# Examining agency practices that support family child care well-being and engagement: Findings from the National Study of Family Child Care Networks

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Background

- Home-based child care is the most common child care arrangement for infants and toddlers and for parents working low-wage, non-standard hour jobs.
- The connection between provider well-being and quality may be particularly strong in home-based child care where providers often work long hours alone, isolated from other adults, with limited access to resources.
- FCC networks have potential to offer strengths-based and responsive supports that contribute to provider well-being by facilitating connections to other professionals and engaging providers in professional development.
- Peer support may enhance provider professionalism, self-efficacy, and engagement in quality improvement.
- Relationship-based support is hypothesized as an essential component of high-quality support in home-based child care.

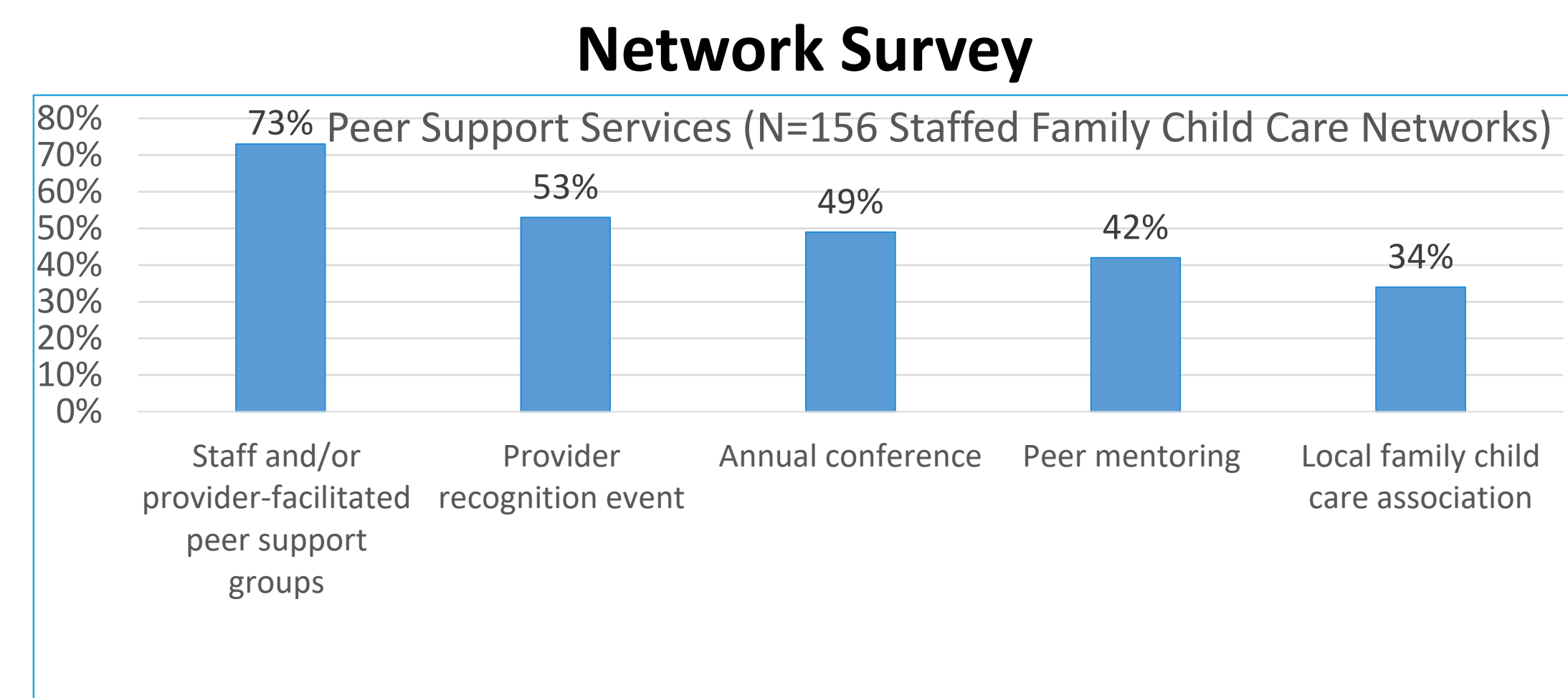### Conceptual model for high-quality support to HBCC
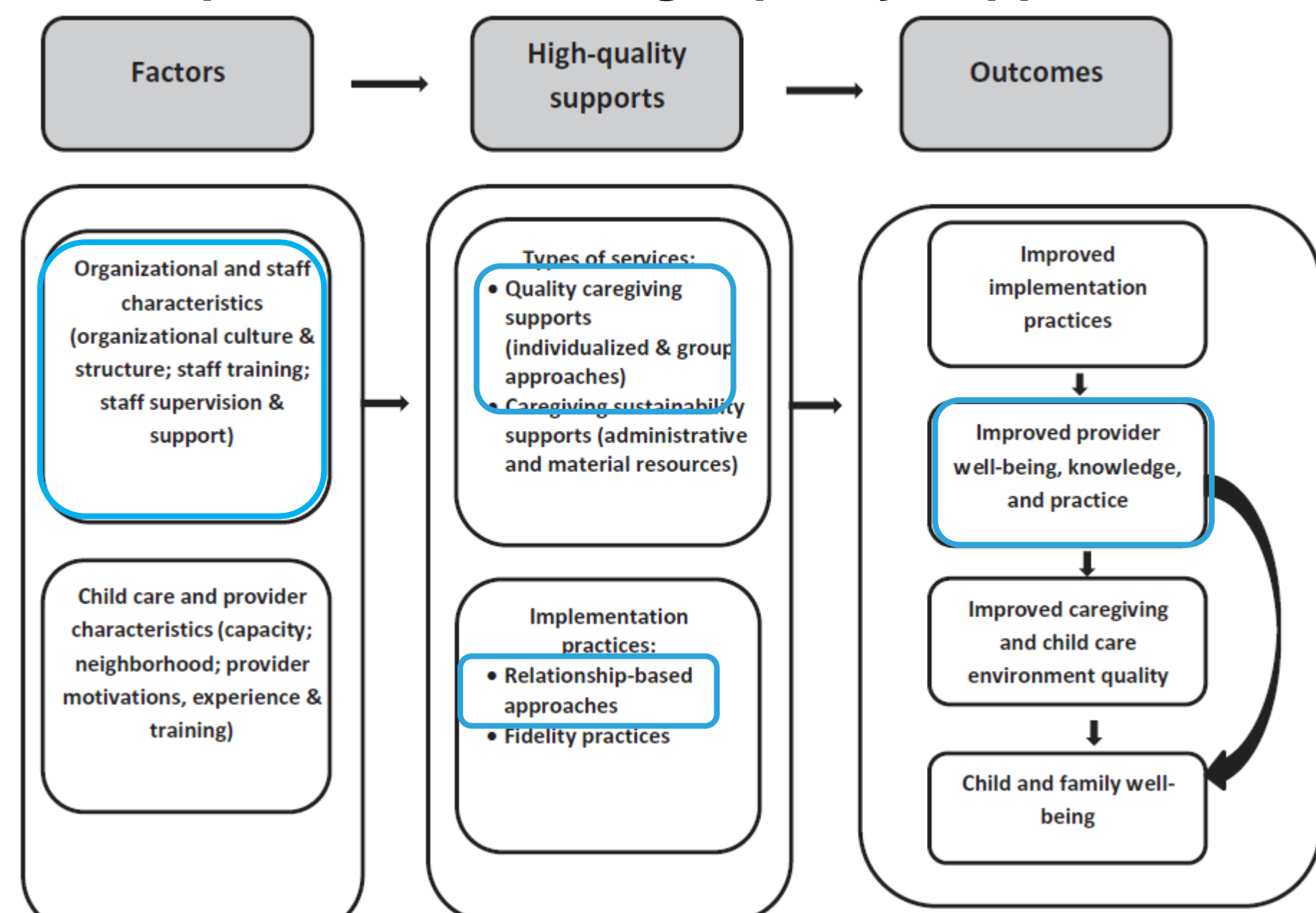
Adapted from Bromer, J. & Korfmacher, J. (2016). Providing high-quality support to home-based child care: A conceptual model. *Early Education & Development, 28* (6), 745-772.

