

CONSTRUCTIONS OF QUALITY IN EARLY CHILDHOOD CENTRES

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**A THESIS SUBMITTED FOR THE DEGREE OF
DOCTOR OF PHILOSOPHY
AT THE UNIVERSITY OF OTAGO,
NEW ZEALAND.**

MARCH 1993

U N I V E R S I T Y O F O T A G O

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Abstract

This thesis presents the results of a study of constructions of quality in different early childhood settings. From the Otago region in New Zealand, four kindergartens, three childcare centres, two playcentres and two kohanga reo were studied. Parents and staff from these centres and national experts were involved.

A multimethod research approach was used, including questionnaires, meetings of representatives from the centres, participant-observation of charter development, and observation of centre quality. In addition, centres were provided with feedback as part of the processes of data collection and analysis.

The findings affirmed recent claims in the literature that there exist a range of values and perspectives on quality early education and care. Shared meanings of quality within and across parent and staff groups were identified. Different practices and meanings of quality constituted different constructions of quality for the kindergarten, childcare, playcentre and kohanga reo groups.

Programme goals relating to children's psycho-social, language and physical development were most important from parents' and staff perspectives. Their beliefs about the goals of an early childhood programme were reflected in their definitions and views on centre quality.

When defining a good-quality centre the majority of parents wrote about staff who like or love children, a happy, warm or friendly atmosphere, and children's eagerness in being at the centre. Staff referred most to centre atmosphere and to the appropriateness of the type and range of activities for children.

Parents' and staff mean ratings of the importance of different quality criteria suggested that some of the key indicators of quality in the research literature, such as trained staff and adult-child ratio, were not as important as other criteria such as that staff care about children. Staff responsiveness to children was rated as very important by every staff member and almost all parents. Parent and staff values about quality differed most in the areas of parent-staff relations and the role of the early childhood centre in promoting certain aspects (particularly cultural) of children's development. The practices and philosophies of the early childhood groups appeared to be linked to differences in parent and staff views about quality.

There were more differences between the views of parents and staff than between the views of staff and outside experts in their ratings of the importance of various quality criteria. The extent people were involved in an early childhood setting seemed to have some influence on how they rated the importance of various quality criteria. Parents' concerns about their children and staff concerns about

their own needs for a positive healthy working environment were reflected in their definitions of quality.

In their descriptions of what they liked most about their centre parents focused on the need to have trust in staff competency to provide good care and to know that their child was happy. Staff focussed more on the organisational and social features of their working conditions. All parents and staff expressed one or more things that they liked about their centre, but fewer parents than staff expressed one or more criticisms. This suggested different possibilities: parents may have had high levels of satisfaction, they may not have wanted to admit they were unhappy about anything, or they may have accepted the standard of their centre's quality thinking or knowing that no other options were available.

Particularly low ratings of centre performance were given by staff and parents on having a written programme schedule, the adequacy of provisions for sick children, recognising differences in children's home-background in the programme, providing a bicultural programme and supporting community involvement. Practices relating to parent-staff communication and home-centre relationships also received low performance ratings.

Organisational and philosophical characteristics of the kindergartens, playcentres and childcare centres had some influence on how well centres met various criteria of quality. Centres were observed to be lowest in quality on criteria pertaining to equity issues and highest on criteria related to the social climate and care of children. Observed practices were well below parents' and staff ratings of the importance of group-size, promoting cultural awareness, biculturalism, staff responsiveness to children, staff involvement in children's play, a balance of indoor and outdoor play, staff health and hygiene, teaching children good personal hygiene, and meeting physical care needs.

The process of charter development varied in a number of ways at the kindergartens, childcare centres and playcentres. Difficulties in obtaining parent participation were experienced and some ingenious techniques and incentives were used to encourage participation. Enhanced three-way communication resulted between parents, staff and managers/committee members on meanings and practices of quality. The Treaty of Waitangi and Special Needs sections of the charter generated most discussion and debate. Many people disliked the fact that there were major parts of the charter which were non-negotiable.

A profile of quality for each early childhood group is included with a summary of key findings for the questions of the research study.

Preface

My interest in early childhood education and care came from my mother's involvement in the early childhood field. Mum timed my birth for Christmas and had a short time off work from her childcare centre before returning with me in the New Year. At three and a half years of age I was sent to kindergarten to learn to get along without my mum. As I grew up I was allowed to take on responsibilities and to assist at the childcare centre. On my seventeenth birthday I was accepted for a two year kindergarten training course at Christchurch Teachers' College. Entry was highly competitive with only eleven training places available. In the year I graduated I received notification of appointment as head teacher of a new kindergarten in Riverton, a rural Southland township. The following year I returned to Christchurch to take up full-time University study - and have not stopped studying since! I had started a personal quest to learn more about young children and to undertake research that could address the information needs of early childhood practitioners.

I am indebted to Associate Professor Anne Smith for accepting me as a doctoral student. Not only is Anne one of New Zealand's few early education and care scholars she is also highly respected in the early childhood community. I want to thank Anne for her consistent support and for nurturing my academic development. Dr Terry Crooks has also been a fabulous supervisor. Terry's patience while I was learning SPSSx and trying to understand statistics was much appreciated. I wish to thank Ted Glynn, Bruce McMillan, Graeme Christie, Max Gold and all the staff of the Education Department at Otago University for their support and friendship.

During my second and third years in Dunedin I was awarded the honour of being the Ross Fellow of Knox College. I am most grateful to Reverend Peter Marshall and members of the Council of Knox College for providing me with a home away from home, good meals and the company of many other students.

The Research and Statistics Division of the Ministry of Education financially supported the research and production of two preliminary reports. I would like to thank Neil Scotts from the Research and Statistics Division who liaised with me over the project. A special thank you to members of the advisory committee and consultants: Carol Garden and Shelley Kennedy (national office of the Ministry of Education), Pat Irvine (regional office of the Ministry of Education), Kathryn Palmer (Early Childhood Development Unit), Lyn Foote (Dunedin College of Education), Noi Hudson and Mark Laws (Te Kohanga Reo Trust), Rosanne Hand (Free Kindergarten Union), Polly Mason (Child Care Association), Lesley Pellowe (Playcentre Association), Jimsie Smith (Kindergarten Teachers' Association) and Yvonne Sharpe (Otago University Nursery Association). Many thanks also to Karina Laws, Trisch Inder and Martine O'Shea who assisted me at various stages in the data collection process.

I wish to warmly acknowledge the participation of members of the childcare, kohanga reo, playcentre, and kindergarten groups. They made a huge commitment to the study. I would like to dedicate this study to all children, staff and parents in New Zealand early childhood centres.

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Chapter One

I N T R O D U C T I O N

"Quality" is a fundamental concern in the field of early childhood education and care. The phrase "good-quality" is frequently used as a label when describing early education and care in public reports and papers written by early childhood groups and organisations. "Quality" has become a term with an unclear meaning. What does it really mean in the context of early education and care? Can the meaning of quality differ for different early childhood groups and groups of people such as parents and teachers? This thesis reports on research that was designed to address these questions and others. Four different early childhood services were focused on. Quality as a value-based concept is explained and illustrated in the thesis through the presentation of data on people's views and early childhood philosophy, centre practices and environments, and experiences of meeting the Government's requirement to develop a charter.

The issue of quality has emerged as important after over three decades of research on the effects of group care on children. Researchers recognise that there is probably no single issue related to the provision of group programmes for young children that is as complex or as critical to child development and family life as the issue of quality. Defining quality is an empirical problem in industrially developed nations (Melhuish & Moss, 1991) as well as in third world countries (UNICEF, 1992).

Concerns about "quality" are linked to issues of access, affordability and cultural appropriateness. The nature and number of provisions for early childhood education and care available in communities are closely linked to women's labour force participation. Employed parents need to obtain care for their children (Collins, 1991; Coombe, 1991). It seems though that often parents experience pressures, particularly economic pressures, to accept lower quality where high-quality early education and care is not available or affordable (Lamb & Sternberg, 1992). In some communities, particularly rural, parents do not have a choice of early childhood service or may have to travel some distance to one of their choice. All services in New Zealand prior to the emergence of the Kohanga Reo movement in 1982 reflected predominantly pakeha values and were not adequately meeting the educational needs of Maori people (Irwin, 1990).

Good-quality early childhood programmes have been shown to be beneficial for children. Longitudinal studies have documented the critical impact of early childhood experiences on people's lives and consequent benefits for society (Lazar & Darlington, 1982; Schweinhart, Weikart & Lerner, 1986). The importance of the cognitive and social experiences of programmes for children's

development has been demonstrated by a plethora of experimental studies (Belsky, Steinberg & Walker, 1982). Families also seem to benefit greatly from good-quality programmes. Research shows that affordable care is very important for families as it can reduce parents' stress from juggling child rearing, household, and employment responsibilities (Shinn, Ortiz-Torres, Morris, Simko & Wong, 1989; Galinsky, 1988). The quality of a programme can affect family life, which in turn impacts on children (Edwards, Logue, Loehr & Roth, 1987; Ramey, Dorval, & Baker-Ward, 1983). The possibility that families influence outcomes for children is suggested by studies showing that childcare and family variables are correlated (Clarke-Stewart, 1987).

It has been argued in recent reviews of the literature that too much emphasis has been placed by developmental psychologists on searching for possible negative consequences of group care and maternal employment (Caldwell, 1991; Silverstein, 1991; Singer, 1992). According to Caldwell (1991) studies have raised enough questions to keep collective anxiety levels high. Researchers have continued to spend time and resources on investigating which aspects of care are beneficial and which are potentially harmful to children, instead of addressing the more relevant and important question of how to make group early care and education experiences better for children. Researchers need to affirm the importance of good-quality programmes by documenting the negative consequences of not providing quality (Silverstein, 1991).

Most of the research on quality reflects a scientific developmental psychological perspective. The traditions of developmental psychology stress the use of quantitative measures of quality which can be shown to have a relationship with certain developmental outcomes for children. In carrying out this study on quality from a values-based perspective I worried about my research being unacceptable because of its non-traditional approach and about the complex task I had set for myself. I identified with a statement from Emde (1981), who said:

I maintain that there is high adventure to be had in crossing interdisciplinary boundaries, in going beyond a domain in which, because of your training, experience, and easy access to colleagues, you feel comfortable, perhaps even in your natural ecological niche Naturally this carries a risk: not only a risk of obscurity or lack of recognition but even more, a risk of its opposite, of exposure for being wrong (p. 9).

It was only after I had completed data collection that I received a European Commission discussion paper that affirmed and argued the need for a values-based approach to researching and understanding quality (Balageur, Mestres & Penn, 1991). I have since come across some more publications which support a concern for values (eg. Moss, 1991) and argue the denial by mainstream psychology of the daily realities of parents, children, and the early childhood field (Singer, 1992). In September of 1991 I participated in an international workshop for about twenty-five invited researchers. There was agreement amongst participants, despite our cultural differences and individual research orientations, that the way ahead for research would be to recognise the relativity of definitions of quality and to investigate different perspectives.

The preparation of a research proposal in 1989 for this study coincided very fortuitously with a time of educational reform in New Zealand. New policies for quality assurance in early childhood services were introduced by the Government, for example minimum licensing standards across services and the concept of the charter. Thus, when the study started there was more political focus on the issue of quality and a stronger climate of change within the early childhood field than there had ever been before in the herstory of New Zealand.

In writing this thesis I have used the terms "staff" and "educare" which may differ from other early childhood texts and writings. There currently exist a variety of names for people who work in centres, including: ladies, workers, nursery nurses, childminders, caregivers, teachers, supervisors, and kaiako (Cook, 1983; Caldwell, 1991). When I have referred to staff within an early childhood group I have sometimes used the name they are known by (ie. "teachers or head teacher" in the kindergartens, "workers or centre director" in the childcare centres, "supervisors" in the playcentres and "kaiako" in the kohanga reo). Otherwise the name "staff" is used for people in each of the early childhood groups. "Educare" is a useful short-form for the phrase "early childhood education and care". Caldwell (1991) coined the word because she believed that the profusion of labels, for example, daycare, pre-school, childcare, nursery school, and kindergarten, confuses and "prevents the internal assimilation of a clear concept of the essential nature of the service" (p. 200). By using the term "educare" I have acknowledged the indivisibility of the care and education functions of early childhood programmes (Calder, 1990; Meade, 1985a; Smith 1988).

This thesis is organised into eight chapters. Following this introduction is a review of the literature and an outline of the study sample and methodology. There are three results chapters, each of which presents data and discussion around a research question or set of questions. The first results chapter focuses on programme goals, values about quality educare and people's perceptions of their centre's quality. The second results chapter looks at practices of quality, while the third focuses on how the charter development process helped people to examine issues of quality and to agree on practices of quality. The main findings for each research question and profiles of early childhood group quality are presented in a summary and discussion chapter. The thesis concludes with discussion of the contribution, implications and limitations of the study.

Chapter Two

L I T E R A T U R E R E V I E W

Early Childhood Services in New Zealand

Early childhood services are numerous and comprise of more than twenty-five varieties. Most services provide for children under five years of age as nearly all children start school when they are five. Some services also provide after-school care for children. In 1966, twenty-seven percent of three and four year olds were enrolled at some form of early childhood programme. By 1973 this had risen to approximately forty-six percent (Barney, 1975) and then to approximately seventy-one percent in 1990 (Ministry of Education, 1991a). There are currently an estimated 126,134 children enrolled at some form of early childhood service. Full-time services and services which provide educare in children's native language and culture have experienced the greatest growth in enrolments. In contrast, playcentres which depend upon parent participation and provide part-day educare for children have experienced a decline in enrolments of five percent over the last two years (Nicholl, 1992).

The four largest early childhood services were focused on in this research study: state kindergartens, childcare centres, playcentres (parent cooperatives), and kohanga reo (Maori language nests). The historical reasons for the development of these services were responses to social and community or parent needs. The kindergarten movement has a long history while Te Kohanga Reo is a more recent movement. The first kindergarten opened in 1898 in Dunedin. In 1903 the first organised creche or childcare centre opened in Wellington. The first playcentres opened some years later in 1941 in Christchurch and Wellington. The first Te Kohanga Reo opened in April 1982 in Wainuiomata, Wellington. The playcentre movement celebrated its fiftieth anniversary in 1991 and Te Kohanga Reo had its tenth anniversary in 1992.

In 1990 at the time of this study there were 662 childcare centres, 621 playcentres, 616 kohanga reo and 575 kindergartens (Nicholl, 1992). Kindergartens catered for over one-third of all enrolments or 43,792 children. Childcare centres were the second largest service, providing for approximately 29,786 children. Playcentres and Te Kohanga Reo had enrolments of approximately 22,668 children and 10,108 children.

The early planners of kindergarten set out to provide for children from less well-off families (Barney, 1975). The philanthropic view lessened over the years as parents formed themselves into committees

to oversee the running of their kindergartens. Kindergarten regulations did not insist on parents' active involvement and parents mainly left the running of the programme to State trained teachers. Kindergartens today are virtually free to parents. Until 1989 the kindergarten movement received the major share (about 70%) of government expenditure on early education. Kindergartens provide part-time (sessional) programmes for three to five year old children.

Playcentre parents organised themselves to provide for their own children. With the professional help of Gwen Somerset¹ the playcentre movement supported parents to train to become supervisors. "This notion of the supervisor emerging from the group of mothers through participation and training is what gives the New Zealand playcentre movement its distinctive flavour" (Barney, 1975, p. 58). In the early days of the development of kindergarten and playcentre services, Barney (1975) reports that the families who used these services were financially better-off and better educated than families who, for example, used childcare. Playcentres are run on a voluntary parent co-operative basis. Before the 1989 education reforms playcentres received a small amount (4.5%) of the total budget for early education funding. Playcentres operate on a sessional (part-time) basis and provide for children over two years six months (and toddlers if accompanied by a parent).

A childcare centre describes a broad array of services that do not fit any of the other categories of service and whose primary intention is to provide for the needs of parents who are working outside-of-the-home. Child minding or "back-yard" care became common as a result of the need for women to work outside of the home during World War Two. In the immediate post-war years nursery schools were opened in some secondary schools for the purpose of teaching girls about child development and care. Historically, the development of childcare services has suffered from a negative stigma unlike playcentres and kindergartens which were considered to be "preschool" organisations. The low status and inequitable government funding of childcare made it the "Cinderella" of the early childhood field (May-Cook, 1985). Changes in public policy now show recognition of childcare as an educational service. Government funding for childcare gradually increased through the seventies but in 1989 it still only received a small percentage (15%) of government early childhood funding. Many childcare centres include infants and toddlers and offer all-day sessions, and in these key respects they differ from kindergartens and playcentres.

Nga Kohanga Reo originated out of a need expressed by many Maori people at Hui (meetings) throughout the country for control of their own children's education and concern about a declining number of native Maori speakers (Irwin, 1990). The primary objectives of the Kohanga Reo movement are to preserve and enhance opportunities for the transmission of Maori language and culture to their children. The rapidity of the growth of Te Kohanga Reo challenged other early

¹ Gwen Somerset was an innovator in early education who believed that children's development and the quality of family life was best influenced through the cooperation of parents as learners. She set up a demonstration Community nursery school in Fielding in 1938. She had a leading role in negotiating the first minimum list of equipment with the Department of Education. She was Playcentre Federation President (1948 - 52) and Dominion Adviser (1952 -69) when she travelled around New Zealand holding meetings and workshop. She wrote considerable material for parents in playcentres (Densem, 1980).

childhood groups and the government to pay attention to the cultural needs of the Maori people. Most kohanga reo provide total immersion programmes depending upon the availability of staff and elders in a community who are fluent in te reo Maori (the Maori language). It is advocated that children attend from birth. A saying which shows the emphasis on language teaching, through interaction, from a very young age is: Whanau ana te Tamaiti, me rarau atu, whakamau te u, kei reir ka Timata te korero Maori (when the child is born, take it, put it to the breast, speak Maori at that point).

Historically the early childhood field has struggled for social recognition, public commitment and financial support (Cook, 1985). Feminist theory suggests that this is because state policies are dominated by patriarchal and capitalist interests. Early childhood programmes have mostly been initiated and promoted by women, used and worked in by women and so early childhood concerns have often been pushed aside by other more powerful issues (Cook, 1985; Meade, 1990a).

Before 1985 there had been two committees of inquiry on early childhood care and education but the recommendations of the 1947 Bailey Report and the 1971 Hill Report were not taken up by the Governments of the day. Recently a number of historical problems have been addressed. First I shall outline the problems and then the changes between 1985 and 1990 which brought about a "quiet revolution" in the provision of early education and care (Burns, 1989).

During the 1960s and '70s public recognition was growing that there was a shortage of childcare places and that this influenced the female employment rate. Sutch (1970) argued in his speech to the New Zealand Association of Child Care Centres that:

... both [kindergarten and playcentre] have played, and continue to play, an important part in New Zealand pre-school education, but they ... pre-suppose a family situation where the mother is at home during the day or for a good deal of the day. And whether we like it or not, it would seem there are two factors requiring a public system of child centres. The first is the educational need of the child and the other is the need of women who wish to work, or must work.

The interrelation between standards or quality and the provision of places in early childhood programmes was a major concern to experts, for example, Barney (1975) argued that:

... for the sake of the children involved, quantity should not be allowed to take precedence over quality. ... It is the 'in' thing to be active in the pre-school field, pushing for increased facilities. They are certainly needed, but not at the expense of watered down standards, resulting from overstretched resources (p. 283).

Benton (1979) noted that Maori needs were not adequately met by early childhood services. Maori children were growing up with little or no knowledge of their language. He predicated that spoken Maori was in danger of becoming extinct because most native speakers were over forty years of age. Before the advent of Kohanga Reo "the inclusion of anything Maori in the Early Childhood programme was limited to a selection of songs, 'stick games', poi and some 'crafts'. Very rarely was the greeting 'kia ora' heard" (Royal-Tangaere 1991, p. 5). Nga Kohanga Reo have helped to close the gap between Maori and non-Maori participation rates in educare because it is a service for Maori

people run by Maori (Ministry of Maori Affairs, 1991). During the early 1980s the conservative National Government did little to support Kohanga Reo. For example, Halkyard (1983) wrote that the Minister of Education (Merv Wellington) was "trying to encourage more Maoris into kindergarten. He's embarrassed that Te Kohanga Reo took off without waiting for him". The social equity policies of the 1984 - 1990 Labour Governments recognised the concerns and issues which affected Maori and attempted to redress Maori grievances under the 1840 Treaty of Waitangi².

