

Parent Perceptions about Childcare Quality

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Authors' Notes

This project was funded by the Coordinating Board for Early Education, Department of Social Services, Missouri.

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Abstract

Understanding parent perceptions about childcare quality is important for a number of reasons, including the high reliance on childcare in the US, the wide variability of childcare quality, misunderstandings and lack of education among parents about childcare quality, implications for policy makers and legislators, and generating a definition of childcare quality that includes multiple stakeholder perspectives. The current paper reviews the most recent literature on parents' perceptions about childcare quality. The literature reviewed in this paper suggests that healthy and safe environments, warm and nurturing providers, open and positive caregiver-parent relationships, continued provider education and training, support for learning, and practical considerations such as cost and location are among the top and most frequently stated features parents deem as important for understanding and evaluating childcare quality.

Parent Perceptions about Childcare Quality

Given the breadth of research yielding a positive association between high quality childcare and child outcome, especially among children living in poverty (see Dearing, McCartney, & Taylor, 2009), it is important that caregivers, who make decisions about the type and location of childcare they enroll their children, understand and recognize high quality childcare. Yet, research has found that many parents--and particularly those from low-income backgrounds--base their choice of childcare on cost, convenience, reliability, and external indicators of childcare quality, such as accreditation (Blau & Mocan, 2002; Dinehart, Manfra, Katz, & Hartman, 2012; Henly & Lyons, 2000; Johansen, Leibowitz, & Waite, 1996; Li-Grining & Coley, 2006; Peyton, Jacobs, O'Brien, & Roy, 2001; Raikes, Torquati, Wang, & Shjegstad, 2012; Shlay, Tran, Weinraub, & Harmon, 2005). Because these methods do not always place children at a childcare facility that will promote growth and learning for the children, it is important to understand why parents make the decision they make and whether or not their perceptions about childcare quality might impact childcare enrollment decisions (Early & Burchinal, 2001; Fuller, Holloway, & Liang, 1996).

In this review, we explore the literature on parents' perceptions about childcare quality. Based on an extensive search of the literature, we identified one previous article that reviewed stakeholder perceptions about childcare quality, which included a section on parents' perceptions (Ceglowski & Bacigalupa, 2002). We found the previous review to be short and limited likely due to the dearth of studies on parent perceptions about childcare quality conducted prior to 2002, and the intention of the authors to compare parents' perspectives of quality with researchers', teachers', and children's perspectives. However, since 2002, there have been a significant number of published studies about parents' perceptions of childcare quality. These

new studies provide a more complete understanding on why this topic is important to explore as well as how parents' perceive childcare quality. While we will devote more time to reviewing studies that have conducted since 2002 in detail, we include all relevant work that has been conducted on this topic since the 1980s as this work plays a large role in shaping the more recent studies. In this paper, we first outline several reasons why understand parents' perceptions about childcare quality is an important area of inquiry. We then provide a detailed review and analysis of studies exploring parent perceptions about childcare quality with particular focus on studies conducted within the past 10 years.

Importance of Studying Parent Perceptions about Childcare Quality

While reviewing the literature pertaining to parents' perceptions about childcare quality, it became quite apparent that a variety of reasons were offered for why studying this topic is important. In this section, we review a number of the more prominent reasons for why studying and understanding parents' perceptions about childcare quality is important. These reasons include: (a) the existing high reliance on childcare with approximately 75% of children under the age of 5 years in some form of childcare; (b) the wide variability in the quality of childcare centers in the U.S. with very few centers reaching "high" quality; (c) the misunderstandings among parents and other caregivers about childcare quality or the lack the education to know what childcare quality is; (d) the important implications for policy makers and legislators so they can make more informed policies regarding childcare regulations and subsidies by understanding the quality features; and (e) to provide multiple valid perspectives (that include parents as well as researchers and experts) that will inform and define childcare quality, especially since parents are the primary individuals making decisions regarding childcare placement for their children. Each of these reasons will be discussed individually below.

High Reliance on Childcare in Current Times

In current times, families rely more on childcare services than they did in the past (Kim & Fram, 2009). According to Mulligan, Brimhall, West, and Chapman (2005), approximately 60% of young children under the age of 6 years have been enrolled in a childcare program on a regular basis. It has been argued that the increased numbers of mothers entering the paid work force in the past 30+ years is a possible reason why so many children attend non-parental childcare (Cohen, 1996). Nearly twice as many mothers with children under the age of 6 years are currently in the labor market compared to 30 years ago (U.S. Bureau of Labor Statistics, 2005). Childcare is particularly important to single mothers, who are very likely to use childcare services, are entering the work force at a more rapid rate over the past 20 years than married mothers (Isaacs, 2005), and are spending more of their wages on childcare compared to married mothers (Anderson & Levine, 1999).

Further, childcare is often used by parents as a means of enhancing academic and social skill growth and development, even among parents who do not need childcare due to employment constraints (Ceglowski & Bacigalupa, 2002; Kim & Fram, 2009). Many parents believe that childcare centers can offer developmental opportunities for their children that they cannot offer, including social opportunities (e.g., having their child around other children of the same age) and exposure to academic skills need prior to entering school (i.e., school readiness skills). For example, Brookman and Blanton (2003) found that parents who had the opportunity to send their children to a variety of places selected Head Start programs because of the development and growth opportunities that Head Start programs offer their children.

The increased number of children attending childcare places a large burden on childcare providers to help children make the necessary and expected advances in all developmental

domains (e.g., physical, social, emotional, cognitive, language, health) prior to entering elementary school in Kindergarten. Despite these demands, many childcare centers can only afford to hire staff with limited education and experience. While researchers and experts include these factors as indicators of childcare quality, parents may not. In doing so, parents may intend to send their children to childcare providers to help with pre-Kindergarten academic skill development, and ultimately find that their childcare provider did not provide the necessary environment to promote such development.

Great Range of Childcare Quality

In the U.S., the quality of childcare (using researcher and expert definitions) has been found to vary greatly with most programs falling into the "mediocre quality" category and very few falling into the "high quality" category (Cryer, Tietze, & Wessels, 2002). In addition to high quality care being limited in the U.S., high quality care is also something that tends to be out of most parents' budgets. Thus, it is incredibly important that parents are able to discern the relevant markers of quality in the childcare that is available and affordable because childcare quality matters for child growth, development, and learning in cognitive, social, and health domains (Burchinal, Roberts, Nabors, & Bryant, 1996; NICHD Early Childhood Research Network, 2001; Philips, McCartney, & Scarr, 1987; Whitebook, Howes, & Phillips, 1990; Peisner, 2000; Love, Harrison, Sagi-Shwartz, van IJzendoorn, Ross, Ungerer et al., 2003; NICHD Early Child Care Research Network, 2005; Sylva, Melhuish, Sammons, Siraj-Blatchford & Taggart, 2004). If parents misjudge or overestimate childcare quality, they may be inadvertently sending their children to childcare providers who offer less than optimal care and education, which may directly impact the school readiness skills children have when entering Kindergarten (Fenech et al., 2011).

