their initial decision to place their child. It is still unclear, however, what, over the time their children are in these homes, reinforces these positive impressions of the providers' care.
Brazelton (1973) has noted that as time goes on, parents trust their children's caregivers, and assign more and more responsibility to them. This may be because parents are not clear about what information to ask caregivers (Singer, et al., 1980), lacking what Fuqua and Labeschn (1986) call child care consumer skills. Fein (1980) has also suggested that parents may be naïve, unassertive, or uninformed. In these cases, parents may be relying on the providers' perceived expertise. This expertise, for parents, seems to come from the providers' experiences as mothers. Most parents in this study, as in the NDCSHS (Singer, et al., 1980) felt that experience, not training, was the most important qualification for caregiving. Very few thought any training was necessary. Providers' experience, as mothers and providers, may qualify them as experts in the parents' eyes. Thus parents trust the caregiver, making collaboration (and monitoring) seem unnecessary.

In addition to their perceptions about the quality of care, parents also tended to consider cost and convenience when choosing and maintaining day care arrangements. Given the strains on working families' budgets and time, perhaps parents are "choosing their issues" when refraining from broaching child care concerns with providers.

Some of the satisfaction felt by parents in this study may also be due to their perceptions that their children are
happy in the day care home and have positive feelings for their caregivers. During interviews parents often made comments such as "he's happy to go there," and "they love her to death," "they even want to go there on weekends." For parents, their perceptions of their children's feelings and development may be the ultimate criterion.

The Day Care Home Setting

The fact that child care is taking place in a person's private home, rather than a public center or school, may have an impact on parent-provider interactions. When child care is provided in someone's home, where and how are the boundaries drawn between public and private territories? During their arrivals and departures parents usually stayed by the door, seldom entering the living space of the home. Did they sense they would be intruding into another person's private home? The reluctance of parents to enter homes, and the lack of invitations to do so by some providers may contribute to the brevity of interactions.

Providing child care in a home rather than a center also contributes to the conceptualization of the provider's job, on the part of both parents and providers, as a "babysitter," and not that of a "teacher" or child development specialist. This perception, and the informal environment, may influence the nature of parent-provider discussions. Parents expect teachers to inform them about their child's development, and
most trained teachers consider this part of their role. Most providers, on the other hand, view themselves as second mothers (____ & ______, in press), and may not see themselves as child care professionals with this responsibility. Thus, the day care home setting itself influences not only the nature of care provided, but how parents and providers perceive their roles and how they communicate with each other.

Implications

This study explored the nature of parent-provider relationships in a small number of day care homes. The understandings which have emerged are certainly particular to these six homes, yet may apply to many more homes: at the least, they raise questions and call attention to the need for more research designed to examine and reinterpret the contextual constraints on the parent-provider relationship. For example, how can one provider attend both to arriving parents and a group of very young children? Can, or should, what has been learned about parent involvement in center-based programs be applied to day care homes? If we learn, as I believe we might, that the six homes in this study are "symbolic of the larger child care milieu" (Suransky, 1982), we must address this critical question: What does the lack of a partnership between parents and providers imply for the children in care?

Fein (1980) suggests that parents' lack of information about their children's lives in day care severely limits
their ability to monitor their children's well-being.
Powell (1978) believes that a lack of collaboration between parents and caregivers is detrimental to children's development, because of the fragmentation and discontinuity between the children's worlds of home and day care. The understandings which have emerged from this study emphasize these concerns for the children in all day care homes.

As stated in the beginning of this paper, more children are cared for in day care homes than any other setting. Yet very little attention has been given to the care these children are receiving, how providers can offer quality care in a home setting, and how parents can influence this care. The private nature of the day care home setting contributes to the invisibility of these issues. Yet, if millions of children are spending hours a day in family day care homes, it is critical that efforts be taken to help both parents and providers learn to collaborate with each other. It is especially critical that these efforts take into consideration the unique environment of the family day care home. Public information campaigns and child care resource and referral agencies can help parents know what to expect from providers as well as to express their own expectations. Training day care home providers can help them learn to communicate and collaborate with parents, as well as to see how such partnerships can benefit themselves, the parents, and most importantly, the children in care.
References


Parent-Provider Relationships


Footnote

1During the course of the study it was noted that the number of families enrolled in each home varied over time.
Table 1

**Characteristics of Providers Interviewed (N=71)**

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*(table continues)*
### Parent-Provider Relationships