In 1985, the then Minister of Education, Russell Marshall, organised the first ever early childhood forum. In his opening speech to representatives from the early childhood groups he stated that the government recognised the uniqueness of each group and that it was committed to securing better quality services. To quote:

Mosaics are comprised of individual pieces - like the early childhood world. As pieces of the mosaic you differ in size, in composition, in colour, in philosophy and in texture. And no one would want to change your individuality. It's unique. It's worth cherishing - it's one of the strengths of the early childhood movement ... Yet an assortment of pieces does not make a mosaic. A mosaic must be planned, designed, ordered and made.

While there was much to applaud about the diversity of services the fragmentation, inequality, and varying standards of quality was discussed at the forum.

Quality assurance, through mechanisms of regulations, advisers and inspectors, and the provision of teacher training, was largely accepted by policy-makers to be a government responsibility. There was some recognition that the interests of children are too fragile to compete with market forces and therefore regulation of standards and enforcement of these was vital (May, 1992). Some Labour Government policy decisions were particularly positive for childcare services. In 1986 State administrative responsibility for childcare was transferred from the Department of Social Welfare to the Department of Education. The 1960 Child Care Regulations were revised to include requirements for an "educational" programme and a trained staff member responsible for the programme. From 1988 three year integrated pre-service training at Colleges of Education for childcare and kindergarten staff was introduced.

When the Labour Government was elected in for a second term of office, Prime Minister David Lange took responsibility for the education portfolio. He appointed a committee chaired by Dr. Anne Meade to recommend reforms in the early childhood sector as part of the Government's focus on restructuring the whole education system. The Meade Committee produced a report called Education to be More (1988). One of their main conclusions was that the government should provide incentives for high quality, accessible and affordable early childhood services in all communities. As May (1990) commented the report showed that:

² The Treaty of Waitangi granted British crown sovereignty and protection in return for Maori authority over land, resources and other taonga (or treasures). History has shown that the European settlers and subsequent generations have not kept to the promises of the Treaty.

Government support for Early Childhood Care and Education was not only about providing good quality education for the under fives, but also about supporting women, and in the case of Maori and Polynesian communities, it was a question of cultural survival (p. 7).

Education to Be More proposed a system of administrative and funding arrangements which would have created after a five year phase-in period, increased and equitable government funding of services. This would have for the first time resulted in a "genuinely neutral financial choice for parents as to which type of early childhood service would best suit their family" (Easting, 1992, p. 132).

The Meade Committee recommended the introduction of national standards to ensure a baseline of quality across the early childhood groups. In addition the Committee advocated that centres be required to prepare a written contract, called a "charter", between themselves, their community and the State. A charter was defined as ...

a meeting point between community needs and national standards for early childhood services. It provides the opportunity for parents and community members to clearly identify early childhood needs as they see them and to design a service to meet those needs. There is considerable room for flexibility within charters as long as they meet standards which will produce the high-quality service necessary for young children's development (Meade, 1988, p. 50).

Most of the Meade proposals were included in the policy statement Before Five (Lange, 1988). After reviewing the policy documents and reports Farquhar (1991a) concluded that the main intentions were to introduce and ensure accountability for government funding, promote programme quality, increase the provision of services, and initiate a more equitable, efficient and devolved administration structure for early childhood services.

A significant feature of the education reforms has been that a great deal of emphasis is placed on the role of parents in their children's care and education. Research by Smith and Hubbard (1988a) suggests that parents and early childhood staff focus their communication on individual children's activities rather than on centre policy or programmes. Yet the new system of administration required parent participation in decision-making at the centre and an awareness of policy issues that impact on staff and centre. The introduction of minimum standards across early childhood services showed government attention to the features of quality which research has shown to be important and which should be regulated by the State. The introduction of the concept of the "charter" provided a second (internationally unique) level of quality assurance.

Nga Kohanga Reo maintained its autonomy as the National Trust was not brought under the new Ministry of Education for the purpose of chartering until the Trust requested this just prior to the 1990 government elections. Details about minimum standards and preparing a charter were contained in the Early Childhood Management Handbook which was distributed to centres during August 1989. If centres wanted to become a chartered service the Ministry of Education had to be notified of this by 15 November 1989. They were then expected to carry out a programme of consultation with parents, staff, and community members and negotiate a draft charter with the Ministry before 1 July 1990. Becoming a chartered service was financially attractive for centre managers and committees,

especially as the level of funding for the sector was substantially increased from \$73.8 million to \$112.8 million between 1989 and 1990, (a 65% increase).

In the Ministry's Guidelines to Negotiating Early Childhood Charters (1990a) their Officers were informed that "evidence of consultation with parents, staff and community needs to be sighted" and that "good intentions are not enough". Centre managers and committees were informed that charters had to be based on consultation with parents, staff and community, otherwise they would not be approved by the Ministry. The Ministry stressed that charters had to reflect the goals of the individual centre, support community needs and meet national requirements as specified in the Management Handbook (Ministry of Education, 1990b). The Handbook contained descriptions of nine topics that charters were expected to cover, which were:

1. Charter and Review Procedures
2. The Learner (that is, the curriculum and programme)
3. Special Needs Children
4. Health, Safety and Environment
5. Relationships with Parents/Whanau
6. Treaty of Waitangi
7. Equity
8. Staff Development and Advisory Support
9. Land and Buildings

Each topic started with a non-negotiable principle and an outline of what should be stated in management plans in order to achieve each principle. For example, "The Learner" topic started with the following principle:

The curriculum includes all the activities and events that take place in the early childhood centre programmes including the everyday routines, the attitude of staff to children, the way they communicate with children, their parents and families, and the range of activities provided.

The first two of the fourteen required statements under this principle were:

They learn who they are

So that all children can develop a feeling of self-worth, they must learn to understand, appreciate and be confident in their own culture, whether this be Maori, European/Pakeha, Pacific Island or some other culture of Aotearoa/New Zealand.

They are safe

Safeguards must ensure that children are not hurt physically, emotionally or socially and do not experience abuse or discrimination.

Under "The Learner" topic, mention was also made of management ideals which centres needed to explain how they would be working towards, for example, that staff observe and assess children's development.

The Ministry of Education's implementation of the licensing and charter approval processes was held up for a number of reasons, including lobbying by early childhood groups for changes to various proposed requirements and administration delays (Farquhar, 1991b). Legislation for minimum

standards regulations was not passed until September 1990. Charters were not able to approved until centres first met the minimum standards and so the charter approval date was put forward until the end of the year. After the *Before Five* reforms of 1989 a less stringent and vaguer document called the Statement of Desirable Objectives and Practices (or DOPs for short) replaced the Handbook in December 1990 (Ministry of Education, 1990c). The deadline for charter approval was moved forward (yet again) to 1 March 1991 and subsequently to 30 June 1991 (approximately one year after centres were instructed to carry out consultation and prepare a charter).

The DOPs removed the necessity for quality to be higher than the minimum for chartering purposes and made some of the earlier requirements no longer necessary, for example the section regarding the Treaty of Waitangi (Meade & Dalli, 1991). Staff and manager/committee efforts in writing a charter that reflected the unique nature of their centre and type of service were not considered important in the charter approval process. Anne Meade (1990a) described *Before Five* as a "foot in the door for young children and families". Yet the vulnerability of this position become clear when the incoming National Government announced the end of funding increases at the end of 1990 (Easting, 1992).

There is very little research that looks at the "best fit" amongst major stakeholders in educate. One early childhood researcher, Lassbo (1992a) argues that programmes should be developed and evaluated through dialogue between parents, staff, early childhood experts, and public administrators. This is argued to be important for reforms to be successful because parents and staff are the key parties in developing the "practical form" of early childhood programmes (Lassbo, 1992b). At the school level, concerns about quality have stemmed from the "repeated lessons that altering the main structural and organisational forms of schooling does not necessarily lead to change in content and processes" (Instance & Love, 1991, p. 25). School level research shows that policy-makers are removed from the day-to-day happenings in educational programmes and it is argued that policy-makers can not, therefore, be expected to hold a similar belief system as those who are directly involved (Spidell-Rusher, McGrevin & Lambiotte, 1992). Teachers must have the necessary resources to carry out district or national level directives. They must also agree with the directives and view these as positive for the children, themselves and the community they serve (Spidell-Rusher et al., 1992). Widely varying points of view on common issues invariably leads to dissonance (Barth, 1990). To illustrate, here is a reported example from a developing country:

In 1982 a new Minister of Education in Bangladesh announced that Arabic would be introduced in all primary one classes Only the Islamic schools had a cadre of teachers who could teach the subject. The directive was passed down the line to the class teacher who naturally did nothing to implement the proposal. [The teachers believed] ... that those who administered the system knew nothing of the problems of work at classroom level (Wilson 1988, p. 21).

In New Zealand, early childhood expertise was valued in the development of the *Before Five* policy document. Throughout the implementation process the governmental agencies made a serious effort to involve early childhood organisations in the decisions made. Such an approach was necessary to the implementation of the 1989/90 education reforms. It appeared that early childhood was on the Government's policy agenda despite a struggle of economic philosophy between the new right (the

then Minister of Finance, Roger Douglas and the Treasury) and the left (early childhood groups and Prime Minister David Lange).

However, the ground on which the Before Five policies came into being was already thin. The Treasury briefing papers to the incoming Labour Government in 1987 argued that benefits for women and for children should be separated and quantified in economic rather than social terms. A new mood of deregulation, devolvement and individualism had been infiltrating policy decisions on government-funded services for sometime (Meade, 1990a).

Most of the theoretical analysis by policy researchers on the education reforms relates to primary and secondary education. Most policy analysts believe that the reforms reflect New Right ideology. Nash (1989) suggests that by satisfying popular demands for community participation in education Labour was in reality devolving responsibility for problems of social equity on to services which lacked the resources necessary to resolve them. This enabled Government efforts to be concentrated around policy-making and fiscal control and served to check "demands on the state by lowering (or at last redirecting) expectations about the capacity of the state to satisfy them" (Nash, 1989, p. 114). The charter was initially described as a "contract" but this was changed to an "agreement" between the State and individual services to avoid the possibility of legal contestation by a third party such as parents or community groups (Codd & Gordon, 1991). Policy analysts argue that the charter as a basis of "partnership" came to signify the power and control of the State (Codd & Gordon, 1991; Nash, 1989).

The Concept of Quality as a Social Construction

Views of quality tend to reflect political and cultural contexts, which can be seen in the nature and standard of development of early childhood facilities and government involvement. In Nigeria, Ate (1986) argues that it is more important to first try to obtain high quality health, safety and nutritional conditions of care in daycare centres because focussing on educational issues is an unrealistic goal for promoting quality. In Brazil, Souza and Sontos (1993) explain that

... at first a creche was seen as a safe place to leave children. It was enough to care for their health and nutrition. But now mothers have become more aware of the educational importance of the early years and government authorities have been lobbied to provide creches with an infrastructure to enable them to operate as a place of education (p. 10).

In New Zealand, as in many other industrialised nations, the health and safety of children tends to be defined as the floor or baseline of quality rather than the optimal level. In addition to valuing the promotion of children's learning through education, the New Zealand approach to quality uses a value base as articulated in the Education to be More report (Meade, 1988) as well as in more recent developments such as the Early Childhood Curriculum Guidelines which have distinct Maori and English versions (Carr & May, 1992). The report Education to be More recognises that values are

involved in defining quality and in providing a quality early childhood service. This recognition of the importance of both cultural-political and research-based indicators of quality was also reflected in the charter principles stated in the Early Childhood Management Handbook.

Often the everyday meaning of quality is taken to be that which ranges from the satisfactory to the admirable and the excellent. For example, the purpose of licensing regulations is to differentiate between centres which provide an acceptable level of quality and those which are shoddy or disreputable (Freedman, 1987). But, all embracing, pervasive excellence is not attainable because the context in which early childhood groups operate is constantly changing and unpredictable (Farquhar, 1990). As standards are reached the construct of "good-quality" is redefined and higher expectations and further criteria emerge as important. Quality, defined in this sense is not the achievable kind of norm. And, perhaps quality is not enough? For example, one dictionary defines "excellence" as superior quality. While "quality" can be used as a normative term to refer to the standard or adequacy of educare, it may also be used to describe what people perceive to be the special or unique character of their centre and service. The word "quality", therefore, does not attract a precise definition.

I propose that the theoretical relationship between values, structural features of quality and processes is that values influence whether or to what degree environmental features and human interactions are translated into quality for each individual in an early childhood setting. For example Meade (1985a) reported in her study of early childhood programmes that if staff said they aimed to make parents feel welcome then they did. On paper, according to research-based recommendations or licensing regulations, a centre might be judged as having all the right ingredients to provide a good-quality service (children and their families), but quality is arguably in the eye of the beholder.

The research evidence suggests that "the ease with which and the extent to which structural factors are translated into quality clearly vary depending on the culture, the context, and the alternative opportunities available to children, care providers, and parents" (Lamb & Sternberg, 1992, p. 15). Quality is an inherently subjective concept, defined on the basis of values and beliefs, which may change over time and is influenced by a complex interplay of past and present experiences and environmental factors (eg. level of government funding and social beliefs about the use of early childhood services). Articulations of what constitutes good-quality educare may therefore be unique to the particular culture from which they emerged (Coleman, 1977).

In the literature there are at least three research-based views of quality according to Ruopp and his associates (1979). In the first view, early childhood centres are seen by researchers as a service to working parents. Quality means "meeting the needs of the parent and providing a loving home-like environment in which the child is safe, adequately fed, active and happy" (p. 61). The second view of quality, influenced by Head Start and other early intervention programmes in the United States, is concerned with developmental benefits to the child. Researchers who subscribe to this view take it as a given that a good-quality programme must be one that produces positive outcomes in children. A third more recent view to be taken in the literature is that quality means designing early childhood

programmes that help families to function more effectively (Phillips & Howes, 1987). Researchers have noted that the influence of home background can not be ignored when measuring the effects of variations in the quality of the centre environment on children (Kontos, 1991).

Some researchers believe that we now know enough about the elements of good-quality to specify these and attention should be focused on producing better quality centres instead of on generating esoteric research (Hilliard, 1985; Wylie, 1988). For example, Hilliard (1985, p.32) writes: "all we need now is a clear and unequivocal public commitment ... to pay for the quality we know how to produce". An authority on educare quality has said, "there is no shortage of material [therefore] what can I say that is novel?" (Goodnow, 1989, p. 9). Goodnow and a number of other critics of the positivist approach in early childhood research have, however, pointed to a number of methodological and epistemological shortcomings in the literature.

Many researchers have sought to identify and examine indicators of good-quality which can be observed, manipulated and measured (Howes, 1986; Phillips, 1987). The "iron triangle" of educare, comprising of the variables of adult-child ratio, group size, and trained staff, have become the pivotal measures (Pence, 1992). Researchers have operationalised the concept of quality to investigate differences between children experiencing educare situations of varying quality. For example, Vandell and Powers (1983) determined the quality of sixteen childcare centres by assessing the adult-child ratio, abundance of toys and staffing characteristics. Some researchers have used global measures of quality, such as the Early Childhood Environment Rating Scale (Harms & Clifford, 1984) to conclude that better quality centres on the ECERS produce children who have higher levels of task orientation (McCartney, Scarr, Phillips & Grajek., 1985), higher scores on language and intelligence tests (Goelman & Pence, 1987; McCartney et al, 1985) and are more considerate and sociable (McCartney, Scarr, Phillips, Grajek & Schwarz, 1982). The majority of studies have been carried out on high quality, university-based centres (Belsky, Steinberg & Walker 1982; Smith & Swain, 1988) because poor quality settings are generally inaccessible to researchers who take the experimental approach (King & MacKinnon, 1988).

The accumulated research evidence has lead to a belief that the presence of certain structural indicators (in particular, adult-child ratio, group size and trained staff) will assure a high quality centre. However, specifying what constitutes good-quality educare is not as simple as knowing the key indicators as identified by research (Farquhar, 1990). Centres that, for example, have high adult-child ratios, small group-size and trained staff also seem to have involved parents, stimulating activities for children and well-designed play space (Phillips, 1987, p.121). Single measures of quality help to predict child outcomes but they do not guarantee high quality care (Lamb & Sternberg, 1992):

... extensive training, education, and experience, like generous adult-child ratios, have to be translated into sensitive patterns of interaction, displays of appropriate emotion, and the intuitive understanding of children that make the experiences richly rewarding for children (p. 15).

Research by Tizard and associates (1976) shows that children only benefit from an improved staff ratio if staff see their role as educational rather than as supervisory, and if all staff are involved with the children rather than talking to each other or performing housekeeping tasks. In this current zeitgeist for high quality educare, Lanser and McDonnell (1991) remind us that quality should not be determined by whether a centre provides the latest educational equipment and materials, it is how the equipment and materials are used and the social interactions that are involved which are important. Fiene's (1987) research on the relationship between compliance with licencing standards, research-based indicators of quality and child outcomes has shown that the most expensive early childhood programmes are not necessarily always the very best ones for children. There is a complex interaction of human and physical environment factors that goes into making an early childhood experience a positive (quality) one for each child (McLean, 1983).

Universal agreement on what constitutes a good-quality early childhood setting and programme is often assumed by researchers (Howes & Olenick, 1986; Vandell & Powers, 1983). Yet variation in views exists across social class, cultural and ethnic groups (Holloway, 1991; Rashid, 1985; Silin, 1987). The majority of the published research comes from North America and this raises an issue of relevance in other cultural contexts (Holloway, 1991; Melhuish & Moss, 1991; Silin, 1987). It is argued by Holloway (1991) that a particular feature of a setting becomes desirable or undesirable only in relation to the goals of the early childhood staff. Tobin, Wu and Davidson's (1989) recent study of educare in three countries highlights cultural differences in expectations and values. For example, in Japan class sizes are large because diminished opportunity for staff-child interaction is believed to be better for orienting children towards their peer group so that they are less dependent on staff and learn to become "good" Japanese citizens.

The view that psychology can generate objective neutral knowledge independent of political and normative context is naive, according to philosophers of science (Carr & Kemmis, 1986). Researchers have relied on sophisticated quantitative criteria and have not used methodologies to explore and reflect "the complexity of daily life which families with young children experience, nor the full range of needs, perspectives and objectives which services must recognise and attempt to meet" (Balageur et al, 1991, p. 8).

There has been little empirical attention paid to what educare providers and communities think about quality. Lassbo (1992b) explains that quality is represented by the common agreement and satisfaction between the staff and parents on aspects covering the care, the socialisation and the education of the child. Quality in educare settings is a values issue as well as an empirical issue. Defining quality from a psychological child development perspective is only one approach. As research approaches become more pluralistic other perspectives will become "as familiar as psychological ones are now. These perspectives, when added to psychological ones, will undoubtedly provide a broader, if not deeper, understanding of the social reality of early education settings" (Takanishi, 1981, p. 90).

What the Research Informs us about Quality

There are three parts to the formula for good-quality educare (Ruopp et al., 1979). These are that:

- centres have the right ingredients,
- the processes, the daily interactions, are skilfully handled and appropriate to children's growth and development, and
- there is evaluation of demonstrable outcomes via observations of children and obtaining feedback from parents.

Quality is for example about adequate supplies of equipment, space and staff numbers (Prescott, 1984). It is about how these resources are used. It is also about staff awareness of their own behaviour and how children are affected by both the social and physical environment (Hedin & Ekholm, 1989). The Meade Committee focused on the ingredients and the processes and left evaluation "to the professionalism of early childhood staff and to ERO [Education Review Office] reviewers fostering self-assessment by their approach to services" (Meade, 1991, p. 1).