While the importance of childcare quality is apparent for all children attending childcare, it is especially important for children from low-income and disadvantaged backgrounds (Dearing et al., 2009; Peisner-Feinberg & Burchinal, 1997; Scarr, 1998). Children from low-income families who attended high quality centers have higher achievement throughout schooling and higher wage earning as adults (e.g., Barnett, 1995; Campbell, Ramey, Pungello, Sparling, & Miller-Johnson, 2002; Lamb, 1998; NICHD Early Child Care Research Network & Duncan, 2003; Schweinhart, Montie, Xiang, Barnett, Belfield, & Nores, 2005). Unfortunately, many of the childcare centers located in low-income neighborhoods are not of good or high quality (Burchinal, Nelson, Carlson, & Brooks-Gunn, 2008). Raikes et al. (2012) noted that this may result in low-income parents sending their children to centers they believe as having good education opportunities that are actually most likely low in quality.

Educating Parents about High Quality Care

Without education about what high quality care is, parents who are uninformed on the subject may mistakenly believe they have obtained high quality care for their children when in fact they have not (Raikes et al., 2012). Ryan, Johnson, Rigby, and Brooks-Gunn (2011) argue that in order for parents who receive subsidies for childcare to obtain higher quality childcare, they need to (a) spend their subsidy on high quality care, (b) be able to distinguish between high and low quality care, and (c) have high quality care available to them as a realistic option. While the first and third point are, on the surface, related to personal decision making and market resources, respectively, the second point specifically draws attention to the importance of parents' knowledge about quality care as being central to parents utilizing higher quality childcare. Furthermore, the first and third point may not specifically point to knowledge but education can certainly help parents understand the value of high quality and put the cost of such

care in perspective for them. Moreover, education can help parents learn how to find high quality care in markets that do not seem to have such care available or help parents find ways to increase the available market.

Cryer et al. (2002) argue that parents might be provided with detailed information about what quality is and how it is evaluated by professionals. They suggest that parents may look for the same quality characteristics in childcare centers as experts and researchers but have little knowledge of how those characteristics are defined or measured. Therefore, without education on these features, it might be easy for parents to perceive high quality (e.g., see foam ground cover beneath playground apparatuses and perceive "safe") when experts would rate them as low quality (e.g., the apparatuses themselves have no safety mechanisms to keep children falling from dangerous heights).

Another reason it is important to understand parents' perception about childcare quality is to evaluate whether or not there is an over-reliance by parents on state or national association definitions of quality. According to Shlay et al. (2005), parents showed preference for childcare centers that are licensed and accredited and indicated that such centers are worth extra cost compared to childcare centers that are not licensed or accredited. The implication is that the policymakers, experts, and researchers are better at evaluating quality than parents are. When parents evaluate childcare centers for specific qualities to enrich their children's socialization and learning, it is possible that other standards of evaluation may yield better results than state or national association definitions. While it is easy to rely on a single indicator for quality (e.g., *Is the childcare center accredited?*; Dinehart et al., 2013), doing so may not help parents find a childcare provider who offers the qualities the parent is looking for. Educating parents as to what

the type of characteristics parents should look for is an important outcome of understanding parents' perceptions about childcare quality.

Further, parents who are educated as to what quality is and is not will be more able to advocate for higher quality services at the childcare centers their children are enrolled.

According to Cryer et al. (2002), lack of education and understanding of childcare quality limits parents ability to assess true quality of care, which in turns limits their ability to effect change to increase the quality of the childcare program. In other words, if parents do not understand the type of interaction and education that their children should be getting, they will be unable to lobby for higher quality care (Cryer et al., 2002).

Creating Informed Policies Regarding Childcare for Families

Policies regarding childcare can greatly benefit from understand parents' perceptions about childcare quality. This is especially true with regards to childcare subsidies, in which many current policy considerations pertain. In most states that have childcare subsidies, parents are given the freedom to choose any legal childcare provider that they believe is suitable for their family's needs (Raikes et al., 2012). Despite this flexibility, most policies about childcare subsidies emphasize the importance of children receiving high quality childcare that will increase children's school readiness skills (Kim & Fram, 2009). Because parents make decisions about childcare with consideration for a range of family, personal, and child factors, policy makers can benefit from understanding the various perspectives and priorities parents consider by establishing policies that will enable parents to enroll their children in the highest quality center available.

As pointed out by Raikes et al. (2012), parents' knowledge about childcare quality is key for understanding if the goals of government-based childcare support, such as the Child Care and

Development Fund (a fund allocated by the U.S. Congress to support parent employment and improve the quality of care for children living in low-income families), are being reached. If parents are unable to distinguish between high and low quality childcare, it is probable that the goal to increase growth and learning through early education is not being met because children attending childcare centers with subsidies (i.e., children from low-income families) are likely receiving low quality care and thus not reaping the benefits that high quality care promotes. Policies related to subsidies receiving justification that their existence will raise early education and development levels will likely only achieve these justification goals if parents understand quality and are making the choice to send their children to high quality centers. Therefore, it is important to understand parents' perceptions about childcare quality when creating policy and evaluating policy effectiveness. Knowing what parents perceive as high childcare quality provides information about whether parents are actively making the decision to send their children to high quality care, provided the subsidy is sufficient to cover the cost of high quality care and high quality care is available in the parents' communities (Ryan et al., 2011).

Another area in which understanding parents' perceptions about childcare quality is important from a policy perspective is the emphasis that parents place on state-based licensed requirements. Raikes et al. (2012) found that parents utilizing subsidies for childcare indicated that licensing was among the most important features they look for when making childcare decisions. With parents placing high emphasis on licensing, states might decide to make the licensing requirements match the minimum quality of care that they deem valuable, such that parents who use subsidies and send their children to licensed centers are by virtue of policy sending their children to a "good enough" quality center.

Generating a More Informed and Holistic Definition of Childcare Quality

The final reason for studying parents' perceptions about childcare quality is related to uncovering a more informed and broader definition of childcare quality. The prominent definition is that which takes the expert/research perspective. While this perspective is common and has been appropriated by accrediting agents, policy makers, and the like, it is nonetheless only one perspective and rarely takes into consideration other stakeholder perspectives, including parents, teachers, and children (Harrist, Thompson, & Norris, 2007; Katz, 1995). It also rarely, if at all, takes into consideration the cultural beliefs of a given community (Farquhar, 1993). Expert/researcher definitions of childcare quality tend to be so closely tied to a quality measurement instrument (e.g., ECERS/ITERS; Harms, Clifford, & Cryer, 1998) or a national perspective of childcare quality (e.g., NAEYC) that they lack considerations for variation within communities that likely value different childcare characteristics. This may be just as true for a community of bilingual immigrants living in Miami, FL as it is for a community of impoverished families living in St. Louis, MO.