#### Race
- Nonwhite: 29
- White: 71

#### Combined Family Income
- < $8,000: 6
- $8,000-$12,999: 10
- $15,000-$19,999: 29
- $20,000+: 55

#### Number of Children in Care
- 3-4: 32
- 5-6: 52
- 7-8: 16

#### Ages of Children in Care*
- Under 12 months: 55
- Under 3 years: 93
- Older than 3 years: 61

*Percentages do not total 100 because most providers cared for children in all three age ranges
Table 2

<table>
<thead>
<tr>
<th>Provider</th>
<th>Age</th>
<th>Race</th>
<th>Education</th>
<th>Training</th>
<th>Combined Family Income</th>
<th>Years of Experience</th>
<th>Marital Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>45</td>
<td>Black</td>
<td>11th grade</td>
<td>None</td>
<td>$20,000-30,000</td>
<td>4</td>
<td>Married</td>
</tr>
<tr>
<td>2</td>
<td>24</td>
<td>White</td>
<td>Assoc. Degree</td>
<td>A.D. in Child Care</td>
<td>$20,000-30,000</td>
<td>2</td>
<td>Married</td>
</tr>
<tr>
<td>3</td>
<td>28</td>
<td>White</td>
<td>High School</td>
<td>None</td>
<td>$20,000-30,000</td>
<td>5 1/2</td>
<td>Married</td>
</tr>
<tr>
<td>4</td>
<td>61</td>
<td>Black</td>
<td>High School</td>
<td>None</td>
<td>$20,000-30,000</td>
<td>3</td>
<td>Married</td>
</tr>
<tr>
<td>5</td>
<td>27</td>
<td>White</td>
<td>College Grad.</td>
<td>None</td>
<td>$15,000-20,000</td>
<td>1</td>
<td>Married</td>
</tr>
<tr>
<td>6</td>
<td>30</td>
<td>White</td>
<td>High School</td>
<td>None</td>
<td>$20,000-30,000</td>
<td>2 1/2</td>
<td>Married</td>
</tr>
</tbody>
</table>
Table 3

**Characteristics of Parents** (17 mothers, 5 fathers)

<table>
<thead>
<tr>
<th>Marital status</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>w/partner</td>
<td>88%</td>
</tr>
<tr>
<td>w/out partner</td>
<td>12%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>white</td>
<td>100%</td>
</tr>
<tr>
<td>black</td>
<td>0%</td>
</tr>
<tr>
<td>other</td>
<td>0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ages of children in care</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>under 12 months</td>
<td>05%</td>
</tr>
<tr>
<td>12-23 months</td>
<td>29%</td>
</tr>
<tr>
<td>24-35 months</td>
<td>38%</td>
</tr>
<tr>
<td>3-5 years</td>
<td>14%</td>
</tr>
<tr>
<td>3-6 years</td>
<td>---</td>
</tr>
<tr>
<td>over 5</td>
<td>14%</td>
</tr>
<tr>
<td>over 6</td>
<td>---</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Family Income</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 12,000</td>
<td>0%</td>
</tr>
<tr>
<td>12-17,999</td>
<td>12%</td>
</tr>
<tr>
<td>18,000+</td>
<td>88%</td>
</tr>
</tbody>
</table>

1Two of the parents interviewed were in inter-racial relationships; race of the particular spouse interviewed is indicated.

(table continues)
Parent-Provider Relationships

Education

- hs 06%
- hs 22%
- hs+ 34%
- BA 06%
- MS or more 31%

Parents previously had children in day care home

- yes 65%
- no 35%

Parents previously had children in day care center

- yes 18%
- no 82%

Day care home is parents first day care experience

- yes 59%
- no 41%

Age of child when first enrolled

- under 12 months 62%
- 24 months-23 months 19%
- 3-5 years 09%
- over 5 years 0%

Table 4
### Comparison of Provider and Parent Responses

<table>
<thead>
<tr>
<th>How parents learn about providers</th>
<th>Parents</th>
<th>Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newspaper ad</td>
<td>18%</td>
<td>50%</td>
</tr>
<tr>
<td>Already knew each other</td>
<td>35%</td>
<td>16%</td>
</tr>
<tr>
<td>Referral/word of mouth</td>
<td>41%</td>
<td>77%</td>
</tr>
<tr>
<td>DCFS referral</td>
<td>6%</td>
<td>52%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reasons for selecting particular home</th>
<th>Parents</th>
<th>Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reputation/recommendations</td>
<td>47%</td>
<td>32%</td>
</tr>
<tr>
<td>Program characteristics</td>
<td>59%</td>
<td>42%</td>
</tr>
<tr>
<td>(clean house, age of children, toys, nutrition, individual attention, social-emotional environment)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provider characteristics</td>
<td>70%</td>
<td>35%</td>
</tr>
<tr>
<td>parent (experience, affection, training)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>provider (love of children, dependability)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Convenience</td>
<td>47%</td>
<td>35%</td>
</tr>
<tr>
<td>(location, schedule, cost)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Don't know</td>
<td>0%</td>
<td>22%</td>
</tr>
</tbody>
</table>