Ingredients

The Ministry of Education's (1991b) analysis of submissions on the Government's early childhood education reviews shows that most concern was expressed about the "ingredients" of quality. The submissions covered a broad area of areas and problems to do with the "ingredients" of quality. In summary these were as follows:

1. Funding: level of public funding, accountability of centres to government and to parents, various implications of access to public funding (eg. cost to families, equity of access, cost and provision of training courses, fundraising, user-pays policies, time and cost of human resources for accountability, and increased bureaucratic demands).
2. Property: appropriateness of government regulations, playground equipment, facilities (eg. toilets, sleeping, sick room), safety (eg. fencing, maintenance, window glazing), hygiene (eg. hand basins), heating, lighting and ventilation.
3. Staffing: appropriateness of government regulations, training, qualifications, adult-child ratio, staff wages and conditions of service.

Funding impacts on all three parts of the quality equation, such as whether a centre can afford to employ qualified staff or whether staff can be given leave to attend an inservice course (Gardiner, 1991; Willer, 1990). Centres that cater mainly for low-income families or try to keep their fees at a level parents can afford are likely to have lower standards than centres that charge fees at a level that involves a negligible trade-off between standards and cost (Ruopp & Travers, 1982). A 1985 study of the economic costs of different early childhood groups in New Zealand concluded that the cost of operating a centre is higher than potential profit unless parents are charged exorbitant fees or provisions are sub-standard (Kennan, 1985). Advocates for better quality educare argue the necessity of a sufficient level of public funding so that decisions do not have to be made between the level of fees to parents and spending on equipment and staff wages. Advocates also argue that the level of funding should relate to the age of the children being cared for because infants require much higher ratios of staff than older children (May, 1991). The present Minister of Education has said that

in times of fiscal restraint he can not always yield to the demands of advocates for better quality educare because a balance has to be struck between the "ideal world" and "reality" (Smith, L. 1991a).

Group size and staff-child ratio are inextricably related and neither one can be regulated without consideration of the other (Ruopp et al., 1979). A group of ten children with one staff member may provide a higher quality setting than a group of twenty-one with three staff (King & MacKinnon, 1988). A small group-size and a high staff-child ratio is especially critical for under-three-year-old children. For example, Phillips and Howes (1987) report that in centres with large groups and poor ratios infants were more overtly distressed and apathetic, and the staff were engaged in more management behaviour than child stimulation. Half-day centres may appear to have an adequate staff-child ratio but staff interact with many more children over two sessions a day than if they had the same group of children all day (Veale, 1991). The presence of too many adults can mean less adult-child contact as staff, parents and other adults engage in conversation (Meade, 1985a; Tizard et al; 1976). Research on the relationship between group size, child age, and effects on children's development indicates the ideal group size to be around eighteen for three to five year olds, twelve for toddlers and eight to twelve for infants (Ruopp et al., 1979; Howes, 1983; Clarke-Stewart & Gruber, 1984). The ideal ratio for under-threes is one staff member to every three infants and toddlers (Rutter, 1982), and for three to five year olds it is about one staff member to every six or eight children (Smith & Swain, 1988; Travers, Goodson, Singer & Connel, 1980).

Good staff are the key to making an early childhood setting an optimal one for children (Almy, 1981; Lero & Kyle, 1985). Staff education and training in child development is important because this has been shown to be related to their sensitivity and involvement with children (Howes, 1983; Whitebook, Howes, & Phillips, 1990). Wilson (1988) claims that all the great teachers have traditionally possessed three kinds of attributes: charisma, knowledge, and pedagogic or craft skills such as managing group and individual learning. While "born" teachers had charisma, subject knowledge and pedagogical skills could only be developed through training. According to Feeney and Chun (1985) trained staff tend to have more contacts of an encouraging and rewarding nature than untrained staff. Rigid, anxious, and dominating staff behaviour negatively affects cognitive performance and development of social skills in young children. The evidence on the contribution of experience to staff effectiveness in working with children is mixed. Ruopp et al. (1979) found that staff with more years of experience engaged in less social interaction and cognitive stimulation with children. On the other hand, Howes (1983) found that experienced staff were more responsive to children's social bids.

Situational and employment factors influence turnover. In a California study by Olenick (1986) staff retention was higher in centres that paid higher wages. The National Child Care Staffing Study (Whitebook et al., 1990) found an important relationship between salaries and programme quality. Staff in centres that met recognised measures of high quality, reported higher levels of job satisfaction and engaged in more appropriate caregiving with children. Howes (1983) found in her study of staff working with toddlers that those with more favourable conditions (that is, fewer children to care for, shorter hours of work and combining less housework-type chores with childcare) were less likely to

be restrictive and negative and more likely to be responsive to toddlers' social bids, express affection and use facilitative social stimulation.

Staff are enriched or limited as agents of care according to the care they receive. They need to experience good working conditions and sustained social-professional support (Maier, 1979). As early as 1949 the Consultative Committee on Nursery Infant Education in Britain stated that the "constant demands of young children impose a severe physical and nervous strain on the teacher" (p.82). The Committee recommended that staff have more modern facilities and some free time "to catch up on mending, book-work, and planning" (p.89). Factors such as how much staff get paid, what job security they have, the size of the facility, the staff-child ratio and the extent to which they are involved in decision-making affect staff performance and can lead to physical and psychological burnout (Jorde-Bloom, 1986; Prescott, Jones & Kritchevsky, 1967; Whitebook & Howes, 1980).

From a psycho-social perspective staff stability is a critical ingredient of quality care, especially for children under thirty months of age (Howes & Hamilton, 1992a). Changes in staffing can jeopardise young children's successful adjustment to group care (Whitebook & Granger, 1989). Stability in child-staff relationships is essential for children's development of trust and their sense of security (Cummings, 1980; Erikson, 1963). Staff are most sensitive to and most involved with children who are secure in their relationship with them and they are least sensitive and involved with children who are ambivalent and avoiding of them (Howes & Hamilton, 1992b).

Characteristics of the physical environment are also important considerations of quality (Prescott, 1981; Snow, 1983). Research findings indicate that children and staff function better in ample space which is well organised and equipped with a good variety of activities both indoors and outdoors (Prescott, Jones & Kritchevsky, 1967; Smith & Connolly, 1986). For example, in larger spaces children tend to be more active and creative, whereas in smaller spaces they climb more, make more contact with equipment and other children, and become more aggressive (Smith & Connolly, 1986). The accessibility of equipment and materials for children to self-select is a design-related consideration. Hough, Nurss and Goodson (1984) found that even though staff in childcare centres listed thirty-seven categories of activity, only seven were consistently accessible to the children. Children need outdoor experiences to practice large muscle skills, experience freedom, and learn about outdoor environments (Bredenkamp, 1989). Providing spaces for children to play alone allows privacy and the ability to play without interference from others (Prescott, 1981). An environment designed to facilitate small group play with one or two peers is conducive to elaborate and intellectually demanding play (Bruner, 1980).

A wide variety of materials is desirable, but New Zealand researchers Smith and Swain (1988) feel that certain materials are vital because of their educational potential (for example, books and unit blocks). They state that good-quality programmes usually have at least the following activities and these are periodically added to or changed around to keep children stimulated and interested: "books, painting, drawing, collage, listening to and making music, dramatic play, manipulative activity,

carpentry, puzzles, blocks, sand, water, small and large wheeled toys, climbing and other gross motor activities" (p. 58).

Ensuring children's health and safety has been a constant concern in New Zealand, and particularly in the childcare service (May-Cook, 1985). A recent concern in the early childhood field is the number of reported cases of child abuse (sexual and physical) in childcare centres. The most horrifying has been in Christchurch at a Council childcare centre with a reputation for high quality where sexual abuse of children by a male worker was believed to have been occurring for almost five years (The Evening Post, 1992). It seems that young children continue to be very vulnerable.

Research evidence suggests that clear pathways prevent unnecessary chaos and are important for child and adult safety in both indoor and outdoor areas (Prescott, 1981). Adult-sized furniture and clear pathways are related to physical injury, body strain and mental health (Whitebook & Ginsburg, 1983). Staff awareness of the times children are most likely to have accidents is highlighted by a study of the records of a United States centre (Elardo, Solomons & Snider, 1987). Toddlers had the greatest number of accidents, most of which were self-induced and usually to the head. Peak times for accidents were mid-morning when children were most active in their play, after vacations, and in spring when more outdoor play became possible after the winter months. The evidence suggests that staff should at all times be watching children under the age of three years, and while over-three-year-old children may be out of sight during their play staff should always be within physical proximity to hear them and to be aware of their activities (Bredenkamp, 1989).

In contrast to most other occupations early childhood staff have a high contraction rate for colds, sore throats, flu, head lice, back pain, headaches (Whitebook & Ginsburg, 1983). Research on programmes which vary in the frequency of child sickness points to staff hand-washing practices as the main factor affecting child health (Aronson, 1987). Other good health and hygiene practices include the isolation of sick children in a room not used by others, staff not working when they are sick, the use of staff substitutes to reduce the chance of protracting and spreading illness, and separate toilet/washing facilities for adults and children (Whitebook & Ginsburg, 1983).

Processes

The relationship between children and staff is multi-dimensional (Howes & Hamilton 1992b). Early childhood staff function as playmates, managers, educators and caregivers. Positive, physically close adult-child interaction is related to secure attachment relationships (Anderson, Nagle, Roberts & Smith, 1981). Staff who are a source of support, encouragement, and physical contact produce children who are more likely to make use of and benefit from the educational opportunities provided (Botkin & Twardosz, 1988). For example, staff expressions of affection are linked to desirable child behaviours such as task performance (Larsen, 1975). Frequent smiling by staff is associated with reciprocal responses from two-year-olds (Zanolli, Saudargas, & Twardosz, 1990).

Staff ability to understand the child's perspective, the child's intentions and aspirations was found by Pramling and Lindahl (1992) to be one of the most important factors for the development of high quality programmes for toddlers. Pence (1992) says that little is known about how children perceive their experiences and argues that the phrase "in the best interests of children" is often used by staff to justify greater adult control of children. Langsted (1992) did an interesting study where he asked five-year-old boys what they remembered and thought was best about their early childhood centre experience. The primary quality from the child's perspective was other children (that is, having others to play with). The second quality was fun, including walks and play activities. Staff clearly had an important role for children but not in the way that educators and researchers probably think. Langsted's sample of boys were conscious about aspects of staff behaviour such as the way they handled their conflicts with other children and the warmth of their interactions, but staff did not hold the same status as peers.

Research on effective programmes for children's learning and development of social skills supports the child-centered approach. According to Meade (1985a) New Zealand early childhood staff tend to be committed to this view of learning. A good programme is a flexible one in which children are allowed to choose from among a selection of goal directed activities and experience everyday experiences like going for walks (Bruner, 1980, Smith & Swain, 1988, Sylva, Roy, & Painter, 1980). Peer interaction is vital for children's learning and a useful strategy for fostering peer interactions is to arrange the environment to encourage play in different sized groups (Bruner, 1980; Katz 1985). Staff should join in children's play as this extends the length of time children spend in an activity, and research has demonstrated that the duration of play is related to child learning (Sylva, et al., 1980). Staff need to support children's play initiatives and not suppress these through thoughtless intervention or letting themselves become the focus of attention (Saracho, 1991).

Strategies for helping children learn must be responsive to their individual needs, background and interests (Bredenkamp, 1989; Schweinhart & Weikart, 1985). Individual differences in family and cultural backgrounds, such as children's expressive styles, their ways of interacting and playing should be acknowledged by staff (Bredenkamp, 1989). The early childhood programme should not be a culturally assaultive one (Clark, DeWolf & Clark, 1992). Staff can help children to understand cultural differences and value diversity (Clark et al., 1992; Swadener, 1988). Providing a wide

variety of multi-cultural and non-stereotyping materials and activities, including children with special developmental needs in all aspects of the programme, and acknowledging the customs and values important to each family helps children to appreciate differences and similarities amongst people and enhances their self-concept and esteem (Bredenkamp, 1989; Swadener, 1988; Watkins & Bradbard, 1982).

Carr and Claxington (1989) suggest that early childhood staff may need to convince parents of the merits of a child-centered curriculum. Overseas research has shown that parents maintain a distinction between "play" and "education" and place more emphasis than staff on the role of the programme being to prepare children for school rather than concentrating on "learning to learn" (Carr & Claxington, 1989). In Scandinavia (Hallden, 1991) and Europe (David, 1992) two distinct and contradictory views of early education have been identified. One view is of the "child as project" doing organised work usually at tables and the other is of the "child as being" learning to get along with their peer group and participating in a range of self-selected activities. According to David (1992),

British parents ... are moving further and further from the concept of child development as a natural process, directed by inner drives. British parents are increasingly seeking to shape their children's lives and they expect preschool provision to help them in this task (p. 7).

Early childhood centres are characterised by groups of staff working in the same environment. This creates a unique interpersonal situation involving complex adult social dynamics (Veale, 1991). When staff relate well with one another they work more effectively as a team and this in turn results in greater staff satisfaction and liking of their job (Maslach & Pines, 1977). Staff disharmony is likely to lead to lower job satisfaction and a higher turnover of staff (Smith, McMillan, Kennedy, & Ratcliffe, in press). Young children are very sensitive to conflicts between adults (Cummings, Iannotti, & Zahn-Waxler, 1985). New Zealand practitioners Hubbard and Keay (1979) propose that flexibility in leadership style and shared decision-making is an important component of good-quality programmes. Jorde-Bloom (1986) concludes from her research that administrators and directors can foster good working relationships between staff by encouraging them to work collaboratively and by showing recognition of their individual efforts.

The early childhood field has had a close association with mothering (Stonehouse, 1989). Katz (1980) suggests that the younger the child the more overlap there is in the roles of mothers and staff. Rodd (1988) points out that the image of early childhood staff is moving towards full professionalism because staff are being required to develop knowledge and skills beyond those previously considered necessary to care and educate young children. Staff are not only required to plan and implement a range of services, they are accountable for the services they offer. Staff also act as advocates for children and families.

Positive reciprocal staff-parent interactions are vital given that family variables (for example, socio-economic status and parenting skills) interact with programme variables in influencing child outcomes (Phillips & Howes, 1987). People working with young children have always recognised the significant

influence of the family on children's development. As early as the nineteenth century Pestalozzi argued that parents provide the "care of children's education" and that the teacher's role is to provide a "decent shell" around that care (Pestalozzi, 1951, p.26).

According to Smith and Hubbard (1988b) when staff relate well with parents, children seem to notice and have more conversation with staff. Children with whose parents staff have good relationships, are regarded by staff as happier and better adjusted to the centre environment. Parents spend more time touching and farewelling their children when they have better relationships with staff. Also, better parent-staff communication is related to children engaging in more positive and less negative social interaction with peers.

Staff by virtue of their position and/or training may think they have the best interests of the child "at heart" and this is why it is important for staff to attempt to find out and know the views of parents (Rosenthal, 1991). Parents' satisfaction with their childcare arrangement increases to the degree that staff inform parents about their child, allow parents to have some control over what happens to their child and respect their suggestions (Farqua & Labensohn, 1986). Staff need to bridge the gap between themselves as professionals and parents who "invest a great deal of love, time, effort, and so on, in their children" and are therefore "hot" about their children (David, 1992, p. 6). They should not assume expert status and undermine parents' confidence in their child rearing practices (Smith & Swain, 1988).

Developing good relationships often requires hard work on the part of staff (Smith & Swain, 1988) as well parents (Cook, 1982). Home-visits by staff may help to enhance centre-family relationships because meeting in a comfortable, relaxed environment opens communication between children, staff and parents (Fox-Barnett & Meyer, 1992). Also, adult-sized furniture and facilities for parents at the centre may help parents to feel welcome and wanted (Harms & Clifford, 1984).

Parent education programmes and parent support are key approaches for fostering interconnections between home and centre settings and for strengthening families (Powell, 1989; Smith, 1980; Weikart, Epstein, Schweinhart, & Bond, 1978). Parent support can be provided in lieu of or in addition to parent education according to Powell (1989). Powell (1989) explains that the label of "parent education" describes the dissemination of information to parents which is assumed to affect behaviours and attitudes, whereas the parent support approach assumes that the provision of social support will positively influence parenting.

Staff can have negative attitudes towards parents because of differences in beliefs, attitudes, role overload, and behaviours typical of less education (Kontos & Wells, 1986). This affects the ability of the centre to serve as a family support for all parents. "Notions of 'educational intervention' to affect parents' attitudes or behaviour towards their children can easily slide over into something near 'interference' - with undertones of 'bad behaviour', 'bad attitude' or 'poor parenting practice' which has to be changed" (Smith, 1980, pp. 15-16). Staff ought to acquire sensitivity to the needs of all parents,

and not just the friendly ones who share similar social and child-rearing values (Kontos & Wells, 1986). Galinsky's (1990) research suggests that staff need to acknowledge their attitudes towards parents. Her data showed that the parents most in need of support from staff were often the ones least likely to receive it.

Involving parents in the centre can positively influence parents attitudes towards education and their aspirations for their child (Weikart et al., 1978). It is possible for misunderstandings to develop because of parents limited participation in the programme, usually only brief communication with staff when they drop-off and collect their child, and lack of information as to what to look for in a good-quality programme for children (Fein, 1980). If the parents' views are dramatically different from those of staff problems in communication or disagreements over programme content and organisation can occur.

It is not clear whether parent-focused programmes are significantly more effective than programmes that work mainly with the child (Clarke-Stewart & Fein, 1983). In New Zealand, playcentres have a parent-focused philosophy and childcare centres are an example of a service designed primarily to cater for the care and education needs of the child. Research evidence suggests that parents tend to select a childcare arrangement that best matches their own values, thereby reducing the level of potential discontinuity for children between home and centre settings. In a study by Phillips, Scarr, and McCartney (1987) parents who placed a high value on social skills and a low value on conformity selected higher quality centres which matched their expectations. Pence and Goelman (1987) found that the nature of the programme was an important influence on parents selection of their centre whereas the caregiver's characteristics were more salient for the parents who selected family daycare.

Assessment and Evaluation

Meade (1987, p. 5) believes that "quality programmes are associated with planning; and not simply a few scribbles about changes to table top activities". The conscious effort to define a programme is thought to be a more important contributor to quality than the nature of the programme (Schweinhart & Weikart, 1985).

The findings of a New Zealand study showed that the single most explanatory factor of "good and bad features" was staff goals and objectives (Meade, 1985a). "If staff said they aimed to give children individual attention, then all children received a fair proportion of staff time. If staff said they wanted to make parents feel welcome at their kindergarten, then parent involvement would be higher" (Meade 1990b, p.9). Sylva et al. (1980) found that playgroups operated more like "homes" because staff were also parents and valued shared child minding between parents. In contrast, nursery schools operated more like "schools" with productive peer play and work activities because staff emphasised concern for children's developmental needs.

By observing children at play, staff can acquire insights into children's perceptions and experiences, and develop strategies to facilitate their learning (Saracho, 1991). Meade (1985b) in her research

report on the question of Are Early Educators Meeting Children's Demands or Needs? shows how the children most in need of staff attention miss out and those who demand it get it:

We are providing through child-centered programmes, equality of opportunity for learning but the result is not equal outcomes. Those who come into programmes with disadvantages, collude with processes which continue these disadvantages (p. 48).

Meade (1985b) recommends that staff carry out regular brainstorming sessions on different groups of children in turn, discussing how each child's needs are being met and what more they can do.

The level of programme quality is likely to suffer if there are no procedures for review (Freedman, 1987). Staff are more committed to achieving higher quality when they are involved in defining programme objectives and assessing how well they are meeting these. The contemporary conception of quality adds to the qualities that a teacher should have "the idea of the teacher as reflective practitioner" (Wilson, 1988, p.19). During the course of their work staff make countless decisions as they "reflect-in-action" (Smith et al., in press). Making conscious the nature of this knowledge by "reflecting-on-action" can help staff to see how they can make their practice more effective (Veale, 1991).