A broader perspective for defining childcare quality takes the position that childcare quality is defined by what a given stakeholder determines is valuable and important for how children should be cared for and how children should develop (Farquhar, 1993; Friedman, Randolph, & Kochanoff, 2001; Moss, 1994; Pence & Moss, 1994). This suggests that the definition of childcare quality is not necessarily based on a given outcome or an expert's belief of what quality should be, but rather on each individual's subjective view of quality. In taking this position, parents' perceptions about childcare quality may differ from experts, but that makes it no less central to an informed understanding of how childcare quality should be defined. Indeed, Brauner, Gordic, and Zigler (2004) believe that without a definitive definition of childcare

quality, which takes into consideration all stakeholder perspectives including parents, it will be difficult if not impossible to improve and advance the state of childcare quality.

Parent Reports of Childcare Quality

General Overview

In this review of parents' perceptions about childcare quality, we focus on studies that have provided information about what parents' judge and value as quality. We limit our focus to studies that explore parents' perception utilizing a broad/general population (i.e., any parent utilizing childcare) and studies that explore parents' perception utilizing a population receiving subsidies for care (i.e., subsidy-receiving parents). It should be noted that there are several studies not reviewed here that focus on parent perceptions about childcare quality utilizing a population of parents who have children with disabilities (e.g., Glenn-Applegate, Pentimonti, & Justice, 2011; Knoche, Peterson, Edwards, & Jeon, 2006) and describe quality features that are specific to caring for children with disabilities.

Researchers exploring parents' perceptions about childcare quality have taken one of three approaches when collecting data: (a) they directly ask parents open-ended questions about their views of childcare quality (e.g., *Parent, what characteristics of a childcare center do you think indicate high quality care?*); (b) they make inferences about quality based on real or hypothetical decisions parents make about enrolling their children in childcare (e.g., *Parent, if you had the means and opportunity, would you move your child to a different childcare provider?*); or (c) they ask parents to rate or rank expert- or researcher-defined quality characteristics (e.g., *Parent, please rank these quality characteristics in the order of importance to you.*).

Unlike researchers' or experts' perceptions about childcare quality, which remains focused on factors and characteristics believed to benefit the growth and development of children, parents' perception of childcare quality includes considerations of personal and family needs, restrictions, and feasibilities, as well as considerations for what they believe is most important for their children's needs (Emlen, Koren, & Schultze, 1999; Powell, 1997). For example, while health and safety is one small piece of the overall quality rating given by experts/researchers, it is central to many parents' perceptions about high quality, even when other considerations of quality such as teacher-child interaction are poor. These different foci can lead to differences in how parents define quality as compared to experts/researchers (Larner & Phillips, 1994), which is consistent with research findings exploring these differences (e.g., Cryer & Burchinal, 1997; Fraquhar, 1993).

Below, we describe the issues associated with each type of study approach, and then detail studies from each of the approaches and compare and contrast the findings that each approach yields. The concluding portion of this section includes a summary of the findings of parents' perceptions about childcare quality with consideration for study approach.

Study Issues. Very few studies fall under the category of direct parents' report of childcare quality. One of the difficulties of these approach is that even when attempting to gain an unbiased/non-expert/research perspective of childcare quality from parents, many researchers still provide participating parents with a list of characteristics that they have compiled and then ask them to rate or rank those items (e.g., da Silva & Wise, 2006; Emlen et al., 1999; Kim & Fram, 2009; Raikes et al., 2012). While many of the researchers using this approach make an effort to avoid replicating common expert/research characteristics of childcare quality (e.g., by *not* simply modifying or adapting professional assessments of childcare quality as Cryer and

Burchinal, 1997), researchers still present the parents with a limited set of options; , thus, we will refer to these studies as quasi-direct parents' report of childcare quality.

Furthermore, nearly all of the studies we uncovered in this set of studies based their questions on Emlen et al. (1999, 2000), who developed a survey to ascertain quality from a parent's perspective. Unfortunately, Emlen et al. relied heavily on researcher and professional definitions and ideas of quality though they did gather input from parents during focus groups: "The 55 specific quality items were created to represent the major dimensions of quality of care that appeared in the research literature or emerged from brainstorming with professionals or were suggested in focus groups with parents." (1999, p. 6). In subsequent focus groups, Emlen et al. (2000) noted that "many parents said filling out the questionnaire gave them a clearer perspective on quality of child care" (p. 5) implying that parents learned about quality from the survey rather than provided independent information about what they deem as quality.

A far more generic method for ascertaining parents' perceptions about childcare quality is to simply ask the parents to rate the quality of care their children are receiving on a given scale (Knoche et al., 2006; Raikes, Wilcox, Peterson, Hegland, Atwater, Summers, Thornburg, Scott, Mayfield, Torquati, & Edwards, 2005; Raikes et al., 2012). For example, Raikes et al. (2005) asked parents to "grade" their children's care quality using a letter system from A to F with an added A+ for especially high quality (thus, A+ represented the highest ranking and F represented the lowest ranking). While this methodology provides a direct report of childcare quality ratings, it does not provide any information about what factors or characteristics of the childcare center impacted the rank selected.

The final and richest (in terms of detail) method for obtaining direct report of parents' perceptions about childcare quality is to use an open-ended qualitative question approach and

have parents provide factors and characteristics that they deem to be most relevant to them in regards to their children's childcare quality (e.g., Ceglowski & Davis, 2004; Duncan, Edwards, Reynolds, & Alldred, 2004; Harrist et al., 2007; Mooney & Munton, 1998). As one can imagine, the findings from these various perspectives of direct parent report yield different findings. Therefore, in reviewing direct parent report findings, we will start by describing and discussing the findings from studies that use the most informative approach (open-ended questions), then describe findings from single rating scale studies, and finally discuss findings from the quasi-direct parent report studies.

Single Rating Approach. The single rating approach asks parents to rate the quality of their children's care on a unidimensional scale (e.g., between 1/low and 10/high). Several studies exploring parent report of childcare quality asked parents to provide a single value for a general/overall indication of their perceptions of childcare quality. These studies can be divided into studies that simply ask the broad question, *How would you grade or rank the childcare provider in which your children are enrolled?* (e.g., A-highest, B, C, D, F-lowest or 1-lowest through 10-highest; Raikes et al., 2005; Raikes et al., 2012), and studies that make an inference about parents perception of quality as either being high or not (or low or not) based on a hypothetical decision to change their current childcare provider if they had the means and opportunity to do so (Brooks, Risler, Claire, & Nackerud, 2002; Coley, Chase-Lansdale, & Li-Grining, 2001; Knox, London, Scott, & Blank, 2003; Li-Grining & Coley, 2006; Scott, London, & Hurst, 2005; Wolfe & Scrivner, 2004).