**Attitudes toward provider experience and training**

| Neither considered                   | 12%     | 0%        |

*(table continues)*
Parent-Provider Relationships

<table>
<thead>
<tr>
<th>Parents</th>
<th>Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experience is important; training is not</td>
<td>59%</td>
</tr>
<tr>
<td>Training necessary only if lacking experience</td>
<td>0%</td>
</tr>
<tr>
<td>Training is helpful, but not necessary</td>
<td>12%</td>
</tr>
<tr>
<td>Training is necessary</td>
<td>12%</td>
</tr>
<tr>
<td>No response/other</td>
<td>05%</td>
</tr>
</tbody>
</table>

What parents want for children:

| social interaction/development | 70% | 03% |
| individual/motherly attention | 29% | 42% |
| supervision and general care | 29% | 39% |
| play experiences | 47% | 16% |
| teaching or academics | 0% | 16% |
| Don't know | 0% | 13% |

Time per day, on average, providers and parents talk:

| none, "not much" | 0% | 13% |
| 2-10 minutes | 24% | 13% |
| up to 20 minutes | 53% | 35% |
| variable | 23% | 39% |

(table continues)
Topics discussed between parent and provider*

<table>
<thead>
<tr>
<th>Topic</th>
<th>Percentage 1</th>
<th>Percentage 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>the children</td>
<td>76%</td>
<td>71%</td>
</tr>
<tr>
<td>general conversation</td>
<td>41%</td>
<td>19%</td>
</tr>
<tr>
<td>day care business (fees, vacations, etc.)</td>
<td>18%</td>
<td>03%</td>
</tr>
</tbody>
</table>

Relationship between parent and providers*

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Percentage 1</th>
<th>Percentage 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>like family</td>
<td>17%</td>
<td>03%</td>
</tr>
<tr>
<td>businesslike</td>
<td>18%</td>
<td>03%</td>
</tr>
<tr>
<td>friendly</td>
<td>65%</td>
<td>13%</td>
</tr>
<tr>
<td>&quot;good&quot;</td>
<td>23%</td>
<td>71%</td>
</tr>
<tr>
<td>neutral/ok</td>
<td>0%</td>
<td>03%</td>
</tr>
<tr>
<td>NR</td>
<td>0%</td>
<td>06%</td>
</tr>
</tbody>
</table>

*Some providers and parents gave more than one response
Table 5

**Parent Interview Responses**

Child is having desired experiences in day care home

<table>
<thead>
<tr>
<th>Yes</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>0%</td>
</tr>
</tbody>
</table>

Best liked of child's experiences*

| Knowing child is well-cared for/as mother would | 45% |
| Child's interactions with others                | 47% |
| Child is happy                                 | 12% |
| Activities provider does with child            | 25% |

Least liked about day care home

| Nothing                                     | 47% |
| Lack of appropriate attention and developmental stimulation | 12% |
| Child having to be there, not with parent     | 12% |
| Other (e.g. play space is limited)            | 29% |

How child has benefited from day care home

| Being in a family environment                 | 18% |
| Social interaction with others                | 35% |
| Enhanced development                          | 47% |

Child's feelings toward caregiver

| As a child towards mother/affectionate attachment | 65% |

(table continues)
Likes provider
No response

Importance of talks with provider

very important

to obtain information about child's day/
child's benefit

to talk to experienced caregiver, get
advice

to get to know provider

no reason

not very important

because already know what child is
doing/no problems

no reason

Frequency of visits or observations

never

only at arrivals and departures

occasionally

regularly

How day care homes have helped parents meet

needs

able to work without worry

received support and advice

(table continues)
Most difficult part of parenting and using day care:

- finding good day care: 12%
- missing child/leaving child in someone else's care: 53%
- managing roles and conflicting demands in limited time: 29%
- nothing: 17%

Reasons for choosing home over center:

- prefers a home environment: 92%
- convenience, age of child, attention for child: 18%
- center care not available: 18%
- cost (lower): 23%

Will child stay at day care home until school age:

- yes, because:
  - child needs individual attention: 35%
  - don't want to rush schooling: 35%
  - centers are inconvenient: 53%
  - no reason: 17%
- no, because:
  - want to prepare child for school: 50%
  - no reason: 50%
  - undecided: 18%

*Some parents gave more than one response.