New Zealand Studies on Values and Practices

Swain and Swain (1982) carried out a case study at a Hamilton childcare centre on what parents (n = 42) thought about and wanted of their centre. Two quality criteria were considered to be very important by every parent: staff show warmth, caring and a genuine concern for children, and the centre is a warm and comfortable place. "Family" type characteristics were the key components of quality for the parents. In summary, parents viewed good-quality as "a warm, clean and spacious centre providing a rich and stimulating blend of activities, especially those facilitating social skills, through a staff of warm, caring adults willing and able to give each child individual attention" (p. 33). When asked what they liked about their centre more than three-quarters of the parents referred to the "warmth" of the centre and staff. When asked what they disliked, fifty-two percent made no comment, which suggested to the researchers that they were "happy" with the centre. Of the parents who mentioned areas for improvement, a small group (12%) wanted closer liaison between the centre and parents. A variety of other dislikes were mentioned by individual parents.

O'Rourke (1981) asked childcare directors as part of their in-service training course to interview parents at their centre about the role of childcare. Parents perceived the childcare programme to be most beneficial for fostering social development (63%) and intellectual development (60%). Relatively few parents mentioned emotional development (8%) and physical skill development (2%).

Parents of infants and toddlers (n = 36) attending six Auckland and Wellington childcare centres were interviewed in Podmore and Craig's (1991) study. A high percentage of parents (86%) wanted to feel assured that their children were safe, secure, and well cared for. Over half the parents wanted to

know that children were being intellectually stimulated. Some parents (31%) said that their child had no cultural needs, while other parents talked about how their centre could meet cultural needs (for example, 25% said that it was important for children to learn about Maori or Pacific Island cultures).

Smith (1986) asked the parents of sixty children and twenty-five staff at Dunedin childcare centres and kindergartens to rate the advantages of their programme. Staff at kindergartens and childcare centres emphasised the advantages of promotion of children's language development and provision of a non-sex-stereotyped environment, more than parents did. Parents rated preparation of children for school and getting children used to paying attention, significantly higher than staff did.

Renwick (1989) surveyed 258 kindergarten teachers and 216 parents in Wellington and Auckland as well as observing at twenty Christchurch and Nelson kindergartens. She found that teachers aimed to "develop an environment where parents and other family members feel welcome" (p.104) and they were successful in this. Whether teachers worked in partnership with parents was more debatable. One-third of the teachers rarely or never visited children and parents at home. Teachers reported some problems associated with home-visiting such as lack of staff time and negative reactions from parents. Few parents said that they discussed their personal problems with a teacher. Casual conversations with teachers provided only low key day-to-day support. Teachers viewed parent support and education as important but parents did not rate this as highly. Parents were generally "happy to accept the teacher as the professional and hand over their child" (p. 115).

Staff goals and practices in six Wellington playcentres, kindergartens, and childcare centres were studied by Meade (1985a). Beliefs about what is important to provide and to be doing were reflected in how staff apportioned their time and in the range of activities made available to children. Childcare staff tended to spend more time attending to children's physical needs than other groups of staff. Childcare staff were more likely to rate physical and intellectual development of children as very important and less likely than other staff to rate parent involvement as very important. But their broad aims were the same as staff in other types of centres and they provided a similar educational programme.

Bell (1989) focused on the operational theories and practices of six kindergarten and childcare staff at two centres in Palmerston North. In instances where there did not seem to be congruency between theory and practice this was because of staff juxtaposition of personal and institutional knowledge or due to contextual constraints (for example the low status of childcare work). Staff interviews revealed that they were mostly interested in promoting children's development in the psycho-social domain. Only two out of six staff mentioned their role in promoting children's cognitive development. Although staff said that their role in relation to behaviour management was to be non-interventionist staff openly reinforced children's socially appropriate behaviour.

In comparison with the playcentre, childcare and kindergarten services there has been little research involving Te Kohanga Reo. One reason for this is the relative newness of the service on the New Zealand early childhood scene and reluctance within the kohanga movement for research to be carried

out which could be potentially damaging to their efforts. Another reason is the lack of guidelines on carrying out research in Maori settings. For her Master's thesis a Maori student Ka'ai (1990, p. 10) explored the hypothesis that there exists in kohanga a "distinct Maori pedagogy where practical skills of the child are developed at the social and cognitive level". She found that the kaupapa (philosophy) of Te Kohanga Reo has definite advantages for the Maori child, as kohanga experience facilitates entry into school on an equal basis with Pakeha peers.

Some issues in working towards providing quality in Te Kohanga Reo have been identified in the literature by contrasting knowledge of practices in Te Kohanga Reo with knowledge of practices in Pakeha-based services. The style of teaching has been noted as a key issue. According to an article in Tu Tangata (1986) little emphasis can sometimes be placed on children's spontaneous learning in the context of interactions with peers and play situations. Bennett (1985) makes a relevant point that an emphasis on rote learning is consistent with the prodigious feats of memory usual in pre-European settlement times.

Kaiako or Kaitiaki (staff) training and qualification is also a key issue. In Te Kohanga Reo fluency in te reo Maori (Maori language) is the important qualification, not early childhood teacher education. Yet, this belief and practice conflicts with research-based recommendations about the importance of trained staff.

Another issue is the kind of setting that is best for a kohanga programme to operate in. Tawhiwhirangi (1989) suggests that kohanga should ideally be based on the Marae or in homes. She believes that otherwise children may develop more aroha (love) for other (Pakeha) institutions and not look after their Marae when they are older. However, a problem of Marae-based and home-based kohanga is the difficulty of ensuring compliance with the same set of minimum licensing standards required of other early childhood groups. For example, on the Marae it would be inappropriate to give children individual bedding and cots when the usual practice is to sleep together on mattresses on the floor.

Summary

This chapter has provided an introduction to the New Zealand early childhood scene and the research literature. The characteristics of the main early childhood services and policy developments have been discussed. Attention was drawn to the difficulty of defining the concept of quality. It was argued that the concept of quality is a social construction. It is a subjective, dynamic, and culturally-based concept. A review of research findings was presented under the three parts of the formula for good quality proposed by Ruopp and associates (1979), being the right ingredients, social interactions and processes, and evaluation and feedback. A review of studies relating specifically to values and practices within New Zealand early childhood centres was also presented. This chapter provides a basis for the questions asked and the methodological approaches used in the study.

Chapter Three

M E T H O D O L O G Y

Research Aim and Questions

This main aim of this study was to investigate "quality" as a values-based concept. Such an approach has potential to make an original contribution to the literature on quality educare which at present reflects mainly a psychological child development perspective. My intentions were to investigate different perspectives on quality educare and to provide findings that have both practical and theoretical relevance in defining and promoting high quality.

The methodology of the study was developed after some first-hand involvement in using and examining measures of centre quality in the United States, visiting early childhood programmes and speaking with early childhood researchers in different countries, developing some draft proposals, and numerous consultations with early childhood professionals, policy advisers and research experts in New Zealand. This process was necessary to find out what questions needed to be asked in the New Zealand early childhood context and what particular methods of research would be acceptable to practitioners and useful in examining the topic of quality educare. The questions investigated were:

1. What does "quality" mean to parents and staff from four different early childhood groups?
2. Are there differences between parents and staff in their values about "quality"?
3. Do parent and staff values about "quality" converge with the philosophy of their early childhood group?
4. How do the views of New Zealand "experts" compare with those of parents and staff on the criteria which are important for ensuring good-quality educare?
5. What are parent and staff perceptions of the quality of their centre's environment and practices?
6. How are definitions of quality reflected in early childhood centre practice?
7. What form did charter development take in centres, and how did discussions contribute to constructing and understanding quality?

Constraints

The research questions led to certain requirements about the nature of the research process. The main premise or theory underlying the research questions was that government policies, social and cultural beliefs and community contacts, along with a centre's philosophy, contribute to differences in values and practices (constructions) of quality. A major requirement was, therefore, to obtain detailed and comprehensive information about beliefs, expectations, values and practices of quality. This was achieved through the study of the natural context of educare and the involvement of both parents and staff.

A related requirement was the need for the research to be relevant to those working in or using early childhood services. A systems perspective (Bronfenbrenner, 1979) and a critical theory approach (Carr & Kemmis, 1986) in undertaking the research were therefore important. Feminist and Maori critiques of positivism and traditional research approaches were drawn on to try to develop a methodology that would be sensitive to the perspectives of those being researched and empowering. A multimethod approach wherein data is collected in different ways (traditional and non-traditional) and from different sources was justifiable given the theoretical requirements of the research questions (Brewer & Hunter, 1989).

Methodological Rationale and Research Approach

...when child care workers read the research literature, they often do not find it helpful. It may lack personal meaning for practitioners and use categories and presumed relationships which do not correspond to their experiences. Or the results may be masked in research jargon and statistical analyses which do little to facilitate their applications to real life settings (Porter, 1982, p. 44).

A critique of positivism and the predominant psychological approach in the literature influenced decisions about the methodology. The methodology was designed to address the above argument made by Porter (1982) for research to be linked more to practice. An ecological approach was important to the study as the context of human interactions and values were of central interest (Bronfenbrenner, 1977; 1979). Guidance in making decisions about the methodology was gained from reading the writings of critical theorists. In addition, feminist perspectives on research were referred to and research approaches supported by feminist researchers were used in the study, including the multiple methods approach (Reinharz, 1992).

An ecological approach is not common in research on the topic of educare quality. For example, Olenick (1986) states that the definition of quality has been limited to variables describing the child's actual experience in the microsystem. An ecological approach requires attention to the relationships between the micro-setting of the early childhood centre and other systems. Research which is ecological in approach must be broad, focussing on the complexity and the connectedness of the different systems which directly and indirectly affect the early childhood setting (Bredenkamp & Willer, 1992).

Bronfenbrenner (1979) states that it is important for researchers to have a concern for ecological validity because

... within any culture or subculture, settings of a given kind tend to be very much alike, whereas between cultures they are distinctly different. It is as if with each ... culture and subculture there existed a blueprint for the organisation of every kind of setting (p. 4).

Ecological validity is the extent to which the environment experienced by the people being studied has the properties or characteristics which the researcher assumes it to have. It is also the extent to which the participants' meanings are reflected in what the researcher writes (McMillan, 1991). According to Bronfenbrenner's theory, it is imperative to understand how things make sense to the people participating in the research rather than imposing one's own meanings on their experiences. McMillan (1991) suggests that research must meet the requirement for ecological validity if it is to provide an adequate basis for social and educational policies.

There has been considerable debate about whether education is a science and can be researched using scientific principles and procedures. Summarising the debate Jonathon (1981) suggests that education researchers should not try to emulate scientists because as a practical activity the theory base of education will be different from that of pure science:

A scientific theory simply tells us what occurs under certain given conditions, and enables us to throw up and test hypotheses as to why it occurs ... Practical activities demand a particularly complex kind of theorising in which empirical inquiry and speculative thought both play an essential part (p. 161).

In both science and education research, objectivity involves shared subjective agreement about the defining characteristics relevant to a category. Hence, the procedures of both may be objective.

Critical theorists share a common belief that positivism has resulted in the growth of instrumental rationality and "created the illusion of an 'objective reality' over which the individual has no control" (Carr & Kemmis, 1986, p. 130). The search for absolutes or certainty in ways of knowing is called the "Cartesian Anxiety" (Bernstein, 1983). An outcome of reliance on the positivist paradigm in early childhood research is that it has led to a strained, if not distant, relationship between researchers and early childhood practitioners (Takanishi, 1981).

The positivist research paradigm has been argued against by critical theorists as well as by groups who have been negatively affected by the outcomes of positivist research. Bishop and Glynn (1992) state that many research activities by non-Maori investigators have done serious harm to Maori people by belittling the mana of their knowledge and cultural history. The authors explain that:

parting of the ways was reached in the late 1970s with some Maori groups claiming that only Maori people should study Maori things. Insisting that researchers should have Maori ancestry was not seen as biological essentialism but rather as a safeguard against facile exploitation of Maori material, and as a means of guaranteeing accountability of the researcher to those being researched (p. 128).

I was aware of some of the issues of carrying out research in a Maori setting at the time of preparing the proposal for the study. After carrying out the study and presenting the results to the kohanga reo whanau I had learnt and understood much more. In chapter eight I have included discussion of what I would do differently if I started the study again. Here I want to mention ways that the study met three of Bishop and Glynn's (1992) cultural requirements for research. The requirements include researcher cross-cultural competence, recognition of the problems and issues which concern the people involved in the research, and the establishment of a relationship with the Maori community which respects and acknowledges the dignity of participants.

The chairperson of one of the kohanga whanau in the study mentioned in a letter that the whanau supported the publication of the results and that the findings would be used for whanau learning and development. Karina, a Maori mother and member of a kohanga whanau, was employed to liaise and coordinate the study from within both of the kohanga reo in the study. Inclusion of Te Kohanga Reo in the study was important because this added the Maori dimension and concept of education. The identification of differences between Te Kohanga Reo and the Pakeha-based centres in the relevance and suitability of research approaches was integral to maintaining continued whanau support of the study. Te Kohanga Reo, therefore, influenced some of the overall findings to take into account its uniqueness in the early childhood sector.

Feminist principles of research are justifiable in the study (Fox-Keller, 1987, Reinhartz, 1992; Weiler, 1988) for the reason that the care and education of young children is an important issue related to women's position in society and participation in the paid work force (New & Day, 1985; May-Cook, 1985). The vast majority of staff working in early childhood centres are women and the situation is not likely to change in the immediate future. For example, in July 1991 of the 895 early childhood teacher trainees only 29 were male. This contrasts with secondary teacher training which had 416 male trainees out of a total of 1009 (Department of Statistics, 1993). Because mothering is not regarded as an occupation and tends to be devalued, people who work with young children are accorded lower social status and remuneration than those who work with older children (May-Cook, 1985).

Traditionally research has been done on subjects rather than for them (Lather, 1988). Concern in this study is not with the production of facts but with understanding people's beliefs, values, expectations and experiences. For too long research has had little immediate relevancy to those working in or using early childhood services. Feminist methodology installs a sense of "humanism" which is absent in other critical traditions such as Marxism and Interpretive Sociology (Westkott, 1979). "Subjects" are not treated as mere objects of knowledge or viewed as "black boxes" but instead they are seen as "participants" whose feelings, meanings, and interpretations are valued data (Takanishi, 1981). Interactive, contextualized methods of research are used in the search for pattern and meaning rather than for prediction and control (Lather, 1988). Thus feminist empirical work takes a multi-paradigmatic form.

Scientific neutrality has been challenged in the feminist and post-modernist literature. It is argued that science making always involves values, interpretations and conscious choices at every stage of the research process (Du Bois, 1983). The researcher cannot maintain an invisible, anonymous voice (Harding, 1987). Lack of total objectivity should be acknowledged but this does not mean objectivity should be abandoned (Fox-Keller, 1987). Jones (1992, p. 28) says that "the debates about the constructedness of accounts invite us to be reflexive, to self-consciously introduce/make visible our own (social constructed) voices in our written work".

Feminist papers describe and reflect on research practices, for example, Oakley (1981) discusses conflicts feminist researchers experience by trying to adhere to the traditional methodological texts on research. Oakley argues that if the goal is to find out about people and their experience then it is important for the interviewer to have a friendly supportive relationship with the interviewee. Her recommendations of alternatives to traditional interviewing practice include: a non-hierarchical relationship, two-way sharing of knowledge and personal experience, and that all questions about the research are answered as fully as required. Where possible in the study I have taken a feminist perspective on research, and one of the key ways I have done this is by adopting a non-hierarchical relationship with those taking part in the research. As a doctoral student it was relatively easy for me to take the role of the "learner" rather than being the "investigator" or "scientist". Being a person who was keen to learn and non-judgemental proved to be important for meeting the challenge of gaining people's trust and friendship. Such a relationship was vital for carrying out this study on quality from a values-based perspective and for ensuring people's continued commitment to participation.

The elements of a qualitative approach - naturalistic inquiry, a holistic view, an inductive approach, an emphasis on descriptive data, and a concern for meaning and process rather than simply with outcomes - offers the opportunity to describe and interpret the quality of educare settings (Bogdan & Biklin, 1982; Porter, 1982). A qualitative approach suggests that the natural setting (ie. typical early childhood centres and not laboratory or purposely selected high quality centres) is the key source of data. The qualitative research approach requires that nothing is trivial, that everything has potential to lead to a greater understanding of the research questions. The written word is important, both in recording data and in disseminating the findings. Quotations and descriptions are common in reports. There is a concern for participant perspectives and making sure that perspectives are captured accurately. For example, in this study participants were given preliminary reports of questionnaire responses and transcripts of meetings, and their feedback was incorporated into further revisions. Data are analysed inductively as the researcher constructs a picture which takes shape as the data are collected and examined. In contrast to the traditional "scientific approach" the researcher does not attempt to search out evidence to prove or disprove prior hypotheses (Bogdan & Biklin, 1982).

Due to the complexity of defining and measuring the quality of educare no one method of study can be adequate on its own. A way around this problem is to use a composite of methods by taking the best features of each method and combining these. However, this kind of solution has been criticised as being less efficient than using separate methods (Brewer & Hunter, 1989). The use of two or more

methods to gather multiple sets of data and from a variety of sources is called the "multimethod approach".

The multimethod approach supports the gathering of both quantitative and qualitative data, and both forms of data are of value for exploring the research questions of the study. It provides justification for using a mixture of traditional and non-traditional methods and not relying on only one type of method to the loss of the benefits which other methods might hold. The diversity of data generated makes it possible for comparisons between data sets to be made, and for areas of divergence and convergence in the data to be noted. Reinharz (1992) says that the use of multiple methods shows a commitment to thoroughness, a desire to be open-ended and to link behaviours and values with social frameworks which is consistent with feminist beliefs about research.

The continuing nature of inquiry into the quality of educare most often involves methodological replication, applying the same types of methods in different settings and with different samples. This seems to be a good reason for making creative variations to established methods (Brewer & Hunter, 1989). The Delphi method (Weaver, 1972) was adapted for use as a data collection tool. The Delphi method typically involves participants in a process of reflection and feedback through a series of three to four anonymous questionnaires. It is usually used to generate consensus on a scientific or social problem for which "hard" data is lacking or is insufficient. Weaver (1972) proposes that participants should be allowed to meet, share opinions and knowledge, and openly confront each other over issues and values as part of the Delphi process. He further suggests that noted convergence or divergence in stated opinions which occurs after feedback ought to be taken as an indication of the strength of the argument or belief. In the study, a series of three meetings were organised at which representatives from the centres shared and explained their perspectives and practices. The format for the meetings was open discussion, discussion within sub-groups, and then feedback and discussion among the whole group. In addition, feedback of discussion from each of the first two meetings was presented at the beginning of the meetings.

In summary, the development of this study's methodology was based on wide consultation, the researcher's experience and from suggestions offered in methodological texts and in the writings of feminist researchers. An ecological approach was seen to be most useful for exploring the topic of quality educare from participants' perspectives. A multimethod approach was believed to be vital for attempting to address the research questions of the study. Some principles of the Delphi method were considered to be useful for generating data on people's beliefs and group values.

Sample

Eleven centres were sampled, comprising of four kindergartens, three childcare centres, two playcentres and two kohanga reo. A small number of centres were selected so that all the parents and staff at these centres could be sampled. Two further reasons for deciding to have a small centre

sample were to allow for the charter development process in individual centres to be studied in depth and for a more qualitative approach to the study of values and practices of quality to be taken.

The eleven centres were drawn from the four major groups of early childhood services and the number of centres selected from within each group reflected the national size of the groups (ie. kindergarten is the largest service, followed by childcare, playcentre and kohanga). Each of the eleven centres were selected because they differed from other centres in the sample in respect of various characteristics such as staffing, ownership and management, location and socio-economic area. In selecting the childcare centres an additional consideration was an interest in including those that varied in quality in the judgement of local Early Childhood Development Unit staff and a Child Care Training Supervisor. Brewer and Hunter (1989) call this kind of sampling "purposive sampling", where the units of study are theoretically defined as important and not statistically defined to be representative.

Issues of convenience and finance influenced my decision not to sample centres from outside the Otago region. I was not able therefore, to sample large chains of commercial childcare centres, playcentres that operated on group supervision rather than with a single supervisor, and kohanga reo with deeper language immersion programmes situated in high density Maori population areas. Census information for the 1990 year shows that Otago has a very small Maori population of approximately four percent in contrast to Gisborne which has a Maori population as high as forty percent. Another interesting statistic is that Otago has the lowest proportion of children but leads the nation in its high number of fifteen to twenty-four year olds. Generalisation of the findings and ability to replicate the study and produce similar results was not a major concern in carrying out the study. The main aim was to attempt a values-based perspective on quality and therefore an interesting variety of centres were sampled rather than a large nationally representative group of centres.