When asked to grade or rank their childcare provider, parents have been found to be very generous with their grades and rankings. For example, Raikes et al. (2005) report very high grading of childcare quality in four mid-western states, Missouri, Nebraska, Iowa, and Kansas.

Indeed, over 80% of parents across all four states graded their childcare provider with an A ("excellent") or an A+ ("perfect"; see also Fenech et al., 2011, who also found that over 80% of parents in Australia rated their children's care provider as "high quality"). Family-based care received more A+s in quality than other types of care, and center-based care specifically for infants received the lowest ratings from parents for quality. Further, the majority (overall 77%) of parents indicated that they would select the same childcare provider again if faced with that scenario. The findings were very similar when limiting the sampling group to only parents who received subsidies (Raikes et al., 2012).

Most investigators explore parents' perception of childcare by asking parents if they would change childcare providers if given the opportunity. These researchers report that parents generally have little desire to change their childcare provider (implying high satisfaction, which is consistent with the findings from the grading/ranking studies; Brooks et al., 2002; Li-Grining & Coley, 2006; Weinraub, Shlay, Harmon, & Tran, 2005). Knox et al. (2003) reported that low-income parents, who also reported high satisfaction with their current childcare provider, also indicated that they perceived minimal control over the childcare available to them. A few studies (e.g., Coley et al., 2001; Scott et al., 2005) did report that parents with children in *regulated* home-based childcare preferred a different type of care, which contrasts with reports from parents who have children in *unregulated* home-based childcare or center-based childcare. No quality characteristics were reported with these findings, and it is most parsimonious to interpret the dissatisfaction as being directly with the type of care and specifically with the restrictions placed on regulated family-based care, rather than the overall quality of care.

While these sets of studies are beneficial in developing a more complete understanding of parents' satisfaction with their current childcare arrangement, they do not add much to the

understanding of the quality *factors* that parents deem important. Further, parents overall quality grading or rankings of childcare (as with many things pertaining to their own children) tend to be artificially high as parents' scores are much higher than expert scores (Cryer & Burchinal, 1997).

Forced-Choice/Survey Approach. A number of studies gather information pertaining to parent perceptions about childcare quality by providing parents with a set of quality indicators generated by the researchers or experts and asking them to rate, rank, or identify the features that they deem most important for childcare quality. One of the problems with this method is that by providing the parents with the indicators ahead of time, parents are biasedly led to consider only those indicators. There is an assumption that the quality characteristics held as important by parents are contained within the quality characteristics deemed important by experts and researchers (Fenech et al., 2011). Further, parents, who may not have contemplated some features in terms of their perception of childcare quality, are "forced" to consider those features in their rating or ranking of importance. As noted by Emlen et al. (2000), some parents reported gaining a "clearer perspective on quality" (p. 5) as a result of completing a survey about parent perceptions of childcare quality. As this latter example demonstrates, use of measures that provide parents with a list of predefined quality features will often result in them considering the value of only those features.

Researchers who utilize the survey method have taken a few approaches to infer what the parents' perceptions of childcare quality mean. One approach is to find out if and how parents differ from expert/research perspectives. This is most often accomplished by providing parents with a set of childcare quality items that are similar (or the same) as the ones used by experts when evaluating the quality of a childcare provider. A second approach is to try to identify childcare quality features that have been developed from the perspective of parents. In this

approach, the researchers still provide parents with a predefined list of childcare quality features, but are avoiding direct extraction from an expert assessment and are attempting to include features that might be considered by someone arranging care for their child. A third approach is to provide parents with vignettes of childcare providers that purposefully varied in focus and ask parents to rate each one or rank them in order of preference. This methodology provides a less subtle means of predefining quality for parents, but it does nonetheless limit parents' focus to the childcare qualities expressed in the vignettes. It also does not allow for parents to rate specific features or offer their own personal perceptions of childcare quality features.

Surveys with Expert Definitions of Quality. The most obvious example of assessments designed to ascertain parents' perceptions about childcare quality based on expert/researcher definitions are studies that utilized Cryer and Burchinal's (1997) modified version of the Early Childhood Environmental Rating Scale (ECERS; Harms et al., 1998). The ECERS-PQ ECERS Parent Questionnaire (ECERS-PQ; e.g., Cryer & Burchinal, 1997; Cryer et al., 2002; Grammatikopoulos, Gregoriadis, Tsigilis, & Zachopoulou, 2012; Rentzou, 2013; Rentzou & Sakellariou, 2013¹) requires parents to indicate on a 3-point scale (from 1/"not important" to 3/"very important") the degree to which they believe the childcare feature is important for quality. Cryer et al. (2002) utilized this questionnaire in their study exploring US and German parents perceptions about childcare quality and comparisons of these perceptions to expert findings utilizing the ECERS, which yields seven subscales (space and furnishings, personal care routines, language-reasoning, activities, interaction, program structure, and parents and staff). The results yielded very high scores by all parents (though US parents were a little more generous in their scores than German parents) for all of the items on the assessment, which were

¹ These last three studies all appear to utilize data from the same large scale study in Greece, which included both the ECERS and the ECERS Parent Questionnaire.

significantly higher than trained experts who independently evaluated the quality of centers. Education was inversely associated with parent report of quality for all parents, such that those with more education rated centers as lower quality. Furthermore, these researchers found no impact of actual childcare quality on parents' perceptions. All parents gave high evaluations of their childcare regardless of whether the trained observer rated the center as high or low quality. These findings suggest that parents likely overestimate childcare quality and are likely unable to differentiate between high and low quality care (based on expert observations).

Parents' overestimation of childcare quality has been found in a number of other studies exploring parents' perceptions by having them rate predefined quality indicators (e.g., Browne, 1984; Cryer & Burchinal, 1997; Cryer et al., 2002; Knoche et al., 2006; Shpancer, Bowden, Ferrell, Pavlik, Robinson, Schwind, et al., 2002; Thornburg, Mathews, Espinosa, & Ispa, 1997). Similarly, parents' inability to differentiate low and high quality features based on expert definitions has been found in a number of other studies as well (e.g., Cryer & Burchinal, 1997; Long, Wilson, Kutnick, & Telford, 1996; Thornburg et al., 1997; Turner & Smith, 1983; Van Horn, Ramey, Mulvihill & Newell, 2001).

