A4: *Professional Development to Promote Relationship-Based Caregiving, and Social-Emotional Learning among Children Birth through Age Five*
Wednesday, April 17, 2019
10:45 a.m. – 12:00 p.m. | *Burnham*

1. Descriptive Information

A4: *Professional Development to Promote Relationship-Based Caregiving, and Social-Emotional Learning among Children Birth through Age Five*
 	
    The purpose of this session is to share and discuss innovative professional development (PD) strategies to support the early care and education (ECE) workforce in promoting relationship-based caregiving and social-emotional learning (SEL) among children birth through age five. The first presentation shares a new public access infant-toddler program in Texas that has a heavy emphasis on SEL and warm and responsive caregiving. Tools developed to support infant-toddler teachers will be demonstrated and the design of a rigorous study of the coaching model supporting implementation of this program will be described. The second presentation describes how the Pyramid Model is being used as the content basis for a Breakthrough Series Collaborative with ECE programs in Boston to promote SEL through organizational culture change as part of the OPRE-funded Culture of Continuous Learning Project. The third presentation shares descriptive analyses from the OPRE-funded California Child Care Research Partnership that documents how family child care (FCC) providers form and use a cultural (mental) model of Close Relationships to support SEL, and FCC providers' perceptions of the quality improvement initiatives in which they have participated that seem to support SEL. The facilitator will moderate a general discussion on promising strategies for promoting relationship-based caregiving and social-emotional learning among children, considering the benefits of (and barriers to) individualized approaches, cohort approaches, and organization-wide PD approaches for both center-based and home-based settings.
	Facilitator
	    Tamara Halle, Child Trends
	
	Presenters
	    April Crawford, Children's Learning Institute
		The CIRCLE Infant & Toddler Teacher Training Program
		
		    Stephanie Doyle, Center for the Study of Social Policy
			The Breakthrough Series Collaborative: A CQI Approach to Implement the Pyramid Model in Early Education Centers
			
			    Holli Tonyan, California State University, Northridge
				Close Relationships - Family Child Care Providers' Support for Social and Emotional Learning in Their Everyday Lives
				
				Scribe
				    Gabi Kirsch, ICF

2. Documents Available on Website

- o [Professional Development PowerPoints](#) (contains all speakers' presentations)

3. Brief Summary of Presentations

- **Tamara Halle, Child Trends**
  - o Tamara covered the definitions of relationship-based caregiving and social emotional learning (SEL) as they apply to caregiving for children birth through five years old. She introduced the speakers.

- Holli Tonyan, California State University, Northridge | *Close Relationships - Family Child Care Providers' Support for Social and Emotional Learning in Their Everyday Lives*
  - o **Theoretical background.** What we do leads us to who we become, like stepping stones to development. This project focused on daily routine activities. The Eco (logical) cultural theory focuses on daily activities that are situated in a cultural model. The ideas that we have around what is or isn't important influences what we structure our time on.

- o All family child care (FCC) providers are small business owners. This can range from a single person providing child care to a larger child care facility. Some organizations are hierarchical. Support provided to child care professionals varies.
  - o **Case study portion of the research focusing on licensed childcare providers.** The CA child care policy research partnership was aimed at when child care providers focused on professional development. One question they investigated was: how do you find out information on how to provide child care? They wanted to see what cultural models the providers were using. For some providers, they saw relationships and being together as a valued goal in and of itself. Some providers made choices with time and resources to help children feel loved and have a sense of belonging. Some providers focused on a school readiness cultural model; others focused on a love and affection cultural model. Some providers were high in both cultural models. Other providers prioritized one cultural model over the other. A provider created routine safe spaces for processing emotions. For example, after the weekend, the children had rich stories about their weekends. This person restructured the schedule to provide time for sharing (SEL example). Many providers showed pride in seeing a child's SEL.
  - o **Conclusions and implications.** Despite the potential for strong, close relationships in FCC homes, providers varied in how much they valued and saw love and affection as part of their ecological cultural model for providing care. Holli's work suggests that professional learning could help a wider range of providers. She sees a trend that providers are prioritizing school readiness over social emotional learning.

- April Crawford, Children's Learning Institute | *The CIRCLE Infant & Toddler Teacher Training Program*
  - o The courses are public access everywhere. They are aligned with the early Head Start standards. Her team covers language, early learning skills, physical development, etc. April will focus on the courses in SEL.
  - o The "Connect with Me" course includes specific caregiving strategies to support SEL skill building. Within the "Connect with Me" content, the courses are divided into sub-areas with specific competencies outlined.
  - o April showed a video of a provider reading to children and having them respond to questions like, "how do you think it made him feel?" These videos are included in the courses. While some of these behaviors may seem intuitive, her team finds that many providers are not looking for SEL behaviors with children. They are aiming for the providers to have a "warm response" with children. They feature FAQs from caregivers like, "what does one do with a crying infant?" They introduce expert views into the course. They have developmental checklists.
  - o Right now, her team is working on a pilot in Dallas and Houston. They have 20 target and 20 control teachers. The pilot is early. For their Dallas sample, they were able to understand engagement in the course material. She covered the child measures and teacher measures.
  - o An attendee asked: Many of your teachers have low levels of education. How do you expect these teachers to have an understanding of SEL without having a psychology education? April responded that her team designed for this. The courses can work for providers in larger organizations and a smaller in-home provider.
  - o The directors of these centers had to be willing to participate in the study and they had an informed consent process with the toddler teachers to participate.