Decisions on which particular centres to approach for participation in the study were made in consultation with the regional branches of Early Childhood Development Unit and the Ministry of Education, a New Zealand Child Care Association Training Supervisor and the Te Kohanga Reo District Trust. I initially sent a pamphlet and covering letter to ten kindergartens, playcentres, and childcare centres and followed this with a phone call to arrange a visit to talk about the research project. Where possible I spoke at parent and committee meetings about the purpose and methodology of the project. The owner/director of a new private childcare centre with a roll of less than eight children decided to pull out of the study one-third of the way through because she was busy building up her centre and could no longer spare the time to be involved. The district Te Kohanga Reo Trust was approached in the first instance to ask about the inclusion of kohanga reo in the study. Nga kohanga whanau were approached by the Trust for their responses and the outcome was positive. The Trust suggested the names of four kohanga which could be approached.

Copies of a panui (information pamphlet introducing the study, myself and Karina who was the Maori co-researcher) were posted to the secretaries of four kohanga reo. Karina phoned each secretary

and kaiako (teacher) a week later to check that they had received a panui and to ask for their initial reactions about the proposed study. One kohanga reo had gone into recess and could not be involved. The secretaries of three kohanga reo indicated that the panui would be put on the agenda for discussion at their next committee meeting. Every few weeks Karina phoned the secretaries or kaiako to check on progress. One of the three kohanga decided not to be involved because their kaiako was leaving and the committee had some pressing problems to deal with. Some months later (due to postponements of monthly committee meetings because members were at a tangi or time ran out at meetings to discuss involvement in the study) the secretaries of the remaining two kohanga indicated to Karina that they would be involved. Both kohanga met the selection criterion because they were very different in their characteristics. Delays in starting data collection at one kohanga occurred as the kaiako had resigned and a new kaiako was not available for three weeks. We were subsequently advised to wait until the new kaiako had settled in before we made further contact.

Table 1 outlines the defining features of the centres in the study. The kindergartens were located in contrasting socio-economic areas of town. One kindergarten had a group of children with special needs and a specialist teacher in addition to its main roll. Two kindergartens had forty children per session and two teachers, another had thirty children and two teachers, and the fourth had forty children and three teachers. One kindergarten had a full-day care facility attached, but this was closed upon the recommendation of the Ministry of Education before data collection started. One childcare centre was community operated, one was owned by a husband and wife team, and the third had recently been opened to provide for the childcare needs of parents in a public institution. The playcentres differed in the number of staff employed, the training backgrounds of staff, and location. The kohanga were located in different areas, one inner city and the other semi-rural. One kohanga was supported by a public institution to provide a service for users and employees. The second kohanga operated from a marae for members of the marae and local community.

The staff and parent samples were drawn from the eleven centres. Thirty-two out of thirty-seven staff working at the centres responded (86.5%) to a survey. Over half (223 out of 381) of the parents responded (57%). The parent response rate at the playcentres was very high ($n = 26$, 96.3%), modest at the childcare centres ($n = 55$, 60.4%) and kindergartens ($n = 130$, 56.3%), and low at the kohanga ($n = 12$, 28.6%). Staff at the kindergartens expressed surprise that their parent response rate was as high as it was. Kindergarten staff and committees were starting to encounter difficulty in obtaining parent involvement in charter development (see chapter six). The playcentre supervisors expressed confidence in a high response rate from their parents before they were surveyed. Childcare staff believed that the response rate from their parents was about what could be expected. The response rate at the kohanga was disappointingly low from a research perspective. This may have been because there were still problems in the methodology and parents' perception of the research (see further discussion of this under the heading of "questionnaires" later in the chapter).

Tables 2 and 3 present the respondents' demographic and background details. Of the participating staff eighteen (56.2%) were from childcare centres and eight (25%) were from kindergartens. In

contrast, a higher percentage of the parent sample ($n = 130, 58.3\%$) were kindergarten parents rather than childcare parents ($n = 55, 24.7\%$). These figures show that childcare centres had higher numbers of staff, than kindergartens, to smaller groups of children.

TABLE 1.Characteristics of the Centres

	Premises	Location	Staff Employed	Staff Training	Maximum Roll	Ownership	Hours	Other Features
CENTRE A (playcentre)	Old school building shared with another group	Near centre of town on a busy one-way street	2 work alternate days & rostered parents	Both playcentre trained	17	Otago Playcentre Association	3 morning sessions	Premises also used by another early childhood group. Mixed age-group setting (all over 2.6 years)
CENTRE B (playcentre)	New modified school classroom	Semi-rural service town	1 with rostered parents	Kindergarten trained	20	Otago Playcentre Association	3 morning sessions	The only early childhood centre in the district. Mixed age-group setting (all over 2.6 years)
CENTRE C (kindergarten)	Purpose-built to a standard design	Within city, on main street	2 full-time	Kindergarten trained	40	Dunedin Kindergarten Association	5 mornings older children, 3 afternoons younger children	All children over 3.6 years
CENTRE D (kindergarten)	Purpose-built to a standard design	City suburb near the beach	2 full-time	Kindergarten trained	40	Dunedin Kindergarten Association	5 mornings older children, 3 afternoons younger children	Unusually large premises. Problems in filling roll (daily maximum 30 children). All children over 3.4 years
CENTRE E (kindergarten)	Recently built kindergarten	On hilly outskirts of the city	2 full-time	Kindergarten trained	30	Dunedin Kindergarten Association	5 mornings older children, 3 afternoons younger children	A "young" teaching team, both under 30 years. All children over 3.6 years
CENTRE F (kindergarten)	One of the oldest kindergarten buildings in New Zealand	In an established city suburb	3 full-time	Kindergarten trained	40	Dunedin Kindergarten Association	5 mornings older children, 3 afternoons younger children	Special needs group operates with an extra teacher three mornings. Unusually large premises. All children over 3.6 years.
CENTRE G (childcare centre)	Renovated house	Quiet street above the central shopping area	4 full-time and 3 part-time	Mixture of qualifications 2 staff not qualified	40	Community Association	Early morning to Early evening (five days)	Infants to 5 year olds

TABLE 1. Continued ...

	Premises	Location	Staff Employed	Staff Training	Maximum Roll	Ownership	Hours	Other Features
CENTRE H (childcare centre)	Renovated house	Main street minutes from central city area	3 full-time and 3 part-time	Mixture of qualifications. 2 staff not qualified	24	Owned by husband & wife as a business	Early morning to Early evening (five days)	Infants to 5 year olds. A young staff, under 30 years of age. No parent involvement required - focus is on providing childcare for working parents
CENTRE I (childcare centre)	Modified rooms, ground floor of a public building	Within central city area, on a busy one-way street	5 full-time and 5 part-time	Mixture of qualifications. 3 staff not qualified	31	Public Organisation	Early morning to Early evening (five days)	Infants to 5 year olds. Age groups separated into three classrooms. Children accepted from staff employed by the institution and from parents referred by Social Welfare
CENTRE J (kohanga)	Renovated house	Central city area	2 kaiako and 2 assistants	Staff not qualified	25	Public Institution	Five days 9 am to 3 pm	Infants to 5 year olds. Younger and older children divided into two class groups. Accept children from users and staff of the institution
CENTRE K (kohanga)	Hall on a Marae	Quiet semi-rural location	1 part-time kaiako and a trainee assistant	Staff not qualified	21	Members of the Marae	Three days 9 am to 3 pm	Infants to 5 year olds. The kaiawhina (assistant) takes children to and from centre in a minibus. High rate of unemployment in the area

Staff

Table 2 details some of the defining characteristics of the staff sample. These were found to be similar to the findings of surveys of early childhood staff in New Zealand and other western countries (Allan, 1989; Whitebook, Howes & Phillips, 1990). The staff were mainly women ($n = 31$, 96.8%) who were also parents ($n = 26$, 81.3%) and aged between 31 and 45 years ($n = 21$, 65.6%). The majority of staff were Pakeha ($n = 27$, 84.4%), only a few were Maori ($n = 3$) or of a foreign nationality ($n = 2$, 6.3%). Only seven of the staff (22%) had worked at their current centre for three or more years and ten staff members for one year or less (31%). One quarter of the staff, all of whom worked in childcare and kohanga, did not hold a recognised early childhood qualification. Of those who were qualified, their main form of training was a full-time College of Education course of either one or two years in length ($n = 15$, 46.9% of all staff). A small number of staff had trained on-the-job as playcentre supervisors or childcare workers ($n = 6$, 18.8% of all staff), and two had completed their training overseas (6.3%). One staff member in a childcare centre held a primary school teaching qualification.

Staff education and qualifications reflected the training and employment requirements of their particular early childhood group. The majority of kindergarten and playcentre staff had successfully completed sixth or seventh form level education ($n = 7$, 87.5% and $n = 3$, 75% respectively). Half of the childcare staff sample had completed sixth or seventh form schooling ($N = 9$, 50%). One playcentre, two kohanga and four childcare staff members did not hold a fifth form school certificate. Neither of the two kohanga reo staff had high school qualifications or a formal qualification for working in educare. All kindergarten staff held at least a two year College training diploma. The playcentre staff were playcentre trained with the exception of one supervisor who was kindergarten trained. Amongst the childcare staff a number of different qualifications were held, including overseas early childhood qualifications, primary teachers' certificate, kindergarten teachers' diploma, playcentre supervisors' certificate, New Zealand Childcare Association certificate, and a certificate in early education offered at Colleges of Education previous to the introduction of three year integrated kindergarten and childcare training.

TABLE 2.

Characteristics of the Staff Sample

	Kindergarten		Childcare		Playcentre		Kohanga		Total	
	n	%	n	%	n	%	n	%	n	%
TOTAL STAFF	8,	25.0	18,	56.2	4,	12.5	2,	6.3	32,	100
SEX										
Male	none		1,	5.6	none		none		1,	3
Female	8,	100.0	17,	94.4	4,	100.0	2,	100.0	31,	97
A PARENT?										
Yes (have children)	6,	75.0	14,	77.8	4,	100.0	2,	100.0	26,	81
No	2,	25.0	4,	22.2	none		none		6,	19
AGE										
Under 20 years	none		1,	5.6	none		none		1,	3
20 - 25 years	none		3,	16.7	none		none		3,	9
26 - 30 years	1,	12.5	2,	11.1	none		none		3,	9
31 - 35 years	2,	25.0	2,	11.1	3,	75.0	none		7,	22
36 - 40 years	3,	37.5	3,	16.7	none		1,	50.0	7,	22
41 - 45 years	1,	12.5	6,	33.3	none		none		7,	22
Over 45 years	1,	12.5	1,	5.6	1,	25.0	1,	50.0	4,	13
ETHNIC GROUP										
Pakeha - NZ'er	8,	100.0	15,	83.3	4,	100.0	none		27,	84
Maori	none		1,	5.6	none		2,	100.0	3,	9
Other	none		2,	11.1	none		none		2,	6
HIGHEST SCHOOL LEAVING QUALIFICATION										
None	none		4,	22.2	1,	25.0	2,	100.0	7,	22
School Certificate	1,	12.5	5,	27.8	none		none		6,	19
6th or 7th Form qual.	7,	87.5	9,	50.0	3,	75.0	none		19,	59
HIGHEST EARLY CHILDHOOD QUALIFICATION										
None	none		6,	33.3	none		2,	100.0	8,	25
Overseas qual.	none		2,	11.1	none		none		2,	6
Primary Teachers'	none		1,	5.6	none		none		1,	3
Playcentre Certificate	none		1,	5.6	3,	75.0	none		4,	13
Certificate in ECE	none		2,	11.1	none		none		2,	6
N.Z.C.A. Certificate	none		2,	11.1	none		none		2,	6
N.Z.F.K.U. Diploma	8,	100.0	4,	22.2	1,	25.0	none		13,	41
NUMBER OF MONTHS AT PRESENT CENTRE										
Under 6 months	1,	12.5	1,	5.6	1,	25.0	none		3,	9
6 to 12 months	1,	12.5	4,	22.2	1,	25.0	1,	50.0	7,	22
13 to 24 months	1,	12.5	6,	33.3	2,	50.0	none		9,	28
25 to 36 months	2,	25.0	4,	22.2	none		none		6,	19
over 36 months	3,	37.5	3,	16.7	none		1,	50.0	7,	22

Many staff became involved in the early childhood field because they loved or enjoyed the nature of the work, especially relationships with children, parents and other staff (n = 27, 84.4%). A number of staff viewed their work as socially, culturally, or politically important (n = 15, 46.9%). Some staff wanted the challenges that the work provided for promoting their own personal/professional development (n = 10, 31.3%). Only two staff wrote that earnings were a factor in their decision to take up early childhood work. This reveals a low priority by staff on earnings when considering a career in the early childhood field. Kindergarten head teachers and teachers were the most highly paid at between \$10.00 to \$17.50 an hour, playcentre supervisors the lowest paid at \$6.67 an hour.

Childcare centre staff wages ranged from \$7.00 to \$10.50 an hour before tax. Data on the wages of staff in kohanga was not obtained.

Parents and Children

The majority of parents first heard about their particular centre through "word-of-mouth", such as being told about it by another parent who used the centre or from a friend (n = 115, 51.6%). Some parents knew about their centre from living nearby or because they had travelled past it (n = 47, 21.1%). Other parents were referred, for example by a Plunket nurse (n = 26, 11.7%). Some had seen or heard advertisements for their centre (n = 15, 6.7%) or someone in their family such as a sister or their mother had suggested that they use the centre (n = 11, 4.9%).

Table 3 provides a summary of data on the characteristics of the parents who responded to a survey and their children. Mainly mothers responded (n = 209, 93.7%). Most children had a two-parent family (n = 187, 83.9%). The majority of children were Pakeha (n = 170, 76.2%), only a small number were Maori (n = 13, 5.8%), or from other ethnic groups (n = 9, 4%). One percent of Maori children (n = 3) were at centres other than kohanga reo, but please note that some parents did not provide information on their child's ethnicity (n = 31, 13.9%).

At least one centre in each of the four early childhood groups had special needs children but the proportion of children with reported special needs across the centres was small (n = 17, 7.6%). The range of special needs reported by parents included speech difficulties, hearing problems, brain damage, food allergies and hyperactivity.

National statistics for the 1990 year indicate that the average household income was \$39,951. In this study forty percent of families had an income of less than \$30,000 a year. Forty-eight percent of families had an income of between \$30,000 and \$50,000 and thirteen percent had an income in excess of \$50,000. The majority of parent respondents held at least a fifth form school certificate (n = 177, 79.4%) and just under half held a post-school qualification (n = 108, 48.4%).

The data suggest that childcare centre parents on average had higher levels of education and higher incomes than parents at the other types of centres. Over three quarters of the childcare parents held a higher school qualification (n = 43, 78.2%) and a number also held a university degree or post-graduate diploma (n = 21, 38.2%). One quarter of the childcare centre families (n = 14, 25.5%) had an income in excess of \$50,000 while the next highest group was kindergarten families (n = 9, 6.9%).

Centres were mainly used by parents on a part-time basis for up to five mornings or afternoons a week (n = 182, 81.6%); this finding reflects the disproportionate number of kindergarten and playcentre parents in the study sample whose centres provided only half day programmes. Kindergarten parents, on average, had been using their centre for a shorter period of time in comparison to parents at the other types of centres. Seventeen percent of kindergarten children (n = 22) had been enrolled for more than one year in comparison with fifty-eight percent of kohanga

children (n = 7), forty-nine percent of childcare children (n= 26), and forty-two percent of playcentre children (n = 11).

The hours of kindergarten and playcentre operation may restrict parents (ie. mostly mothers) ability to earn. Most childcare and kohanga parents engaged in either paid employment or tertiary study (n = 50, 90.9%, and n = 10, 83.3%). In contrast, the majority of parents who took their child to a kindergarten engaged in non-paid activities such as housework and care of younger siblings, or in leisure activities such as jazzercise (n = 107, 82.3%). Most playcentre parents usually stayed with their child at playcentre (n = 20, 76.9%).

Services which offered the all-day care required by parents, and particularly mothers, to participate in paid employment were the most expensive (Easting, 1992). Kindergarten parents paid between \$3.00 to \$5.00 a week, playcentre parents between \$3.00 to \$4.00 a week, and childcare parents between \$114.00 and \$130.00 a week for full-time care or between \$60.00 and \$75.00 for five mornings. Data on parent fees at kohanga were not collected.

The majority of respondents (n = 161, 72.2%) relied only on their centre and used no other form of childcare assistance. Families who used an additional form of childcare mainly did so for reasons of giving their child additional education opportunities (n = 13, 5.8%) or because their centre's hours were not sufficient (n = 47, 21%). Some selected examples are as follows. One kindergarten parent who was employed full-time took her child to a childcare centre during the kindergarten holiday periods. Another kindergarten parent took her child to a Montessori centre for a morning a week because she said it provided a more structured approach to education. A kohanga Maori mother took her child to a Tongan language nest because she wanted her child to learn her father's language. A playcentre parent had a private child-minder come into her home on a regular basis because the playcentre's hours were not long enough and she wanted more breaks from her child: "to preserve my sanity".

TABLE 3.

Characteristics of the Parent Respondents and their Children

	Kindergarten		Childcare		Playcentre		Kohanga		Total	
	n	%	n	%	n	%	n	%	n	%
RESPONDENTS	130,	58.3	55,	24.7	26,	11.7	12,	5.4	223,	100
FAMILY STRUCTURE										
Single parent	21,	16.2	8,	14.5	2,	7.7	5,	41.7	36,	16
Dual parent	106,	81.5	45,	81.8	23,	88.5	6,	50.0	180,	81
plus relations	2,	1.5	1,	1.8	1,	3.8	1,	8.3	5,	2
or live-in nanny	1,	.8	1,	1.8	none		none		2,	0.5
CHILD'S ETHNIC GROUP										
Pakeha - NZ'er	109,	83.8	43,	78.2	17,	65.4	1,	8.3	170,	76
Maori	2,	1.5	1,	1.8	none		10,	83.3	13,	6
Pacific Islander	2,	1.5	1,	1.8	1,	3.8	1,	8.3	5,	2
Other	1,	.8	1,	1.8	2,	7.7	none		4,	2
Did not state	16,	12.3	9,	16.4	6,	23.1	none		31,	14
WHETHER CHILD HAS SPECIAL NEEDS										
Yes	9,	6.9	4,	7.4	2,	7.7	2,	16.7	17,	8
GROSS FAMILY INCOME 1989/90 YEAR										
under \$10,000	5,	3.8	1,	1.8	none		none		6,	3
\$10,000 - \$30,000	49,	37.7	13,	23.6	13,	50.0	8,	66.7	83,	37
\$31,000 - \$50,000	49,	37.7	23,	41.8	6,	23.1	none		78,	35
over \$50,000	9,	6.9	14,	25.5	2,	7.7	1,	8.3	26,	12
Did not state	18,	13.8	4,	7.3	5,	19.2	3,	25.0	30,	13
HIGHEST SCHOOL QUALIFICATION										
No school qualification	29,	22.3	4,	7.3	5,	19.2	4,	33.3	42,	19
School Certificate	32,	24.6	7,	12.7	6,	23.1	2,	16.7	47,	21
6th or 7th Form qual.	67,	51.5	43,	78.2	15,	57.7	5,	41.7	130,	58
Did not state	2,	1.5	1,	1.8	none		1,	8.3	4,	2
HIGHEST TERTIARY QUALIFICATION										
None	73,	56.2	12,	21.8	14,	53.8	9,	75.0	108,	48
Professional	25,	19.2	16,	21.1	4,	15.4	2,	16.7	47,	21
Trade eg. hairdressing	18,	13.8	5,	9.1	2,	7.7	1,	8.3	26,	12
University degree	8,	6.2	9,	16.4	3,	11.5	none		20,	9
Post-graduate degree	4,	3.1	12,	21.8	3,	11.5	none		19,	9
Did not state	2,	1.5	1,	1.8	none		none		3,	1

Experts

The decision to include "experts" in the field of early education and care (who may be involved in administration, policy advising, staff development, centre support work, staff training, or research) was made to extend the use of Bronfenbrenner's (1979) ecological framework in the study. I thought it would be interesting to sample the views of experts on the importance of the indicators of quality educare, as experts may have an indirect influence on staff and parent beliefs and the nature of the early childhood programme and setting.