Surveys with Parent-Focused Definitions of Quality. Other investigators have asked parents to rate predefined quality factors in surveys that were not explicitly based on expert/researchers' definitions of quality (e.g., Folque & Siraj-Blatchford, 1996; Torquati, Raikes, Huddleston-Casas, Bovaird, & Harris, 2011). One of the foci of these studies is to try and identify a subset of many childcare features that parents deem as important for or related to quality (rather than exploring how much parents agree or disagree with expert definitions). Therefore, this approach has yielded more details in terms of the actual high quality childcare characteristics that parents deem important in judging childcare providers. Many of these

researchers either use or base their survey on the survey developed by Emlen et al. (1999) or by Farquhar (1993; e.g., Ispa, Thornburg, & Venter-Barkley, 1998).

For example, Ispa et al. (1998) based their 17-item, *Child Care Selection Questionnaire* on the items and domains identified by Farquhar (1993). This questionnaire consisted of subscales that reflect: (a) the health and safety characteristics of the childcare facility (e.g., *How important was it when you selected child care that sanitary areas existed for eating and changing diapers?*), (b) the practical considerations for meeting work and family needs (e.g., *How important was it when you selected child care that the hours of operation fit your schedule?*), (c) the daily program that included developmentally appropriate practices (e.g., *How important was it when you selected child care that the provider was well trained? How important was it when you selected childcare that age-appropriate activities and toys would be available?*), (d) their friends' recommendation for the childcare provider (only one item), and (e) the provider's warmth and care (i.e., having the feeling the children were "loved and cared for"; only one item). All questions were based on parents' retrospective view of the importance of each item when selecting childcare and parents assigned a rating of 1 to 5 based on importance of the item. They found that parents rated health and safety, provider warmth, and daily programming the highest. Practical considerations, specifically hours and location, were also rated as fairly important for parents. These practical considerations were not a consideration among the studies that focused exclusively on expert definition.

Similarly, Raikes et al. (2005) explored parents' perceptions about childcare quality utilizing a survey based on Emlen et al. (1999) and the Missouri 1519 parent survey (Thornburg, Mayfield, Watson, Mathews, & Fuger, 2003), which contained 22 quality items for parents to rate in terms of their importance for quality. Parents were asked to indicate the degree of

importance that each of 23 items played in selecting their current childcare provider on a 5-point scale (1=lowest to 5=highest). The childcare features that yielded the highest scores (in descending order) were warmth and loving style, reputation for good care, stimulating activities and programs, physical facilities and equipment for play and learning, similar values to parents, known and trusted by parents, and trained staff with credentials. Other factors that received an average score of four or higher were the caregiver-child ratio, their emphasis on creativity (e.g., art, music), the similarity of discipline and guidance style, their flexible and convenient hours of operation, whether the provider accepted subsidies, whether the provider emphasized academic learning, and whether the provider was accredited. These findings indicate that provider characteristics and training, reputation, caregiver-parent relationships, and opportunities for learning were central for most parents when making childcare decisions, while practical considerations, such as cost and flexibility of care, were important but played a less central role for parents decision making process.

Along the same lines, da Silva and Wise (2006) explored parents' perceptions about childcare quality by asking Australian parents (of Anglo, Vietnamese, and Somali descent) rate a set of 20 items on a 3-point importance scale from 1 (not important) to 3 (very important) and rate the same items on a 3-point satisfaction-with-current-arrangement scale from 1 (not at all well) to 3 (very well). The items made up four subscales: (a) responsiveness to developmental needs (8 items; e.g., *The care is warm and sensitive. The childcare setting is a safe and healthy place for the child.*); (b) accessibility, in terms of location, cost, and flexibility (3 items; e.g., *The cost of care is affordable. The childcare is conveniently located. Care is available during hours it is needed.*); (c) caregiver relationships with children and parents (4 items; e.g., *Carers take time to understand parents' ideas and practices about bringing up children. Carers will adapt*

the program to fit particular children's needs.); and (d) responsiveness to children's cultural background (5 items; e.g., *Carers are sensitive to differences between home and child care in ways of bringing up children.*). All items were developed by the authors for the purpose of the study. The responsiveness to developmental needs subscales was designed to reflect expert definitions of childcare quality. The accessibility and caregiver relationships subscales were designed to reflect quality features found to be important for parents by Emlen et al. (1999). Finally, the responsiveness to cultural beliefs was developed to collect information about the importance of the culture related features of childcare.

Based on the parents' responses to each of the 20 items, da Silva and Wise (2006) ranked the quality features in terms of their importance to parents. The top five most important childcare features (starting with the highest ranking) were (a) nurturing, (b) safety and health, (c) flexibility in hours, (d) caregiver education and training, and (e) stimulating toys and materials. All of these except flexibility in hours were part of the developmental needs subscales, which was argued to reflect the expert/researchers' views of quality. Their results indicate that when selecting from a list of quality features, parents tend to agree with experts/researchers on the things that are important for high quality care, but also weigh practical considerations such as the flexibility in their hours of operation (a point also raised by Emlen et al., 1999).

Other studies have utilized rankings of childcare features to generate profiles of parent preferences for childcare. For example, Kim and Fram (2009) asked parents to evaluate seven quality factors (number of children in care group, amount of time the caregiver provides care, amount of time spent with other children, learning activities provided by caregiver, reliability of care arrangement, cost of care, and location of provider) for their importance in the decision to select their childcare provider on a 4-point scale from "not at all important" to "very important."

Based on these ratings, Kim and Fram (2009) clustered participants into one of four profiles explaining why they selected their childcare arrangement: (a) those who ranked all of the factors as important; (b) those who emphasized the practical factors; (c) those who emphasized the learning factors; and (d) those who did not rank any of the given factors as highly important. The researchers then associated these profile groups with actual childcare choice and found that those who were more learning focused were more likely to select center-based care, while those who were more practically focused were more likely to select family-based care.

Gamble, Ewing, and Wilhelm (2009) generated six important factors related to parent perceptions about childcare quality based on a factor analysis of 311 items. Most of the items were generated by the authors, while some regarding the values of childcare characteristics were adapted from other studies (Fuqua & Labonsohn 1986; Shlay et al. 2005; Shpancer et al. 2002). Parents rated each item on scales that varied from 3 to 6 point depending on the type and focus of the item. The factors that emerged from the analysis of these items were labeled (a) child-centered orientation, (b) school readiness, (c) institutional structure, (d) curriculum options, (e) scheduling, and (f) practical considerations. As a factor, items of "practical considerations" did not correlate highly ($< .70$) and therefore this factor was not further explored in terms of importance to parents. Among the other factors, Gamble et al. (2009) found that school readiness was the highest rated factor by parents in terms of importance for selecting their childcare provider. Interestingly, this factor was negatively associated with income, such that the importance of school readiness decreased as income increased. Curriculum options was the second most important factor for most parents and the child-centered orientation was a close third.

