



Diversity, Child Care Quality and Developmental Outcomes

FPG Snapshot

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Abstract

It is widely accepted that high quality child care enhances children's cognitive and social development, but some people question if what constitutes quality care depends on the child's ethnic and cultural background.

To examine this issue, secondary analysis of the two largest U.S. studies of child care — the Cost, Quality, and Outcomes Study and the NICHD Study of Early Child Care — examined if standard measures of child care quality were less reliable or valid for African-American and English-speaking Latino children than for white children.

Widely used measures of child care quality showed comparably high levels of reliability and similar levels of validity for white, African-American, and Latino children.

Analyses examined if cognitive and social skills were related to child care quality, the match between child's and caregiver's ethnic background, and the match between the mother's and caregiver's beliefs about child-rearing.

Results suggest that children from all three ethnic groups showed higher cognitive and social skills on standardized assessments shown to predict school success when caregivers were sensitive and stimulating. Children's skills were not consistently related to whether the child's and caregiver's ethnicity matched or whether the mother's and caregiver's beliefs about child-rearing were similar.

These results suggest that children from all three ethnic groups benefit from sensitive and stimulating care on child outcomes related to school success. These results indicate that the global dimension of quality may be reflected in very different types of practices that reflect cultural differences.

SECONDARY ANALYSIS OF COST, QUALITY & OUTCOMES STUDY

Positive caregiving was moderately correlated with receptive language scores for all three groups, although the magnitude of the correlations was stronger among African-American and Hispanic children than among white children.

Positive caregiving was modestly correlated with the school readiness score for all three groups of children.

No evidence emerged suggesting that positive caregiving was more strongly related to outcomes for white children than for children of color.

Neither positive caregiving nor the child's and caregiver's ethnic match was reliability related to the caregiver's rating of pro-social skills or behavior problems.

In summary, these secondary analyses suggested that children of diverse backgrounds showed better cognitive outcomes when they experienced more sensitive and stimulating child care.

No evidence emerged to indicate that these measures of child care quality were less reliable or valid for African-American or Hispanic children regardless of the ethnicity of their care providers.

SECONDARY ANALYSIS OF NICHD STUDY

Positive caregiving was significantly correlated with all but one outcomes for the white children, and showed similar correlations for the cognitive outcome for both the African-American and Hispanic children.

The extent to which the care provider endorsed traditional attitudes about child-rearing was negatively, albeit modestly, correlated with cognitive outcomes.

Neither the match between mother's and caregiver's attitudes nor the match between the child's and care provider's ethnicity showed a consistent pattern of correlation with outcomes.

No evidence emerged that positive caregiving related to children's outcomes differently depending on the child's ethnicity. The ethnic match between the child and the caregiver did interact with positive caregiving for one outcome. Positive caregiving was significantly related to the mother's rating of pro-social skills when there was an ethnic match between the child and caregiver, but negatively when there was not.

Ethnic match was negatively related to school readiness scores for African-American, but inclusion of family and child care characteristics in the regression analysis resulted in non-significant main effects and interactions.

No evidence of differences among the white, African-American, and Hispanic children emerged in the association between child outcomes and positive caregiving, maternal attitudes, or mother-caregiver discrepancies in attitudes.

Discussion

Analyses of data from these two major studies provide further evidence that standard measures of child care quality provide reliable and valid assessments for children of varying ethnic backgrounds. Although we related quality to standardized measures of child outcome that were developed primarily for white, middle-class children, these measures are linked to school success for all children.

The evidence supporting these measures for all children is strengthened because each of these two large studies included moderate to large numbers of children of color and standard measures of quality. No evidence suggested that measures of sensitive and stimulating caregiving in child care were appropriate only for white children, at least as predictors of outcomes linked to school success, as some have worried.

Standard measures of child care quality showed similar reliability and validity for white, African-American, or English-speaking Hispanic children in both studies. All the child care quality measures showed very good internal consistency for all three groups of children.

Positive and stimulating child care was consistently and positively related to cognitive outcomes across both and to caregiver ratings of social skills in the NICHD SECC.

We did not find stronger association between child care quality and child outcomes for white children than for other children. That is, because quality/ethnicity interactions were non-significant in all analyses and because the within-group associations between quality and outcomes were typically as strong or stronger for African-American and Hispanic children as for white children, it was concluded that these quality measures appear reliable and valid measures of the quality of their child care environments.

In addition, the validity of the child care quality measures seem independent of whether the caregiver and the child had the same or different ethnic backgrounds.

The interaction between child care quality and child-teacher ethnic match was not significant in any of the analyses, regardless of the child's ethnicity.

In addition, there was little evidence that children's outcomes were impaired if they experienced discrepancies between home and child care in terms of the ethnicity of the child and primary care provider. Cognitive and social outcomes did not differ reliably when the child and caregiver had the different ethnic background, regardless of the child's ethnicity. The one exception occurred in analysis of pro-social skills in the NICHD SECC.

Positive caregiving was related to one child outcome (mother ratings of pro-social skills) more strongly when the child was with a caregiver of the same ethnic background, regardless of the classroom quality. It is difficult to explain this without observing similar findings in analyses of similar outcomes. It might suggest that children's social skills are enhanced when families and caregivers share a common cultural background. Or it might suggest that mothers assume that their children are being better socialized when the teacher is of the same ethnicity.

Finally, discrepancies in child-rearing beliefs between home and child care were not significantly related to children's cognitive or social development at 3 years of age in the NICHD SECC. Children whose mothers expressed more authoritarian attitudes about child-rearing scored lower on language and school readiness test and were rated by the mothers as having fewer pro-social skills and more behavior problems. However, whether the caregiver had similar or different beliefs about child-rearing than the mother was not found to be related to children's development. However, the degree to which the caregiver provided sensitive and stimulating care was related to the cognitive outcomes and to one social outcome.

These findings are consistent with other studies that suggest that positive caregiving is beneficial, even if it is inconsistent with family caregiving styles. None of these findings varied among children from the three ethnic backgrounds.

Summary

Our secondary analyses give further evidence that widely used measures of child care quality are positively associated with cognitive and social skills linked to school success for white, African-American, and English-speaking Hispanic children. We found that widely used measures of quality of center child care showed both high levels of reliability and moderate criterion validity for white, African-American, and Latino children.

This is not new or surprising, but it speaks to the frequent speculation that what constitutes high quality child care varies depending on the child's ethnicity and family background.

Almost no evidence emerged in these secondary analyses to support such a belief if a primary goal of child care is to promote academic success for all children.

To the extent that ethnically diverse parents value promoting academic success, society should ensure that those children are given the benefit of high quality early childhood programs.

These programs do not have to employ the same or even similar practices, but they should offer the basic requirements for responsive caregiving and developmentally appropriate stimulation known to support school success for all children in today's society.

This *Snapshot* is based on "Diversity, child care quality and developmental outcomes" by Margaret R. Burchinal and Debby Cryer of the FPG Child Development Institute at The University of North Carolina at Chapel Hill and published in *Early Childhood Research Quarterly*, Vol. 18, No. 4, Winter 2003, pages 401-426. The online journal is at <www.elsevier.com/inca/publications/store/6/2/0/1/8/4/>.



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