"Experts" were identified using sources such as the New Zealand Association for Research in Education membership list and asking local Ministry of Education and Early Childhood Development

Unit people for the names of possible contacts. Thirty-five names of people with "expert" status were identified and sent a questionnaire to respond to. Two experts did not reply. The sample was surprisingly greater than expected because forty-seven experts responded! It seemed that some experts passed copies of their survey form to others who they knew. This was a most positive result and a show of support for the study.

The experts represented a variety of organisations and roles as shown in Table 4.

TABLE 4.

Where the Experts Worked

University or College of Education lecturer	n = 14, 29.8%
Early Childhood Development Unit staff	n = 10, 21.3%
Early childhood group regional/national officer or staff trainer	n = 6, 12.8%
Early childhood researcher	n = 4, 8.5%
Ministry of Education staff	n = 4, 8.5%
Education Review Office staff	n = 3, 6.4%
Other (eg Government education policy adviser, family support coordinator)	n = 6, 12.7%

Most experts were Pakeha (n = 39, 83%) female (n = 45, 96%) and had their own children (n = 41, 87.2%). Only three experts were Maori (6.4%). Their length of involvement in the early childhood field ranged from two years five months to forty-five years (mean 18 years).

Some experts held no formal early childhood qualification (n = 10, 21.3%). The experts who were qualified held a kindergarten (n = 16, 34%), playcentre (n = 14, 29.8%), childcare (n = 2, 4.3%), primary school (n = 4, 8.5%), or an overseas qualification (n = 1, 2.1%).

The majority of experts had contact or association with all four early childhood groups in this study (n = 21, 44.7%). Some did not have contact with Te Kohanga Reo but had contact with kindergartens, childcare centres, and playcentres (n = 10, 21.3%). A small number of experts were involved or associated with only one group: kindergarten (n = 4, 8.5%), playcentre (n = 4, 8.5%), or childcare (n = 1, 2.1%).

Methods of Data Collection and Analysis

Fieldwork involved observing events (meetings for charter development and centre social occasions) and people (staff, parents and children) in their natural setting. It involved close contact with people, requiring that time be put into establishing and maintaining rapport and that the "subjects" of study were regarded as partners in the research (ie. participants and informants). It also involved study over a period of time to develop inside knowledge of the groups and people's experiences, values and beliefs.

Survey research involved interviewing people (as part of observing and examining centre performance on quality criteria and for further insights into the charter development process in centres). It also involved distributing questionnaires to parents, staff and outside experts to ask people for their views.

Non-reactive research involved taking opportunities for unobtrusive observation whenever possible (eg. attending a Kindergarten Association A.G.M, and offering to take the minutes of a parents' meeting). Access to naturally occurring data such as reading notices on centre noticeboards and reviewing drafts of centre charters were also non-reactive research strategies.

Data Collection in Kohanga Reo

Centres J and K (the two kohanga reo) were involved only in two forms of data collection, the survey method and individual discussions with participants within settings and with members of the Te Kohanga Reo Trust. I met with representatives of the District Kohanga Reo Trust on three occasions and recorded our discussions about the aspects of quality that were valued in a kohanga reo setting and what practices and beliefs made the service distinctive from other early childhood groups. It was not possible to implement additional methods of data collection because the Te Kohanga Reo did not come into the study until about half-way into the data collection process for the other groups, and I was under time-constraints to complete the study and report the findings (under contract to the Ministry of Education).

Data collection on the charter development process was not possible at the time of study because Te Kohanga Reo were not required by the Ministry to develop individual charters. Karina (Maori co-researcher) participated in each of the kohanga settings for a minimum of three days to involve parents and staff in a survey. During this time she also trialed an observation instrument for examining centre quality which we later discussed and identified the cultural inappropriateness of the checklist method and some of the observation items. For example, the checklist favoured a free-play programme where children are free to choose from a variety of activities, whereas in both the kohanga the favoured approach was that all children engaged in the same activity supervised and directed by their kaiako (teacher). Unfortunately there was not time to develop appropriate strategies of observation and assessment of quality through liaison with members of the kohanga whanau and consultation with other Maori people and organisations. To do this, I believe, would have been a whole research project in itself.

In recognition of cultural differences between Te Kohanga Reo and the other early childhood groups in this study changes to the questionnaire and approaches for data collection were made. Full details about the structure and content of the questionnaire are provided below. The questionnaires for Te Kohanga Reo parents and staff were basically the same in content and structure as for the other groups. Some key words in the questionnaires were translated into Maori, for example "children" became "tamariki", and some questions were not included or had the wording slightly altered to be more culturally appropriate. This was upon the advice of Karina, who was employed to participate in all phases of the research on the kohanga, from questionnaire preparation to development of a paper to provide feedback of results to the kohanga.

At Centre J a whanau meeting was arranged at which it was agreed that I would discuss the study further, distribute the questionnaires, and be on hand to answer queries which parents might have as they individually responded to the survey questions. Four parents came to this meeting which was a disappointing turnout for Karina and I and the secretary of the whanau committee who had arranged it. Informal feedback suggested that two parents felt uneasy about me being a white Pakeha researcher, and that they felt I was there to keep an eye on them. Karina attempted to set up a time for another whanau meeting with the secretary but it proved difficult to arrange a better time that would capture a greater number of parents. After a few weeks of discussions about arranging a suitable time, Karina suggested that she could spend some whole days in the kohanga to catch parents as they arrived and to free any parents who were helping at the kohanga so that they could complete a questionnaire. At the end of a week of being at Centre J Karina felt tired of asking and believed that her requests were starting to sound like nagging. At Centre J Karina gave koha (gift of appreciation) of large children's story books and her time in assisting in the programme.

At Centre K a parent volunteered at a whanau committee meeting to take responsibility for distributing the questionnaires. The committee did not believe it was necessary for Karina to travel out to the Kohanga each day (which was some distance away) and to spend time in the programme as she had done at Centre J. Two weeks later Karina phoned the kaiako and was informed that the questionnaires had yet to be distributed in the kohanga. Karina waited another few weeks and then negotiated to spend time at the kohanga to personally approach parents and collect completed questionnaires. As a result Karina became involved in providing advice and guidance to the whanau who were by then required by the Ministry of Education to develop a charter (November 1990). She also gave practical assistance in helping in the programme over three days.

The personal approach to handing out and following-up questionnaires helped to get a slightly higher response rate. We became aware of comprehension problems in some of the terminology used in the questionnaire. For example, one parent turned to a kaiako and asked whether they had a "programme" and what a programme was. The personal approach partially helped to overcome (what was later) an apparent mistake of using a written questionnaire, because we were on hand to provide clarifications and to ask the questions using an oral approach.

Kindergarten, Childcare and Playcentre Data Collection

The main methods of data collection for these three early childhood groups were questionnaires, participant observation of centre quality and charter development, and meetings of centre representatives. Staff and centre managers/committees were particularly motivated to participate in the survey and research-organised meetings because the feedback provided by these two methods was perceived to be valuable in developing their charters. For example, demographic information about families at one kindergarten from the research survey was used by its committee in writing the charter description of the kindergarten's community. The chartering process was then unfamiliar and not well or consistently explained by the Ministry of Education or the Early Childhood Development Unit. People seemed to appreciate the organised opportunities of meetings with others from different centres for support and to share stories and insights.

Questionnaires

Questionnaires were distributed to all parents and staff at the centres (see Appendix A). The questionnaires were individualised for each early childhood group. For example, the kindergarten questionnaires used the word "kindergarten" for centre and "teachers" for staff, while the playcentre questionnaires had the words "playcentre" for centre and "supervisors" for staff.

The parent and staff questionnaires had some questions in common, these were: how they defined a good-quality centre; what they liked most and least about their centre; the importance of different goals of educare are; the importance of different quality criteria and their centre's performance on quality criteria. In addition, parents and staff were asked for some background information and demographic details.

A four-point scale for rating the importance of various possible goals for educare and criteria of good-quality was used (ranging from "4" very important to "1" not important). The quality criteria represented the core elements or principles of good-quality defined in the research literature and used in assessment instruments (namely, the NAEYC Centre Accreditation guidelines and the Early Childhood Environment Rating Scale) as well as those which have social-cultural importance (as discussed in the Meade Report, 1988) and those which people may not agree on (for example, home-visiting) but are practices within some New Zealand early childhood centres. A three-point rating scale (of "3" met, "2" partially met and "1" not met) was used for parents and staff to indicate how well their individual centre met each of the quality criteria (ie. performance ratings). A three-point scale rather than a four-point scale was used because it seemed simpler and quicker for people to use in judging centre performance, because they only needed to decide if a particular criterion was met, not met or partially met instead of to what degree it was partially met.

The staff members in charge at the kindergartens, playcentres and childcare centres were given sufficient questionnaires for their parents and staff. An envelope was attached to each survey form for respondents to return it in to ensure the confidentiality of their individual responses. The parent response rate was initially very low at two of the three childcare centres (Centres H & I). At Centre

If the head staff member had only given questionnaire forms to parents who she felt would give positive responses about the centre. At Centre I parents were asked by the head staff member if they wanted to complete a questionnaire but because parents had recently participated in their own centre survey many declined. I pointed out to head staff members that it would be disappointing if the viewpoint of childcare parents was under-represented because the response rate from the kindergartens and playcentres was much higher. Both head staff members allowed me to have the names and addresses of parents whose children were enrolled at their centres and to individually post questionnaires to their homes, with a stamped addressed envelope for their reply. This second approach proved to be successful as approximately three times the number of completed questionnaires were received.

Meetings of Centre Representatives and Individual Discussions

Three evening meetings of management and staff representatives, including parent committee members, were held at a seminar room at the University between seven and nine-thirty in the evening on Wednesdays. The meetings were scheduled to coincide with the different stages centres would be at in their charter development process. The first was in early March when centres were beginning to consult and develop their charters. The second meeting was in May which was close to the time when centres had been instructed by the Ministry to have their charters completed and handed in for negotiation to take place before 1 July. The third and last meeting was in November by which time negotiation should have taken place and centres should have been chartered and working towards higher standards of quality for at least three months.

The meetings were tape-recorded. A research assistant (Martine) made a written transcript of the whole group discussions as these were more difficult for the tape-recorder to pick up because of the number of people in the room (range 20 to 24) as compared to the recording of small group discussions. The agenda at each meeting was kept fairly open to enable participants to raise issues that were of concern and interest to themselves. After each meeting a written transcript of tape-recorded discussions of the whole group and sub-groups (according to type of centre) was posted to the centres for representatives to read, correct or add to as necessary and either return for me to note the corrections or to use as a memory refresher at the next research meeting. This follows a participatory research model where the information is shared with the informants and their feedback provides further data and adds to the validity of the findings (Lather, 1988).

At the first meeting there was discussion on what people thought and felt about the Ministry's new requirements and what defined the quality of each early childhood group. At the second meeting the main points of discussion from the first meeting were revised. Representatives from each early childhood group further discussed what defined the quality of their centres and then shared this information with the whole group. This was followed by discussion about charter development, consultation processes and experiences in individual centres. During the second half of the meeting Pat Irvine from the Ministry of Education was invited to speak about charters and was available to answer representatives' questions.

At the third meeting the charter development process and events were reflected on and discussed. A summary of the minutes and discussions at the previous two meetings and data of the charter development process in individual centres (eg. participant observation at parent consultation meetings and review of charter drafts) was given to representatives to read through and discuss. I mentioned key points and themes to check on the accuracy of the conclusions that I had drawn from the evidence. Representatives indicated corrections and provided further information and insights to add to the data.

The manager of Centre H did not attend any of the meetings although the director of the centre did. Because the manager was likely to have a different perspective than her director I visited the manager and talked with her for about an hour on her views and what she was doing in respect of the new Ministry requirements.

Participant Observation as Part of Charter Development

Committee, parent and staff meetings as well as functions such as family-teas were attended in order to observe and understand the process of charter development in each centre. On three occasions this included meetings in parents' homes. The number and type of meetings or gatherings for consultation I attended varied across the centres depending upon their individual processes for charter development. It was important to never turn down an invitation to attend a meeting of parents or staff. On five occasions meetings/gatherings were happening at two centres at the same time and so Martine observed at one meeting while I observed another.

Most of the time a "fly-on-the-wall" approach to listening, watching and recording was adopted at the meetings. Martine and I participated usually only when asked directly for information or assistance and if this was useful and ethically possible. For example at a childcare centre charter meeting a discussion on the concept of "equity" had started to dominate the meeting and in an effort to bring in an independent (and perhaps an academic viewpoint) the chairperson asked me for help in defining equity in the context of early education. At a kindergarten's public meeting I offered to take the minutes at a planned parents' meeting when no one else put their name forward to volunteer. I knew that this would ensure access to the meeting as well as providing me with an excellent opportunity to be unobtrusive in writing notes of the discussion and decisions.

Observation/Interview Checklist

An observation instrument, I called a "Quality Review Checklist"(QRC), was developed to examine centre practices of quality on the same quality criteria that were listed in parent/staff/expert questionnaires (see Appendix B). The QRC was trialed at a University early childhood centre by the head staff member (Yvonne), myself and a research assistant (Trisch) so that improvements could be made before it was implemented. The design of the QRC was based on the checklist model of the National Association for the Education of Young Children's centre accreditation project. The criteria listed in the QRC were accompanied by suggestions or pointers on aspects to observe or check-up on before coming to a conclusion about how well a certain criterion was being met. A four-point

scale was used for rating centre performance (4" fully met, "3" mostly met, and "2" and "1" for criteria partially met or not met). Attached to the rating instrument was a list of possible questions to ask parents and staff for specific information about aspects of children's experience and the programme which may not be able to be observed or assessed by someone who is not a child's caregiver/parent or a staff member. Space was left after each listed criteria to record observations and explanations for the rating that is given.

Trisch and I spent a day in each of the kindergartens, childcare centres and playcentres as participant-observers. For the majority of the time we joined in as appropriate, being sensitive to the daily rhythms, and social rules and expectations for adult and child behaviour in each centre. For example, we joined children in their play, helped staff with the dishes, and fed and changed infants when we were welcome to do this. We informally interviewed five parents or primary caregivers and the head staff member (including more staff when possible) to collect additional information to support our observations and to help us to make conclusions about the degree to which specific criteria were being met. Parent and caregiver (eg. grandparent) interviews usually took between five and ten minutes. We interviewed head staff members over the lunch-hour or at a time that best fitted in with their schedules. In a few cases we returned the next day to complete an interview where this was not possible in their short lunch-hour (ie. interviews took between one to two hours).

Head staff members were given a copy of the QRC instrument and asked if they could rate their own centre. The purpose of this was to learn about the centre's perspective on quality to help in understanding what was and was not achievable for each centre. The observation rating data were not altered as result of feedback from head staff members. I later met with head staff members to compare and discuss their ratings with those which Trisch and I agreed on and had compiled into profiles of quality for each centre. Eight of the nine head staff members participated in this phase. The head staff member at Centre H said that she would do a self-evaluation, but after several follow-up contacts she had not done so.

Experts

The experts were asked to rate the importance of the same criteria of quality as in the parent and staff questionnaires. They were also asked for some background information about themselves (see Appendix A(c)). Questionnaires were posted to the experts with a covering letter and a stamped addressed envelope for the return of their completed questionnaire.

Data Analysis

Data analysis was a critical part of the research process because it was important that the shared meanings and practices of quality at the centres were captured as fully and as accurately as possible. Analysis started early in the research process through the collation of questionnaire data, feedback to centres of questionnaire results and periodic feedback of findings on the charter development process. Data analysis continued through to the final writing-up stage. The more I shared findings with

participants and others involved in the early childhood field through feedback during the study and through the development of preliminary reports and conference presentations, the more that patterns in the findings and understanding of the data became clearer.

Some quantitative data was analysed statistically and then compared to or used to complement the qualitative data. The emphasis was on description and meaning, and the statistical data was analysed in a way that could contribute to this. An SPSSx software systems file was written to process the quantitative data obtained from the questionnaires and the QRC. The systems file was written to enable statistical comparisons between and across the different early childhood groups, and parents, staff and experts. Descriptive statistics comprising of means, standard deviations and percentages were obtained. Analysis of variance procedures were carried out to support the descriptive statistics and to identify significant variations in group values and centre quality. The Scheffe' procedure was used to test for differences between means for early childhood groups and also for parents, staff and experts. It was used because it is a conservative test, requiring larger group mean differences than any other multiple comparison method for simple contrasts. It is particularly appropriate when groups have widely differing numbers of cases, as they often did in this study.

People's responses to the open-ended survey questions (eg. "what features of the centre are you most happy with?") were compiled under the relevant question heading using the word-processor (a computer file on questionnaire responses was thus developed). The early childhood group which participants belonged to was noted alongside their response. Similar responses were grouped together, and then the frequency of different responses was physically counted and double-checked for accuracy by a research assistant.

Written transcripts of the three research meetings of centre representatives were made from tape-recordings and hand recorded notes. The transcripts, including additions made by centre representatives and observational and interview evidence of the charter development process in centres, were then brought together and organised under relevant headings in a second computer file. A third computer file contained notes on conversations with head staff members after evaluations of centre quality using the QRC instrument, and the observational and interview information gathered by Trisch and I. The word-processor was used to bring this information from the computer files together and to cut and paste in various ways to examine and explore each of the research questions.

Time-line

I have included below the details of what happened and when in carrying out the study to make the research process clearer. The main rationale for the intervals in the time-line was manageability (to allow sufficient time for data collection, analysis and feedback) and what could be expected in terms of people's participation (eg. taking into consideration when holiday breaks occurred and the time-line set by the Ministry for charter development). The schedule for Te Kohanga Reo was determined by

when it was possible to commence data collection and the responses received. The research activities at various points in the study process were as follows.

Up to November 1989

- Various people were consulted to discuss proposals for the study. A review of the research literature was undertaken and a project proposal was developed.

November 1989 to January 1990

- People with knowledge of early childhood services in the region were consulted to assist in sampling decisions.
- Questionnaire forms and letters to centres were prepared.
- Funding for the project was awarded by the Ministry of Education.
- Meetings were held with representatives of the early childhood groups. Pamphlets introducing the study and researcher were posted to centres. Follow-up phone calls and visits to the centres were made. The study was discussed with head staff members and where possible at committee meetings and with management. Nine kindergartens, playcentres, and childcare centres agreed to participate but discussions for permission to study kohanga reo continued.

February to June 1990

- Charter consultation and committee meetings at the centres were attended and observed.
- Questionnaires were distributed to parents and staff at each kindergarten, playcentre and childcare centre.
- Two meetings for staff and management representatives were held at the University in March and May.

July to October 1990

- Questionnaires were posted to "experts".
- An instrument was developed to observe and rate centre quality, and it was implemented in the kindergartens, childcare centres and playcentres during September/October.
- Follow-up visits to centres were made to share and discuss the evaluations.

November 1990

- A third meeting of centre representatives was held.

July to November 1990

- This was a period of data collection in the two Te Kohanga Reo. Questionnaires were distributed personally to parents and staff.

December 1990 onwards

- The data collection phase was completed.
- Data analysis and report writing was undertaken for the Ministry during 1992.
- This thesis was written during 1992 and early 1993.

Validity and Reliability

Researcher bias in studies of early childhood centre quality is often evident in the lack of discussion and recognition that the values of the researcher are not always shared by those with an interest in educare (Balaguer, et al., 1991). I attempted to face this bias by focusing on participant perspectives and allowing my values to be questioned in individual conversations with staff, through asking for feedback on written results, and during the context of meetings with centre representatives. This in turn provided valuable insights into the everyday meanings and practices of quality in the centres.