More recent studies about parents' perceptions of childcare quality have focused on the views of parents receiving subsidies (e.g., Li-Grining & Coley, 2006). For example, Raikes et al. (2012) provided subsidy-receiving parents with a survey that included items pertaining to why they selected their current childcare provider and items related perceptions of quality. The items pertaining to childcare selection were author-generated based on a review of the literature (e.g., training, flexibility, cost), and the items pertaining to perceptions of childcare quality were taken from Emlen et al. (2000; e.g., warm and affectionate provider, reads to children, avoids television, etc.). The authors were also interested in understanding parents' perceptions and knowledge about the subsidy system itself. Based on the results from their factor analysis, the authors identified three subscales related to subsidies (accessibility/reliability, limitations, benefits) and six subscales related to the childcare provider (positive characteristics, negative characteristics, licensing/accreditation, personal relationships, convenience, and positive perceptions). Each individual item was rated from 1 (not at all important/strongly disagree) to 5 (extremely important/strongly agree).

Raikes et al. (2012) found that parents were generally positive about the subsidy system and that parent perceptions about childcare quality were fairly consistent with other studies. When selecting their childcare provider, subsidy-receiving parents valued characteristics of the provider (e.g., education, training), convenience, licensing, and prior/existing relationships with the provider as the most important. These results are consistent with other studies specifically exploring subsidy-receiving parent perceptions of quality (e.g., Pearlmutter & Bartle, 2003) and highlight the importance of provider characteristics and licensing. Raikes et al. (2012) also found that the focus on licensing and accreditation was more valued for parents utilizing center-based care and less valued for parents utilizing family-based care.

Vignettes with Varying Childcare Quality Features. A few researchers explored parents' perceptions about childcare quality by presenting parents with vignettes describing childcare providers with varying characteristics and features that exemplify different types of childcare quality and/or different educational focus (e.g., focused on academic learning; focused on social and emotional development). While this approach provides parents with predefined features to rate or rank as the survey approach, it does create a more realistic scenario in which parents are faced with focusing on a *whole* center rather than specific quality features. For example, Leslie, Ettenson, and Cumsille (2000) presented parents with profiles of several hypothetical childcare centers and asked them to rate each of the center profiles in terms of how the features and characteristics of each center would influence their decision to enroll their children in that center. They also rated the degree to which they would be likely to select each center as their childcare provider. Leslie et al. (2000) found that single mothers identified cost of care as the most important characteristic for choosing a center, while married mothers identified staff-child ratios as the most important characteristic for choosing a center (there was no clear consensus among fathers in the features that they rated most important).

Shlay, Weinraub, and Harmon (2007) also utilized vignettes as a means of collecting information about parents' perceptions of childcare quality among a sample of mothers transitioning from welfare to work. Similar to Leslie et al. (2000), these authors presented parents with vignettes of childcare centers with various childcare characteristics and features to represent different types of childcare centers. For each vignette, parents indicated if they liked the center, what they thought the center cost should be, and what they would be willing to pay to send their children there. Shlay et al. (2007) found that mothers valued child safety, caregiver warmth, and planned activities. These latter researchers also found some ethnicity/race group

differences in the features valued. Black and Hispanic mothers focused far more on regulation (e.g., licensed) by states or agencies as an indicator of quality as compared to White (non-Hispanic) mothers. Further, they found that White (non-Hispanic) mothers focused far more on long-term relationships and academic skills (i.e. learning letters and numbers) than Black and Hispanic mothers.

A similar study (Shlay et al., 2005) exploring low-income, African-American parents perceptions about childcare quality also utilizing vignettes reported that these parents focus on the qualifications, experience, training, and behavior of the provider and racial and economic diversity when evaluating quality of care. The authors also point out that low-income parents may choose lower quality childcare (based on expert assessments) because that is what is affordable and in their geographic market rather than because of a lack of understanding about important quality features.

Summary and Comparison with Single Rating Approach. Compared to the data yielded from the single rating approach, the rating/ranking pre-identified characteristics provides more detailed information about parent perceptions of childcare quality and how perceptions align with or diverge from expert views of quality. While findings utilizing the single rating approach suggests that the vast majority of parents believe the care their children are receiving is high quality, the survey approach suggests that parents are a bit more critical of center quality than the single rating approach indicated. Overall, the findings also indicate that parents are far more generous with quality ratings than experts, that parents highly rate the childcare provider they use, and that parents are limited in their ability to differentiate between high and low quality (based on expert definitions) centers.

Findings from the various studies that explored parent perceptions about childcare quality based on parent-focused definitions found that parents rated many of the same qualities identified by experts (e.g., health and safety, provider characteristics such as warmth, education and training, opportunities for learning, daily programming and curricula, and caregiver-parent relationships) as the key factors they associate with high quality childcare. One of the primary differences between the findings from these studies and the findings from the expert-definition studies is the consideration of practical concerns (e.g., cost, hours of operation, location and convenience, flexibility) and reputation (e.g., recommended by friend) in understanding and rating childcare quality. Investigators using profiles of childcare providers (vignettes) yielded similar results, though there seemed to be more emphasis in some of these studies on practical considerations (particularly cost and location/convenience) as considerations for childcare selection. It is possible that the method of using selection of provider profiles (similar to what might happen when actually selecting childcare) to collect information about parents' perceptions of childcare quality caused parents to focus on features that are more practical because they had to weigh a number of features simultaneously and the practical features were the most salient for their personal and family needs. If this is true, it is likely that parents who are asked open-ended questions about their perceptions of childcare quality will provide similar features. This is the focus of the following section.

Direct/Qualitative Approach. We identified six studies that utilized a qualitative, open-ended interview approach to collect unbiased information from parents on their perceptions of childcare quality (Ceglowski & Davis, 2004; Duncan et al., 2004; Fenech et al., 2011; Harris, 2008; Harrist et al., 2007; Mooney & Munton, 1998; Pearlmutter & Bartle, 2003). Two of these studies (Duncan et al., 2004; Mooney & Munton, 1998) were conducted in England, two of these

studies (Fenech et al., 2011; Harris, 2008) were conducted in Australia, and three of these studies (Ceglowski & Davis, 2004; Harrist et al., 2007; Pearlmutter & Bartle, 2003) were conducted in the U.S.

Mooney and Munton (1998) collected information about perceptions of childcare quality from parents, policy makers, childcare center owners, childcare center teachers, and family childcare providers using focus groups. These researchers found that parents, like other groups, valued center-based childcare staff training (which they deemed less important for family-based childcare providers), salaries, work conditions, and parent-caregiver relationships, particularly good communication, as important for promoting higher quality care. They also found that parents understood that financial limitations would impact perceptions of quality, particularly for childcare staff salaries.