- Stephanie Doyle, Center for the Study of Social Policy | *The Breakthrough Series Collaborative: A CQI Approach to Implement the Pyramid Model in Early Education Centers*
  - o This project focuses on quality improvement in child care centers. How can we use a breakthrough series collaborative in supporting and sustaining teacher practices? They are working in Boston, MA.
  - o They are using the pyramid model. This model is a conceptual framework of evidence-based practices for promoting young children's healthy SEL. This project builds on this to understand how to improve training.
  - o A Breakthrough Series Collaborative (BSC) is used in healthcare and child welfare. It brings together multiple organizations that are working towards the same goal. They use continuous quality improvement. They have a supportive collaborative learning environment. As one team may be testing

and learning, they are sharing the information with other organizations. They bring this new learning in the other organization's work. The teams are multi-level (teachers, parents, senior leaders and directors). In addition, there are content experts that help folks apply the model.

- o The driver diagram lays out what the goals are of the program (reducing challenging behaviors and improving SEL). They break down the activities in a center to understand what routines helps teachers move towards these goals. The routines help improve the relationships between the children and the teachers. Family partnerships, racial equity, and cultural responsiveness are all important parts of meeting the goals. The staff also need to be supported.
- o As an example, a center wanted to focus on having a smooth transition for toddlers in the morning. The team started small by changing one behavior with a single teacher and a single child. As one teacher works with one child in the toddler room and finds strategies to improve the child's transition in the morning, the other teachers can learn and start making routine adjustments together. They had multiple cycles to allow teachers to try strategies and take ownership of the process.

4. **Brief Summary of Discussion**
   - o What are the benefits and barriers of some of the professional development approaches? How can center based and home-based providers benefit from these approaches?
     - i. Could these two approaches work together? April believes that the courses in her presentations could be used in the same cycle approach that Stephanie presented.
   - o How do timelines differ with these improvements? You have to think about what your goal is. Could a center see measurable improvements in the time period that the center sets? You want to push yourself but in a way that you can see improvements. This depends on the content that you're focused on.
   - o How is coaching involved in these models? April responded that coaches are available for teachers for three years with a certain number of months available per teacher per month (4 hours per month for the first year, 2 hours per month for the following years). Using coaches to engage in these courses and working with teachers can be impactful.
   - o What is the capacity to have coaches involved? Historically, it has been at the facility level. Recently, it's been more teacher level support for improvement. April's team is at the beginning of this transition, but it's a process.
   - o How do providers have access to the video content? April provides inexpensive tablets.
   - o What needs to be there before you implement one of these models? Stephanie pointed out that in Boston, a lot of the teachers have been trained on the pyramid model. Are there any pre-assessments for the model that April spoke of? The videos that April's team has created shows teachers why their behavior matters for children now and later in their development. Teachers find the expert commentaries very accessible due to the FAQ videos.
   - o How do you know what content to include in the videos? April's team looks at the literature that outlines competency-based behaviors. For example, warmth and responsiveness. They break it down to different facets. They set very small goals where they will practice and master specific aspects of it.
   - o All breakthrough series have 3-8 measures that contribute to outcomes process and the balancing measure to see if something you've done has affected the system. In this case with behavior, they look at a two-hour observation period and see how many challenging behaviors occurred, which behaviors, and what actions triggered those behaviors?
   - o For what age are the videos not applicable? These are for toddlers up to 3 years old. They have more courses for 3-6 years old.
   - o In the individual approaches to supporting a child's SEL, do you see the providers having space to express their emotions? How does this affect turnover? Stephanie responded that for teachers to be able to participate, they need to be responding to their own mental health needs. Since her model focuses on a team approach, she sees this program as developing leadership as it's a more facilitated and supportive approach.
   - o Holli shared her reflections on how these approaches may apply in family child care. Both presentations were new content. She was blown away from the institutional support available in both examples. In her study, 54 child care providers participated in the study. Most are large child care homes. They have more infrastructure and have found their way to supports that exist for them in the community. Some

providers have made time to create space for improvement projects. For many of them, finding the time and resources would be a big challenge.

5. Summary of Key Issues Raised

- *Emerging findings that may be of particular interest to policy-makers and ACF?*
    - o Despite the potential for strong, close relationships in FCC (Family Child Care homes), providers varied in how much they valued and saw love and affection as part of the model for supporting children's development. Holli's work suggests that professional learning could help a wider range of providers. She sees a trend that providers are prioritizing school readiness over social emotional learning.
- *Methodological issues including innovative methodologies that may help maximize resources available for research and evaluation?*
    - o Stephanie presented on a Breakthrough Series Collaborative (BSC). This is used in healthcare and child welfare to bring together multiple organizations that are working towards the same goal. They use continuous quality improvement. They have a supportive collaborative learning environment. As one team may be testing and learning, they are sharing the information with other organizations. They bring this new learning to the other organization's work. The teams are multi-level (teachers, parents, senior leaders and directors). In addition, there are content experts that help folks apply the model.
- *Follow-up activities suggested addressing questions and gaps (e.g., secondary analyses of data, consensus meetings of experts, research synthesis or brief, webinar, etc.)?*
    - o April's videos feature FAQs from caregivers like, "what does one do with a crying infant?" They introduce expert views into the course. They have developmental checklists. These resources may be shared with the larger early child care community.
    - o April's project is in the pilot stage; it will be important to follow up in the future to see what effects the online modules and coaching model has on caregivers' ability to support SEL in infants and toddlers.
    - o The BSC model that Stephanie presented is also in the early stages of being evaluated in the early childhood sector through a feasibility study. It will be important to follow up in the future on the outcomes of that feasibility study and any further evaluation work on the BSC model in ECE settings.
- *Recommendations about future ACF child care research directions and priorities?*
    - o April's team provides child care providers with inexpensive tablets to use as learning resources. This could be explored though ACF (ROI).
    - o Holli was surprised by the institutional support given to center-based providers to participate in innovative professional development and wondered about similar supports and resources for family child care providers to engage in professional development opportunities. This could be explored through ACF.