A second way in which systematic bias is apparent in research on quality has been the tendency to focus on a small cluster of variables and to look at variables in isolation to one another. Research that reflects and upholds the traditional scientific approach with an emphasis on hypotheses testing and data reliability is common in the literature. Cohen and Manion (1980) make the point that whereas a single observation in fields such as physics and chemistry yields sufficient and reliable information on selected phenomena, in education it provides only a limited view of the situations in which people interact and the complexities of these.

Research methods can not be atheoretical or neutral as they act as filters through which the environment is selectively experienced. In this study, a multimethod approach was a key way of acknowledging and addressing the problem that exclusive reliance on one method distorts the researcher's picture of reality. Greater confidence in the validity of the findings was possible by comparing and contrasting data obtained using the different methods (Brewer & Hunter, 1989). The multimethod approach contributed to reliability because errors or omissions in the data sets were checked against other data sources.

Triangulation enhances confidence in the reliability and validity of the data and is especially relevant in doing research that takes a multimethod approach (Denzin, 1970). Two types of triangulation based on Denzin's (1970) typology were useful in the study: methodological triangulation and investigator triangulation. Methodological triangulation involves using either the same method on different occasions (eg. the series of meetings for centre representatives) or different methods on the same object of study (eg. interviews, questionnaires, and participant observation).

Investigator triangulation engages more than one observer or participant independently. An example of this in the study would be the observation of centre practices and development of descriptions of quality. Trisch joined me as a second independent observer to look at centre practices using the QRC. After independent observation and recording Trisch and I discussed and compared our observations and ratings. Before we wrote a profile of each centre's practices of quality I computed an inter-rater reliability score, which was reasonable (78%) given the large number of criteria to rate and the fact that Trisch and I were not always in the same areas of the centres at the same points of time to observe the same situations and happenings. On all of the QRC item ratings for which our ratings differed, the difference was only by one point (for example, Trisch might have rated a centre as being a "4" on a certain criterion whereas I had rated it a "3"), which indicated closeness in our

perceptions of centre practices. Head staff members were given a copy of their centre's profile and this was discussed with them, after they had also been given a copy of the QRC to examine their own centre's practices of quality. I then further examined the centre profiles and developed descriptions of centre practices of quality in the light of feedback from head staff members (see chapter five).

Providing feedback to the participants and asking them to comment on transcripts and researcher interpretations was a main way of verifying the data. Data feedback included a summary of quantitative and qualitative questionnaire results for each centre, summaries of the charter development process in each centre, and summaries of discussions and main points arising from each of the meetings of centre representatives. Researcher bias which developed during the analysis stages was apparent to staff and centre representatives who emphasised other findings in their discussions at the second and third research meetings and in verbal and written feedback to me as I shared results with them. One kindergarten teacher was even so diligent as to write her comments on the back of a postcard because she had left for a vacation forgetting to let me know that her centre's summary of the charter development process was accurate. These informal procedures operated as a check on researcher selectivity while allowing me to involve participants as informants rather than as objects of study. The possibility of the findings more accurately portraying and explaining their "realities" rather than distorting them was therefore enhanced.

Chapter Four

DEFINITIONS AND PERCEPTIONS

This chapter examines parent and staff goals for a successful early childhood programme and how both groups defined good-quality educare. Differences in the perspectives of respondents belonging to the different early childhood groups are discussed. Data showing the similarities and differences between what "experts" believe constitutes a good-quality centre and what parents and staff believe to be most important is included. The chapter concludes with an examination of parent and staff perceptions of the quality of their centre - what they liked, what they didn't like, and their centre's performance on different criteria of quality.

Goals, Values and Definitions of Quality

Ratings of Goal Importance

Data on parent and staff ratings of the importance of different programme goals is reported here because as Goodnow (1989) states any discussion of quality should start from goals and then move to what is important for reaching these. Goals are broad statements of intentions -what one hopes to achieve or believes should underpin an early childhood programme.

Parents and staff were asked to rate the importance of twenty-two goals on a four-point scale of "4" very important to "1" not important. The list of goals contained a mixture of what the professional literature suggests to be important in different early childhood groups (eg. parent education in playcentres, and spiritual development in kohanga), what might be considered inappropriate (eg. to keep children entertained and to foster compliance), and what the research literature in general suggests to be important (eg. to provide children with a safe and secure environment and to foster their development). In Table 5 below the results are presented and the goals are listed in order of the size of the combined score of parent and staff mean ratings (from what was rated as most important to the least important).

TABLE 5.

Parent and Staff Ratings of Goals

GOALS	Parents		Staff		Combined	
	Mean	SD	Mean	SD	Mean	SD
1. Safe and secure environment	3.90	.36	4.00	.00	3.91	.34
2. Develop self-confidence	3.86	.36	3.97	.18	3.87	.34
3. Provide warm loving care	3.82	.52	4.00	.00	3.84	.49
4. Encourage peer relationships	3.78	.46	3.88	.34	3.79	.44
5. Encourage independence	3.68	.59	3.91	.18	3.70	.57
6. Language development	3.67	.59	3.84	.37	3.69	.57
7. Meet children's physical care needs	3.56	.61	4.00	.00	3.62	.58
8. Motor-skill development	3.52	.62	3.84	.37	3.56	.60
9. Support children's individual learning style and interests	3.44	.71	3.93	.25	3.50	.69
10. Aesthetic development	3.46	.70	3.63	.66	3.48	.69
11. Intellectual development	3.38	.69	3.69	.54	3.42	.68
12. Partnership with parents	3.29	.78	3.81	.40	3.36	.76
13. Learn to relate with adults	3.19	.80	3.53	.57	3.23	.78
14. Promote moral development	3.11	.92	3.10	.87	3.11	.91
15. Parent support and friendship	2.97	.85	3.60	.50	3.05	.84
16. Promote own culture and language	2.88	.91	3.70	.54	2.98	.92
17. Promote cultural awareness	2.53	.92	3.34	.79	2.64	.95
18. Parent education	2.51	.92	3.44	.72	2.63	.95
19. Keep children entertained	2.67	.92	1.91	1.06	2.57	.69
20. Foster compliance with rules/expectations	2.36	1.10	1.97	1.03	2.31	1.10
21. Teach pre-school skills	2.34	.95	1.97	1.03	2.29	.96
22. Spiritual development	2.27	1.02	2.03	.91	2.23	1.01

Eight goals (Nos. 1 to 8) received very high ratings of importance of above 3.5 from both parents and staff while others were of less importance (Nos. 9 to 19), and a few were of little or minimal importance to both groups (Nos. 20 to 22).

Individual staff suggested the inclusion of the following as important goals for early childhood programmes:

- children learn how to deal with and resolve conflict,
- children respect and care for nature,
- children's interest in the environment is promoted,
- children learn respect for individual differences, and
- failure is made an acceptable part of learning.

Individual parents also suggested some additional goals:

- children learn to share,
- children develop personal control or self-discipline,
- children's interest in books is encouraged,
- a healthy clean environment is provided for children,
- children develop a sense of social responsibility,
- a sense of community is fostered, and
- "Stranger Danger and associated nasties" is taught and children learn the difference between safe touching and "ukky" touching.

The data presented in Table 5 show that the parents and staff valued similar goals to the parents in Podmore and Craig's (1991) study. The parents and staff of this study rated goals associated with the promotion of children's psycho-social, language and physical development as vital. In contrast, keeping children entertained (in other words, child minding) and teaching skills to prepare children for school received low ratings of importance from both groups. The goals of promoting spiritual development, moral development, children's own language and culture, and awareness of other cultures were also rated low in importance. One parent made the following comment which may explain the low ratings:

Language, culture, and morals are determinable in the family setting and have no place in the kindergarten, which should be a neutral territory (Centre E).

According to Podmore and Craig (1991) parents do not view meeting the individual cultural needs of children and providing for the cultural needs of ethnic minority groups as relevant and important goals, particularly if they do not see that their child has any cultural needs.

In a study by O'Rourke (1981) children's emotional development was less important to parents and parents placed greater importance on social and intellectual development. Whereas the parents in this study viewed emotional and social development to be more important than intellectual development

and preparation for school. The finding that staff placed greater emphasis on psycho-social goals agrees with research reported in Bell (1990).

Descriptions of a Good-Quality Centre

Parents and staff were asked an open question: "Please define and describe what a good-quality early childhood centre is from your point of view". Their responses varied from between two lines on the A4 paper size questionnaire to one and a half pages of detailed comment.

Most of the features mentioned were about the social-emotional climate, programme structure, the learning and play environment, the physical environment (including health and safety), and staffing. Only a few references to features of centre management, programme evaluation and links with the community were contained in their descriptions of a good-quality centre. Because of the large range and number of quality features mentioned by parents and staff only the features mentioned by at least ten percent of either parents or staff are shown in Table 6 below. Where no percentage of group response is given on any one of the features listed in Table 6 then less than ten percent of the respondents included the feature in their description of a quality centre.

TABLE 6.

Key Features that Define a Good-Quality Centre

FEATURES OF QUALITY	Parents		Staff	
	n	%	n	%
Happy, warm, friendly or homely atmosphere	59	26.5	14	43.8
A range of interesting play activities	51	22.9	13	40.6
Activities are suited to children's age and/or interests	24	10.8	18	56.3
Environment is planned to be safe (eg. high fencing)	42	18.8	11	34.4
Secure, trusting environment for children	37	16.6	9	28.1
Staff genuinely like or love children	76	34.1	-----	-----
Staff listen to and respond to children	24	10.8	7	21.9
Children are allowed to choose their own activities	23	10.3	7	21.9
Parents are made to feel welcome	-----	-----	9	28.1
Clean and healthy environment (eg. low noise level)	27	12.1	5	15.6
Parent involvement is encouraged or supported	-----	-----	8	25.0
"My child" is happy or eager to attend	53	23.8	-----	-----
Communication about children between staff and parents	-----	-----	7	21.9
An ideal or high staff-child ratio	-----	-----	7	21.9
There is enough play equipment and resources	44	19.7	-----	-----
Pro-social behaviour is encouraged (eg. taught to share)	42	18.8	-----	-----

This data supports findings on the value parents and staff placed on various programme goals. For example, parents' higher rating than staff on the goal of keeping children entertained is supported by their more frequent comments about the need for an adequate or plentiful supply of equipment and resources for children's play. Another example is that parents placed a high value on the goal of promoting children's self confidence and many parents defined quality in terms of their child's eagerness in being at the centre.

The data show that staff are more concerned than parents about relationships with parents. Although most parents awarded a rating of "important" to the goal of staff-parent partnership, when it came to defining a good-quality centre (in their own unprompted words) aspects relating to such a partnership were mentioned by less than ten percent of parents.

In summary, parents' descriptions of a good-quality centre referred mainly to children's social-emotional well-being and development. Staff descriptions are similar in this respect to parents, but staff also made frequent references to features of quality related to the learning environment for children and relationships with parents.

I also examined the responses of kohanga respondents separately because the kohanga reo parent and staff samples were small compared to the size of other group samples and because kohanga have a specific cultural purpose unlike the other services. Kohanga parents' descriptions emphasised that a good-quality centre is one in which the Maori language is spoken and taught and traditional skills and knowledge (eg. waiata, poi and stick games) are also taught to the children and parents. In a good-quality centre children must be happy and be surrounded by an atmosphere of aroha (love). The whanau of the centre must work well together, sharing the same aims and providing parents with support. The two kaiako (staff) referred to the role of the whanau as being central to the running of the kohanga. In addition, one kaiako stated "he whare pai" (a good building), "tamariki" (children), and "wahi takaro pai mo nga" (good play for all).

Ratings of Quality Criteria

In their questionnaires parents and staff were asked to rate the importance of fifty-six items for a centre to be of good-quality. Table 7 shows the mean rating scores of parents and staff on each of the quality criteria. To provide an indication of how important each of the quality criteria were from the parents' and staff perspectives a combined mean rating was calculated for each quality criteria. The quality criteria are listed in Table 7 according to the size of the combined mean parent-staff rating (from the most important being "staff are responsive" to the least important being "home-visiting of families").

TABLE 7.

Ratings of the Importance of Quality Criteria

QUALITY CRITERIA	Parents		Staff		Combined	
	Mean	SD	Mean	SD	Mean	SD
1. Staff are responsive to children	3.96	.23	4.00	.00	3.96	.21
2. Staff are warm and caring people	3.92	.29	3.97	.18	3.93	.28
3. Staff care about/love children	3.88	.33	3.91	.30	3.88	.32
4. Child supervision	3.85	.37	3.97	.18	3.87	.35
5. Staff work together as a team	3.85	.36	3.94	.27	3.86	.35
6. Safety and maintenance of toys and equipment	3.83	.42	3.97	.18	3.84	.40
7. Developmentally appropriate activities	3.79	.41	3.97	.18	3.82	.39
8. Clean building, facilities, toys	3.80	.42	3.88	.34	3.81	.41
9. Home-like pleasant atmosphere	3.76	.47	3.97	.18	3.79	.45
10. Variety of play activities	3.77	.46	3.88	.42	3.78	.45
11. Personal hygiene reinforced	3.75	.48	3.94	.25	3.77	.46
11= Group size is not too big	3.75	.48	3.94	.25	3.77	.46
13. Parents and families welcomed	3.73	.51	3.94	.25	3.76	.49
13= Staff model good health/hygiene	3.74	.52	3.90	.31	3.76	.50
15. Sensitive settling-in process	3.73	.57	3.94	.25	3.75	.54
15= Good staff leadership	3.73	.54	3.94	.25	3.75	.52
17. Sufficient toys, equipment etc.	3.68	.52	3.91	.30	3.71	.50
18. Staff experienced with children	3.70	.56	3.72	.52	3.70	.55
18= Children's physical needs met	3.67	.56	3.87	.43	3.70	.55
18= Excessive punishment not used	3.71	.70	3.68	.91	3.70	.73
21. Balance of indoor-outdoor activities	3.68	.53	3.75	.67	3.69	.55
21= Staff meet to plan programme	3.67	.52	3.83	.46	3.69	.51
23. Individual, small and large group activities	3.64	.53	3.91	.30	3.67	.51
24. Balance of child-staff initiated activities	3.56	.59	3.74	.51	3.58	.58
25. Parent contact encouraged	3.52	.62	3.94	.25	3.57	.60
26. Provisions for special needs	3.53	.78	3.79	.41	3.56	.75
27. Qualified staff	3.55	.72	3.53	.67	3.54	.71
27= Parents notified about diseases	3.54	.69	3.58	.72	3.54	.69
27= Staff join children in their play	3.55	.71	3.53	1.04	3.54	.76
30. Formative programme evaluation	3.50	.65	3.77	.56	3.53	.64
31. Provisions for staff	3.51	.72	3.63	.94	3.52	.75
32. Parent-staff partnership	3.42	.79	3.91	.30	3.49	.76
33. Parents join in decision-making	3.45	.72	3.72	.52	3.48	.70
33= Parent friendship and support	3.41	.76	3.94	.25	3.48	.73
33= High ratio of staff to children	3.42	.78	3.84	.37	3.48	.76
36. In-service training courses	3.45	.75	3.53	.67	3.46	.74
36= Non-sexist curriculum, interactions etc.	3.42	.81	3.75	.76	3.46	.81
38. Parents informed about philosophy & practices	3.41	.70	3.77	.43	3.45	.68
39. Use of specialists	3.39	.73	3.61	.62	3.41	.72
40. Stability in staffing	3.34	.73	3.42	.77	3.38	.73
41. Clear pathways between activities	3.30	.71	3.78	.42	3.36	.70
42. Provisions for sick children	3.31	.82	3.61	.76	3.35	.81
43. Child progress/activity reports	3.30	.80	3.44	.80	3.32	.80
43= Professionalism valued	3.29	.89	3.55	.78	3.32	.88
45. Support community involvement	3.26	.76	3.47	.57	3.29	.74
46. Stable peer group	3.17	.81	3.81	.40	3.25	.79
47. Regular outings and excursions	3.16	.84	3.75	.51	3.24	.83
48. Staff support family values	3.14	.87	3.72	.46	3.21	.85
49. Cultural awareness promoted	3.10	.84	3.75	.76	3.19	.85

	Parents		Staff		Combined	
50. Differences in family background recognised	3.12	.81	3.58	.72	3.18	.81
51. Biculturalism promoted	2.77	1.00	3.71	.64	2.90	1.01
52. Parent education	2.61	.98	3.58	.56	2.74	.99
53. Written programme schedule	2.55	1.02	3.07	1.03	2.61	1.04
54. Staff have parenthood experience	2.41	1.07	2.38	1.19	2.40	1.08
55. Provisions for parents	2.22	1.02	3.32	.79	2.35	1.06
56. Staff home-visit families	1.88	.96	2.30	.99	1.93	.97

A large number of quality criteria have a mean rating of "important" (a "3") to "very important" (a "4"). Thus, a good-quality centre was defined by parents and staff as comprising of many possibly interacting components (Lero & Kyle, 1984). Three research-based indicators of quality - group size, staff training and adult-child ratio - were not among the ten most important quality criteria for parents and staff. This is an interesting result. It suggests that those involved in the care and education of children differ from researchers in what they emphasise as important for defining quality educare (Porter, 1982; Takanishi, 1981).

Parents and staff placed most importance on the care of children including the social-emotional atmosphere, staff interactions and aptitude for working with children, and child safety. Other criteria such as hygiene and the developmental appropriateness of activities were important but not as important as children's physical care and well-being. These findings are reinforced by data reported earlier on the programme goals most valued by parents and staff and their descriptions of a good-quality centre. Swain and Swain's (1982) research on parents' views found that the criteria of "staff should show warmth, caring and genuine concern for children" and "the centre should be warm and comfortable" were of high importance to every parent in their sample (p. 32). In this study, most parents would have agreed with the parents in Swain and Swain's study, and they also placed high importance on some other criteria, including child supervision and safety, stimulating play activities, cleanliness and hygiene, and space for outdoor play.

The parents' mean rating of biculturalism is particularly low, possibly reflecting the fact that the majority of parents in the sample were Pakeha. In chapter six further data on parents' views about biculturalism is reported under discussion on parents' concerns about charter content.

Parenting experience as a criterion for staff employment is of little importance to parents and staff but other attributes such as training, personality and skills clearly are. The current research literature points strongly to the importance of staff training for producing positive child outcomes but there is mixed evidence as to whether or not experience is an important factor for staff effectiveness (Howes, 1983; Ruopp et., 1979).

Parent education received a surprisingly low combined mean rating of importance, given that Bronfenbrenner's (1979) ecological theory suggests the value of this for promoting child development. It is also surprising from the point of view of traditional practices in kindergartens and playcentres. Parent education is an integral part of playcentre philosophy. The kindergarten teachers' role in the organisation of parent education evenings and workshops is emphasised in teacher education courses. Compared with parents, staff viewed parent education as a more important practice for quality. The parents may not have considered the early childhood centre to be an appropriate source for information and support in child-rearing, as comments relating to this were written by some parents in their questionnaires. For example:

I don't believe that it is the teacher's place to tell parents how to raise their family unless they are asked for advice - and only advice. They are there for the children's sake (parent, Centre F).

Parent education would be more important for some people but I have my own well defined ideas and ideals (parent, Centre H).

According to Smith (1980) parents can perceive "parent education" to be a form of intervention to change their attitudes and behaviours. Thus parents tend to distrust the motives of staff and view parent education as something that has negative rather than positive consequences. The parents in this study placed considerably less value on the importance of parent education as compared to staff. It seems that staff probably need to examine their current parent education practices and develop strategies for better selling the concept and methods of parent education to parents. A change of terminology might be useful, for example "parent education" could be called "opportunities for parents to find out more about child development" or "programmes to support parents in their role".

Provisions for parents in the centre had a low combined mean rating due to most parents rating this as low in importance. Parents seemed to believe that if they stayed at their centre then this was to assist staff rather than to participate and to be a member of the setting. They thus saw little necessity for provisions for their personal needs. For example, two comments were:

Parents aren't there to relax, they're there to help (Centre D).

I feel quite strongly that early childhood centres must focus on the children, and we as parents must be very careful not to make them into anything which takes the focus away from the children in any way (Centre E).