Pearlmutter and Bartle (2003) focused their qualitative inquiry about parent perceptions of childcare quality on parents receiving subsidies for childcare. These researchers collected data about perception of childcare quality in focus groups with parents from Ohio and California. During the focus groups, parents were asked three questions that pertained specifically to childcare quality: (a) *What were your experiences in finding childcare that you wanted?*, (b) *What do you look for when you are seeking child care?*, and (c) *How would you describe a good quality child care setting?* Findings from the focus groups indicated that subsidy-receiving parents valued the safety of children, warm and attentive care, trusting relationships with caregivers, cleanliness of the facility, and the materials and means to help children learn as the primary features reflecting quality and selection criteria. Parents in this study seemed especially focused on having their children in a caring and safe environment and did not believe that licensing guaranteed these things.

Other researchers gathered data about parents' perceptions of childcare quality by conducting semi-structured interviews with mothers of young children (Duncan et al., 2004). A diverse group of fifty-six mothers were recruited and asked questions about the things they value as important qualities of childcare. Overall, Duncan et al. (2004) found that family values and personal beliefs had the largest impact on perceptions of quality. For instance, middle, socioeconomic class, White (non-Hispanic) and African-American mothers perceived childcare quality in terms of what was best for them and their children, while White (non-Hispanic) working class mothers focused more exclusively on what childcare would be best for their children. African-American mothers and mothers who identified themselves as lesbians or strong feminists placed a high value on childcare providers who offered a high degree of acceptance and a sense of belonging. The researchers also note that mothers from relatively low-income households include the cost of childcare in their evaluation of quality.

Ceglowski and Davis (2004) collected information about parents' perceptions of childcare quality through focus groups. Parents were asked to provide examples of quality features that they deemed positive or negative about their childcare. These researchers found that parents emphasized education and training, caregiver warmth and sensitivity, and individual child attention as important quality features of childcare. Examples of training spanned from positive comments about training (e.g., "You feel the kids have teachers as opposed to unskilled people caring for them"; p. 84) to negative comments (e.g., a parent told a story about her crawling child being isolated and strapped into a car seat during the day), both reflecting the position that more trained caregivers will provide more positive care. Other negative comments related to quality were related to safety concerns (e.g., a parent noticed barb-wired fence around the playground; another parent found other children hitting hers with wood blocks when showed up early for

pick-up) and caregiver presence and attentiveness (e.g., no caregiver present watching the children).

Another qualitative study explored parents' perceptions about childcare quality (Harrist et al., 2007). These researchers explored parents' perceptions--along with caregiver's, director/owner's, policy maker's, and social service professional's--about childcare quality by asking focus groups of parents (3 focus groups of 11, 12, and 4 individuals; one father and 26 mothers) about childcare quality based loosely on the protocol used by Ceglowski and Davis (2004). The researchers began by asking a general question about the purpose of childcare and followed that with questions specifically about quality and improving quality of care. Specifically, they asked, *What things make child care high quality?*, and then followed this up with a question to focus their attention on the more important quality features, *Of these characteristics you just described, if you had to choose one key component of child care quality, what would it be? Why?* The researchers then asked the focus groups a series of questions about what they thought could be done by various stakeholders (e.g., caregivers, directors, parents) and entities (e.g., social service agencies, business, community, government) to improve childcare quality (e.g., *What could caregivers do to improve the quality of child care? What could policy makers and governments do to improve the quality of childcare?*). Finally, they asked an unrestricted question of how they would improve childcare quality: *If you had a magic wand, what one thing would you do to improve childcare quality?*

In general, Harrist et al. (2007) reported that all of the stakeholders, including parents, articulated six important areas for quality, which were labeled: (a) communication and rapport; (b) caregiver practices, (c) staff characteristics, (d) finances and resources, (e) visibility and involvement, and (f) professionalism. In doing so, parents (more so than other stakeholders) took

a child-centered focus and used the degree to which their children will learn and develop social and emotional skills as a means of assessing and describing childcare quality. Many of the parents' responses were focused on the caregiver practices (particularly those practices that were nurturing). Parents valued childcare providers who were "parent-like" and seemed to "love children" (p. 324). Parents also valued childcare providers who cared about safety and meeting the needs of the children. Furthermore, parents indicated that higher quality childcare providers are respectful and professional. Finally, parent involvement and visibility at the childcare provider was also a characteristic that was associated with higher quality care.

As in other studies asking parents directly about characteristics of childcare quality, Harrist et al. (2007) found that financial considerations played a large role in their perceptions of quality. Parents commented that childcare was a means for them to work and that childcare providers who accommodated that need were highly valued. Additionally, the actual cost of care was intertwined with other characteristics and aspects of childcare quality. Parents understood that higher quality care costs more money, and those parents with fewer resources may focus on a more narrow set of quality criteria (particularly compared to expert quality assessments) given that constraint.

It should also be noted that Harrist et al. (2007) found that, in comparison to other stakeholders, parents' perceptions were far more in line with caregivers' perceptions than they were with the perceptions of policy makers and social service professionals. Harrist et al. (2007) propose a child proximity model for understanding views and perceptions of childcare. Because parents and caregivers are closest to the children (most proximal), they are likely to share more views about childcare than two other stakeholders (e.g., social service professionals and policy makers) who vary greatly in their proximity to children.

More recently, there have been qualitative studies of parent perceptions about childcare conducted in Australia. Harris (2008) conducted semi-structured interviews with mothers of children in childcare. The questions asked pertained to the process of selecting childcare, the characteristics of an ideal childcare setting, and the larger issues revolving around state and corporate involvement in childcare quality and childcare options. Harris (2008) found that mothers believed high quality childcare centered around good and positive caregiver-child interactions, including understanding and meeting the needs of the children, and an environment that was safe and supportive for their children. Parents provided characteristics and features that were associated with low quality care, including developmentally appropriate practice, staff turnover, lack of stimulating activities, high caregiver-child ratios, low warmth and caring, unhappy staff, and use of media such as television and video games. It was also noted that these mothers were not interested in childcare providers with "pretty" looking physical environments; the focus was on the individuals who would be "replacing" them and caring for and nurturing their children.

Harris (2008) also uncovered a few characteristics of quality that likely resulted from on going changes to the "childcare landscape" in that region, but are likely valuable for our understanding of how parents' perceptions can vary based on the broader context of childcare in their area. Parents viewed childcare providers who had long waitlists as being high quality. It seems these parents associated the desire of other parents to send their children to a particular childcare provider as an indication that it was of good quality. This perspective is reminiscent of what others labeled as "recommendation from a friend." In this case, the waitlist seems to act as a recommendation from other parents. Furthermore, parents associated for-profit status with "corporate childcare" and low quality because the focus was on making money. One mother

characterized these centers as "supermarket childcare." Finally, parents highly valued centers who had strong ties to the local community. Again, these parents reported that the "corporate childcare" provider was interested exclusively in making profit rather than helping their children grow and develop. Parents noted that childcare providers with strong ties to the local community have more interest and investment in caring for children and helping them learn and develop.