Methods

Web-based Survey (N=156 networks)
- Organizational structure
- Funding sources & budget
- Providers served
- Types of services offered and implementation of services
- Staff and supervision

Interviews (N=46 Network Directors)
- Theory of change/ mission
- Provider recruitment and engagement
- Implementation of visits to homes, training, peer support
- Staffing
- Data collection & evaluation

Staff (N=164) & Provider (N=203) Surveys
- Experiences delivering and receiving support
- Relationship-based service delivery

Network survey sample

FIGURE 2. TYPES OF STAFFED FAMILY CHILD CARE NETWORKS (N = 156)

Findings

Networks use peer support strategies to strengthen provider engagement and professionalism.

Network Survey — 73% Peer Support Services (N=156 Staffed Family Child Care Networks)

Network director interviews

Increasing connections through integrating peer support into training workshops

"They don't feel so isolated and siloed. Working by yourself with a group of children for 16 hours a day, they need adult contact too...It's definitely a networking opportunity for them. It's also an opportunity for professional growth and expansion and being connected to the field."

"It's helped them to know that, 'Ok, I'm not out here on my own, and oh, other people have this problem.'"

Enabling opportunities for provider leadership

"There are some that have been working with us for five plus years...Last week we had a provider advisory meeting, one of them stood up and said, 'All right, ladies, we've been working with the agency now for so many years. It's time for us to start doing things on our own.' I could have fallen off my chair. It was so rewarding just to hear that. It's taken that long to get to the point where they feel they can do things on their own."

Building self-efficacy through informal networking, peer groups, and provider presentations at conferences

"I think they get a lot of personal satisfaction because they can see that they are a professional, that they have the skills to help the others."

"They love the support of each other. They love to be able to say, 'I can help you with this. I've had that same situation...'"

Staff report moderate levels of agency support for their work.

- **Good work environment** (Psychological safety sub-scale; Edmondson, 1999)
- **Some job stress** (hours; wages; conditions; caseload)
- **Limited reflective supervision** (Reflective supervision scale; Korfmacher, Laszewski, Sparr, & Hammel, 2014)

Network staff use relationship-based approaches to engage providers in quality improvement.

Staff report of relationship-based attitudes and practices	N	Mean
Provider-specific knowledge (schedule/ culture/ health/ family)	154	2.65
Acceptance of differing beliefs (childrearing beliefs, values, approaches)	154	3.11
Collaborative goal-setting (agreement on mutual goals)	159	3.44
Cultural perspective-taking (considers values, culture, perspectives of provider)	159	3.49
Emotional bond (affection and respect for provider)	161	3.71

Providers report positive relationships with network specialists.

Provider report of relationship-based support	N	Mean (1-4)
Comfort sharing information (schedule/ culture/ health/ family)	162	3.28
Collaborative goal-setting (agreement on mutual goals)	176	3.42
Emotional bond (perception of specialist's affection/ respect)	169	3.52
Responsiveness (specialist is helpful; relevant; available; empowering)	171	3.52
Caring & respectful specialist	163	3.58
Judgmental specialist	161	1.22

Implications

- Networks may support provider well-being through peer support and relationship-based strategies.
- Network staff report moderate levels of support for their work with home-based child care. Staff may need additional agency support and reflective supervision to help them engage in relationship-based support with providers.
- Staff and providers report engaging in high levels of relationship-based support although staff may need additional training and support around working with providers who hold different childrearing views as well as strategies for learning about and understanding the circumstances of providers served.
- Additional research is needed on how networks use peer support and relationship-based practice to engage providers in quality improvement initiatives and enhance provider well-being.

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