Another qualitative study conducted in Australia is that of Fenech et al. (2011). These researchers provided parents with open-ended questions to gather information about their perceptions of childcare quality (e.g., *What is it about your centre, if anything, that supports high quality? Is there anything about the centre that could be changed to improve the level of quality?*). The authors coded parents' open-ended responses into several categories, including (a) structural elements (staff-child ratio, staff education and training, adequacy of the facilities), (b) process elements (caregiver-child relationships, caregiver-parent communication), (c) work-related elements (wages, work conditions, professional development), (d) staff attributes (teamwork), (e) leadership, (f) management, and (g) patronage. Findings indicated that parents were far more knowledgeable about the process elements of childcare than other areas, and far less knowledgeable about the structural elements, staff attributes, and leadership than other areas. Specifically, many parents indicated that they valued nurturing care, good communication, stimulating activities, a child-centered approach, and a focus on learning and growth.

Based on the review of studies that utilize a qualitative, open-ended approach to evaluating parents' perceptions about childcare quality, it is clear that financial considerations are at the top of parents' minds when discussing quality of childcare. It is also clear that parents' view caregiver training as highly important. While not always overtly articulated by parents as "education" or "training," parents reported a variety of caregiver features that at a minimum

reflect education and training, including understanding and meeting the needs of young children, teaching and modeling good social and emotional skills, protecting children from harm, and taking measures to ensure a safe environment. Further, parents report valuing caregivers who know how to interact with children, who know what is appropriate and inappropriate behavior from children, who know what children should be learning, and who know what school readiness skills children will need when moving on to elementary school. Caregivers can learn all of these qualities through education, training, and apprenticeship.

In addition to training-related characteristics, parents also reported that caregiver personal characteristics were highly important features of childcare quality across the studies. Parents want to send their children to caregivers who are sensitive and warm, who are welcoming and professional (to both children and parents), who are attentive to individual children and always available to the children, who are accepting of individual differences and create a sense of belonging for all children and parents, who are nurturing and "mother-like" in the care they provide. Parents frequently also mention caregiver-parent relationships as an important quality feature. Parents tend to value relationships with caregivers that are open and honest, that involve good and easy communication, that have mutual respect, and that maximize parent input, involvement, and visibility.

Comparison of Findings from the Three Approaches

Findings from studies using an open-ended qualitative approach yielded many childcare quality features that were similar to those uncovered using the survey methods. Across all studies, parents seemed to seriously consider and evaluate the quality of childcare provider they were using. Parents, in general, valued health and safety, education and training, child learning, caregiver-parent relationships, and provider characteristics (such as warmth and sensitivity).

Study approaches that utilized parent-focus definitions of quality for their surveys or open-ended questions also brought to the surface that parents place practical considerations (such as cost and location) among the childcare quality features they deem important. Interestingly, the parent-definition surveys yielded far more concern for a variety of practical considerations than did the open-ended questions. Parents who responded to the open-ended questions were more focused on the financial constraints of selecting a childcare and how those constraints temper their desire for or ability to select other quality features. In doing so, parents who answered the open-ended questions tended to emphasize safety, provider warmth, nurturing behaviors, and caregiver-parent relationships as highly important quality features that sought after despite financial constraint. They also emphasized provider training and education as an overarching feature of high quality providers and as a feature that can (and should) be regulated by policy and licensing.

Conclusions

Overall, the literature reviewed in this paper suggests that healthy and safe environments, warm and nurturing providers, open and positive caregiver-parent relationships, continued provider education and training, support for learning, and practical considerations are among the top and most frequently stated features parents deem as important for evaluating childcare quality. It is important to note that parents' perceptions about childcare quality include both views about quality of care and reasons for selecting childcare. Parents do not seem to isolate their personal and family needs from the features of childcare providers while evaluating the childcare quality, and this is one of the largest issues with assessing childcare quality using experts' definitions. It has been suggested that parents do not have a good understanding of childcare quality (e.g., Cryer & Burchinal, 1997), when in fact they may be less likely to agree with an expert's definition because those qualities were practical or realistic considerations

(given the family's needs and constraints) when selecting care for their children. Shlay et al. (2005) contends that parents' supposed lack of knowledge about childcare quality and subsequent use of lower quality care is more likely a reflection of availability and affordability than it is with disagreement over or limited knowledge of what constitutes quality.

Studies that use a survey approach to collecting information about parents' perceptions of childcare quality are providing parents with a finite list of features for them to rate or rank. In doing so, these studies are in one sense *telling* the parents what they should be thinking about and caring about, and in another sense *forcing* them to think about childcare features that they may not have considered while selecting childcare due to family need and financial consideration. For example, parents may actually think of quality in terms of a specific need they have or desire they have for providing their children with more learning and socializing opportunities. However, this might manifest itself very differently for parents with limited income compared to parents with higher income. Parents with limited income might focus more on finding a childcare provider that is conveniently located and within their budget who is also caring and nurturing and will help children develop important school readiness skills. A more affluent parent might focus on finding a childcare provider that allows the children to socialize and interact with other children, who has nice, safe, and stimulating facilities and activities, and who does not limit their children's learning opportunities to predefined "school readiness" skills.

In the latter case, the parent might not overtly think about cost and location because it might not be their primary childcare goal, while in the former case, cost and location might be considered because they may be deemed important to the family's needs. If both parents filled out a survey with items that included accreditation and caregiver-parent interaction, they would likely indicate similar important quality features (e.g., Cryer & Burchinal, 1997), but the reality

is that they might not find them to be equally important in their own personal, real-world circumstances. One of the reoccurring messages from authors, particularly those who conducted the open-ended interview studies and the parent-focused survey studies, was that there is no one-size-fits-all when it comes to defining quality for parents. The definition of quality for parents is based on each individual family's needs and constraints.

The final point we would like to make is that while there are a number of practical constraints parents face resulting in the selection of lower quality care for their children, these constraints are not easily alleviated. States that offer subsidies for childcare are helping parents lessen the financial burden of childcare, but this alone may not be enough to increase the quality of care children are receiving. First, parents who are eligible to receive subsidized care for their children face financial burden and are likely to use the subsidy alone--and not supplement it--leaving limited options of care due to price. Second, subsidies that go to parents do not encourage or require childcare providers to improve their quality. And third, many parents receiving subsidies for childcare likely need that care to be located near their home or work, and may need that care to extend from early in the morning to early in the evening. These non-financial practical considerations can also greatly limit parents' ability to send their children to quality childcare. Thus, policies designed to educate, inform, and support parents' choices of higher quality childcare providers will need to be sensitive to the varied needs and circumstances of parents and their families.

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