Why a written programme schedule was rated so low in importance is puzzling because much higher ratings of importance were awarded to related quality criteria of staff professionalism and programme evaluation. A written programme schedule may have been interpreted by respondents as nothing more than a "few scribbles about changes to table top activities" (Meade, 1987, p. 5), or a timetabled approach to organising the programme (Meade, 1991). Alternatively, respondents could have viewed written planning as not necessary, which is contrary to research-based recommendations.

Home-visiting received comparatively low ratings of importance from both parents and staff. Alongside their rating some parents wrote a comment against the practice of home-visiting, for example:

I am afraid parents might see this as being psychologically assessed (Centre A).

A total waste of time! (Centre F).

This finding supports Renwick's (1989) conclusions about how kindergarten teachers felt about the usefulness of home-visiting and the negative reactions they sometimes received from parents.

In addition to rating the importance of group size and staff-child ratio respondents were asked what they considered the optimal group size and staff-child ratio to be. Both groups responses were similar. Their responses reflected what research has shown to be best for children's development, although their recommendations on group size were a little higher than what researchers have concluded to be optimal (Howes, 1983; Ruopp et al., 1979; Smith & Swain, 1988). For staff the optimal group size was a mean of 23.5 children ($SD = 6.83$) and for parents it was slightly higher at 24.9 children ($SD = 8.74$). For staff the optimal staff-child ratio was 6.67 children to one staff member ($SD = 3.02$, range between 4 to 15 children) and for parents it was 7.3 children to one staff member ($SD = 3.14$, range between 2 to 20 children). Half the staff and one-fifth of parents recommended that the ratio should vary according to children's age, with one staff member to approximately 2.8 under-two-year-olds, 4.4 two to three-year-olds, or 6.5 over three-year-olds.

Differences in Values

Differences in Parent and Staff Ratings

Table 8 below shows the programme goals and quality criteria for which statistically significant differences between the mean ratings of parents and staff were found.

Table 8.

Differences in Parent and Staff Importance Ratings of Goals and Quality Criteria

	Parents		Staff		Significance	
	Mean	SD	Mean	SD	T-Value	p =
GOALS						
Safe and secure environment	3.90	.36	4.00	.00	-4.29	.00
Develop self-confidence	3.86	.36	3.97	.18	-2.73	.01
Provide warm loving care	3.82	.52	4.00	.00	-5.31	.00
Encourage independence	3.68	.59	3.91	.18	-3.52	.00
Language development	3.67	.59	3.84	.37	-2.30	.03
Meet individual needs	3.56	.61	4.00	.00	-10.79	.00
Motor-skill development	3.52	.62	3.84	.37	-4.25	.00
Support individual learning style & interests	3.44	.71	3.93	.25	-7.34	.00
Intellectual development	3.38	.69	3.69	.54	-2.96	.01
Partnership with parents	3.29	.78	3.81	.40	-5.95	.00
Learn to relate with adults	3.19	.80	3.53	.57	-3.02	.00
Parent support and friendship	2.97	.85	3.60	.50	-5.95	.00
Promote own culture and language	2.88	.91	3.70	.54	-7.09	.00
Promote cultural awareness	2.53	.92	3.34	.79	-5.32	.00
Parent education	2.51	.92	3.44	.72	-6.57	.00
Keep children entertained	2.67	.92	1.91	1.06	3.86	.00
QUALITY CRITERIA						
Staff are responsive to children	3.96	.23	4.00	.00	-2.94	.00
Child supervision	3.85	.37	3.97	.18	-2.96	.00
Safety and maintenance of toys/equipment	3.83	.42	3.97	.18	-3.35	.00
Developmentally appropriate activities	3.79	.41	3.97	.18	-4.23	.00
Home-like pleasant atmosphere	3.76	.47	3.97	.18	-4.64	.00
Personal hygiene reinforced	3.75	.48	3.94	.25	-3.45	.00
Group size is not too big	3.75	.48	3.94	.25	-3.34	.00
Parents and families welcomed	3.73	.51	3.94	.25	-3.71	.00
Staff model good health & hygiene practices	3.74	.52	3.90	.31	-2.34	.02
Sensitive settling-in process	3.73	.57	3.94	.25	-3.65	.00
Good staff leadership	3.73	.54	3.94	.25	-3.62	.00
Sufficient toys, equipment etc.	3.68	.52	3.91	.30	-3.59	.00
Children's physical needs met	3.67	.56	3.87	.43	-2.33	.02
Individual, small and large group activities	3.64	.53	3.91	.30	-4.26	.00
Parent contact encouraged	3.52	.62	3.94	.25	-6.93	.00
Provisions for special needs	3.53	.78	3.79	.41	-2.84	.01
Formative programme evaluation	3.50	.65	3.77	.56	-2.53	.02
Parent-staff partnership	3.42	.79	3.91	.30	-6.43	.00
Parents join in decision-making	3.45	.72	3.72	.52	-2.60	.01
Parent friendship and support	3.41	.76	3.94	.25	-7.84	.00
High ratio of staff to children	3.42	.78	3.84	.37	-5.01	.00
Non-sexist programme, interactions	3.42	.81	3.75	.76	-2.29	.03
Parents informed about philosophy/practices	3.41	.70	3.77	.43	-3.88	.00
Clear pathways between activities	3.30	.71	3.78	.42	-5.49	.00

	Parents		Staff		Significance	
Stable peer group	3.17	.81	3.81	.40	-7.24	.00
Regular outings and excursions	3.16	.84	3.75	.51	-5.56	.00
Staff support family values	3.14	.87	3.72	.46	-5.77	.00
Cultural awareness promoted	3.10	.84	3.75	.76	-4.42	.00
Family background reflected in programme	3.12	.81	3.58	.72	-3.27	.00
Biculturalism promoted	2.77	1.00	3.71	.64	-6.95	.00
Parent education	2.61	.98	3.58	.56	-7.97	.00
Written programme schedule	2.55	1.02	3.07	1.03	-2.53	.02
Provisions for parents	2.22	1.02	3.32	.79	-7.00	.00
Staff home-visit families	1.88	.96	2.30	.99	-2.18	.04

The findings are consistent with data reported earlier in this chapter showing that compared with staff, parents placed less value on parent-staff relations. Most parents believe that goals of promoting cultural awareness and supporting children's cultural identity in the programme are of minimum importance. This result lends support to Podmore and Craig's (1991) suggestion that parents tend not to consider that young children have cultural needs. Parents rated the goal of keeping children entertained higher in importance than staff, which shows support of the historical view of early childhood staff as child-minders rather than as professional educators (May-Cook, 1985).

Staff placed greater importance on a range of quality criteria than parents who tended to award lower ratings. Because of their role and training, staff probably have greater knowledge of the factors most conducive to promoting children's development (Clarke-Stewart & Gruber, 1984; Wilson, 1988). The parents, for example, placed little importance on criteria involving the establishment of close links between home and centre settings. The significantly higher ratings by staff on criteria of biculturalism and cultural awareness suggests greater awareness amongst staff of changes in social policy towards equity and acknowledgment of the Treaty of Waitangi (see additional data and discussion in chapter six). A small number of parents made negative comments such as:

There are more cultures than Maori and Pakeha. I am Pakeha! (Centre G).

Our kindy does provide multi-cultural books/posters. I feel this is not necessary until a child studies other cultures at school (Centre E).

Compared with most parents, staff were daily in their centres for longer periods. Staff can therefore be expected to award higher ratings of importance to quality criteria that are related to their conditions of work and personal satisfaction, namely: staff-child ratio, peer-group stability, clear pathways between activity areas, and taking children on outings and excursions. For example, taking children on outings may be just as important for staff sanity (Jorde-Bloom, 1986) as it is for children to gain an understanding of the world around them (Smith & Swain, 1988).

Differences Among Parent and Staff Categories

Looking at the relationship between parent and staff responses and their personal characteristics was not an original intention of the study. The parent and staff samples were not selected for this purpose. However, I carried out some analyses of individual differences amongst the parents and the staff groups on variables such as income, ethnic group, and staff training. I did this for reasons of personal

curiosity and have decided to report the data because it opens up further questions. The data should be interpreted with caution because of limitations with the study sample for this form of statistical comparison. Further research is needed to investigate the differences and explore the reasons for the differences.

Differences between Qualified and Unqualified Staff

Compared to staff (n = 24) who held an early childhood qualification recognised by the Ministry of Education at the time of the study, staff who were not qualified (n = 8) gave higher ratings of importance to some programme goals and quality criteria (see Table 9). It is difficult to make any meaning of the data showing differences between staff ratings of quality criteria because all non-qualified staff awarded a rating of "4" to these.

TABLE 9.

Differences in Staff Ratings according to whether Staff were Qualified

	Unqualified		Qualified		Significance	
	Mean	SD	Mean	SD	T-Value	p =
GOALS						
Encourage peer relationships	4.00	.00	3.83	.38	2.14	.00
Learn to relate with other adults	3.88	.35	3.42	.58	2.65	.02
Motor-skill development	4.00	.00	3.79	.44	2.46	.02
Partnership with parents	4.00	.00	3.75	.44	2.77	.01
Moral development	3.88	.35	2.83	.83	4.90	.00
Parent support and friendship	3.88	.35	3.50	.51	2.30	.03
Keep children entertained	2.75	1.28	1.63	.82	2.33	.04
QUALITY CRITERIA						
Clean toys, equipment etc.	4.00	.00	3.83	.38	2.14	.04
Parents told about contagious diseases	4.00	.00	3.43	.79	3.44	.00
Balance of child-staff activities	4.00	.00	3.67	.57	2.89	.01
Balance of indoor-outdoor activities	4.00	.00	3.67	.76	2.14	.04
Staff join children in their play	4.00	.00	3.39	1.16	2.52	.02
Outings and excursions	4.00	.00	3.67	.57	2.89	.01
Provisions for parents' needs	4.00	.00	3.17	.82	3.15	.01
Provisions for staff needs	4.00	.00	3.50	1.06	2.30	.03

The data shown in Table 9 suggest that training may affect staff values about appropriate programme goals (Feeney & Chun, 1985; Howes, 1983; Whitebook et al, 1990). Unqualified staff placed more importance than qualified staff on children's social and physical play, learning to get along with other adults, moral development, and relationships with parents. Keeping children entertained was less important for staff who were qualified. Why qualified staff mean ratings for the goals of partnership with parents and the provision of parent support and friendship were lower than the mean ratings of qualified staff is puzzling. Staff who have not undertaken training may see their role as more similar to that of parents, compared with staff who have been through a formal training programme. In his review of the literature Powell (1989) proposes that the socialisation process of teacher training involves the acquisition of new values and the loss of old ones, especially for adults from working class and ethnic minority backgrounds.

Differences between Parents from Varying Household Income Groups

On five goals and seven quality criteria household income was significantly related to differences between parents' mean ratings (see Table 10). For the purpose of statistical analysis³ a low household income was defined as less than \$30,000 a year (n = 89 families) and a high household income was defined as \$30,000 or more (n = 104).

TABLE 10.Differences in Parents' Ratings Based on Household Income

	Low Income		High Income		Significance	
GOALS	Mean	SD	Mean	SD	T-Value	p =
Parent education	2.70	.92	2.27	.91	3.25	.00
Child compliance with expectations	2.59	1.05	2.10	1.08	3.17	.00
Entertain children	2.79	.85	2.52	.94	2.04	.04
Motor-skill development	3.41	.67	3.61	.56	-2.23	.03
Promote cultural awareness	2.39	.94	2.66	.91	-2.11	.04
QUALITY CRITERIA						
Staff are parents themselves	2.60	1.12	2.27	.99	2.17	.03
Staff care about/love children	3.82	.39	3.92	.50	-2.11	.04
Peer-group stability	3.05	.84	3.32	.73	-2.30	.02
Differences in family background are taken into account in programme	2.96	.79	3.24	.80	-2.30	.02
Qualified staff	3.43	1.12	3.64	.59	-2.01	.046
Group size is not too big	3.68	.49	3.85	.36	-2.71	.01
Adult-child ratio	3.34	.80	3.55	.64	-1.99	.048

Research has pointed to social class differences between parents regarding behavioural expectations of children (Powell, 1989) and the data reported in Table 10 also suggests this. Parents from the low income group had higher mean ratings on programme goals of parent education, fostering children's compliance, and keeping children entertained. The majority of parents from high income households awarded higher ratings of importance to programme goals of promotion of motor skill development and promotion of cultural awareness.

Parents in the low income group rated staff parenthood experience as a more important criterion for quality than parents with a higher income. The difference may be because parents on a low income valued the parental-type behaviours of staff more than professional behaviours since they gave a lower rating of importance to the criterion of qualified staff. Compared to high income parents, parents in the low income group also rated the following quality criteria as less important: staff care about children, peer-group stability, differences in family background are taken into account in the programme, group-size and adult-child ratio.

³ Note that 30 parent respondents did not provide data on family income.

Differences in Ratings According to what Parents do whilst their Child is at Centre

Table 11 shows parents' mean ratings of the importance of eight programme goals and eleven quality criteria were statistically significantly different according to whether they were in paid employment or a student (n = 110), or they usually stayed at home, parent-helped at their centre or engaged in leisure activities (n = 113).

TABLE 11.Differences in Ratings Based on Parents Main Activity while their Child is at Centre

	Employment or Study		Other		Significance	
	Mean	SD	Mean	SD	T-Value	p =
GOALS						
Keep children entertained	2.54	.95	2.79	.89	-2.03	.04
Child compliance with expectations	2.16	1.07	2.56	1.10	-2.65	.01
Provide warm loving care	3.90	.36	3.74	.63	2.35	.02
Meet children's individual needs	3.65	.48	3.47	.70	2.30	.02
Safe and secure environment	3.95	.21	3.85	.45	2.28	.02
Support children's individual learning characteristics	3.54	.63	3.34	.96	2.14	.03
Promote children's own culture	3.04	.82	2.70	.96	2.85	.01
Promote cultural awareness	2.71	.91	2.34	.90	3.09	.00
QUALITY CRITERIA						
Settling-in process	3.82	.47	3.66	.60	2.22	.03
Peer-group stability	3.29	.75	3.06	.85	2.11	.04
Meet children's physical needs	3.77	.52	3.57	.58	2.58	.01
Care of sick children	3.42	.71	3.19	.90	2.05	.04
Family background differences are taken into account in programme	3.24	.74	3.00	.87	2.13	.03
Biculturalism	2.99	1.00	2.56	.95	3.14	.00
Support of family values/customs	3.34	.76	2.95	.91	3.36	.00
Non-sexist curriculum	3.57	.65	3.28	.91	2.69	.01
Outings and excursions	3.33	.79	2.97	.86	3.24	.00
Staff-child ratio	3.58	.69	3.27	.85	2.95	.00
Provisions for parents' needs	2.38	1.03	2.04	.98	2.53	.01

The goals of keeping children entertained and fostering compliance with group expectations were rated higher in importance by parents who tended to be at home or with their child more. In contrast, parents who were working outside-of-the-home or engaged in further education placed more emphasis on the importance of six goals relating to children's care, learning and cultural development. The data suggests the possibility that parents working outside-of-the-home or involved in further education are more likely than other parent groups to place higher value on programme goals which lead to more positive outcomes for children. This data reflects the differences in values between parents with high and low household incomes (discussed above) because families who do not have a second wage coming into the household or who receive a government benefit are likely to have a lower household income.

On all eleven quality criteria where significant differences were identified, parents who were in paid employment or students had higher mean ratings of importance than other parents. When parents are less available for their children because they have on-going daily commitments to their job or education courses it seems that they place greater importance on the care needs of their child, a stable peer-group for their child, support of their family values and needs, outings and excursions for their child, and a bicultural and non-sexist programme.

Differences Based on Ethnicity

Table 12 shows that there were some significant differences between parents' ratings of the importance of quality criteria depending upon whether their child was Pakeha or of a different ethnicity.

TABLE 12.

Differences in Parents' Ratings Based on Children's Ethnicity

QUALITY CRITERIA	Pakeha		Non-Pakeha		Significance	
	Mean	SD	Mean	SD	T-Value	p =
Non-excessive punishment	3.80	.54	3.24	1.23	2.22	.04
Qualified staff	3.59	.66	3.08	1.12	2.21	.04
Biculturalism	2.70	.99	3.42	.83	-3.85	.00
Non-sexist curriculum, etc.	3.39	.80	3.75	.44	-3.30	.00
Outings and excursions	3.11	.88	3.44	.71	-2.11	.04
Parents involved in decision-making	3.44	.71	3.71	.55	-2.24	.03
Provisions for parents	2.17	1.00	2.72	1.06	-2.42	.02

No significant differences were found between parents' ratings of the importance of programme goals. It should be noted that a small number of parents whose children were Maori, Pacific Islanders or from other ethnic minority groups ($n = 25$) are represented in the parent sample compared to the number of parents with Pakeha children ($n = 170$).

Qualified staff and non-excessive punishment (positive behaviour management) were more important quality criteria for parents with Pakeha children. This suggests cultural differences in acceptance of child discipline and beliefs in the need for staff to hold a formal qualification. Parents with children from ethnic groups other than Pakeha gave higher ratings of importance to biculturalism and a non-sexist curriculum. They also placed more value on the importance of provisions for parents' needs at the centre, for parents to be involved in decision-making and for children to be taken on outings and excursions.

Differences in Views Across the Early Childhood Groups

The centres in each of the four early childhood groups differed in what was perceived to make them a quality service. The various ways each group was considered to provide a certain quality or uniqueness of service are outlined below. The descriptions are supported with direct quotes from

centre representatives who attended the research meetings and from my meetings with members of the local Kohanga Reo Trust.

Playcentre

Playcentres are parent co-operatives with a supportive parent body and association. Each playcentre has a parent council of which all parents are regarded to be members and can participate in decision-making. Especially valued within the playcentre group is the way that parents are seen to be working together and supporting one another:

Playcentre is as good as its parents.

The main function of the co-operative is to involve everyone. How you function as a cooperative is important to the centre.

At our meeting the other night we talked about whether our supervisor should do three sessions a week. I was amazed how the parents were all really aware of the possibility of being overstressed and what they could do about it.

The playcentre movement provides parents with an opportunity to undergo training to gain a supervisor's certificate. Parents are encouraged to take courses for personal growth provided by the playcentre association and to participate in parent education sessions at their playcentre:

Group and individual experiences for all children and adults - this is the main difference between playcentre and kindergarten. We want our parents and supervisors to grow.

At leadership courses you'd learn to understand a bit more about yourself, so that when you do want changes, or when you've got conflict you can handle it better.

Childcare

According to representatives from the childcare centres, their service differs from most other early childhood groups in respect of creating a family-type atmosphere. Staff care for children of mixed-age range, over an extended period of time and they build relationships with parents and families because parents entrust some of their child-rearing responsibilities in them:

The home-type atmosphere leads to small-group interactions.

It's definitely that closeness that you get with children.

High adult-child ratios allow us to spontaneously take children for a walk or to the museum.

I've made friendships with families. That's something isn't it? That's how close you do get, you become part of a family.

Childcare representatives believed their service was more flexible than other early childhood groups, and that this was a primary reason why parents chose to use childcare. Many childcare centres have long hours of operation and are often open during school holidays. Centres vary in their type of management and in their programme philosophy, and this contrasts with other groups which have regional and national administration structures:

The strength of the childcare service is its flexibility to cater for the different needs of the parents.

Centres operate according to various philosophies. The consumer environment means that parental satisfaction is important.

The backgrounds and interests of staff at any one childcare centre are likely to differ mainly because a variety of choices of training programmes exist for people who want to work in or who are already working in childcare:

Our strength is a variety of training, including field-based (on-the-job).

This was believed to benefit parents because different parents would more likely find at least one staff member at their centre who they could relate well with. Diversity in staff backgrounds was also believed to benefit children in terms of the range of skills staff are likely to have:

People from different backgrounds offer worthwhile experience to the job.

Kindergarten

In contrast to the other early childhood groups, members of the kindergarten group emphasised kindergarten policy of employing only trained staff who had a two (now three) year College diploma. Because of this policy it was believed that there was a high level of professionalism amongst kindergarten staff:

Quality must mean trained teachers. Training guarantees a certain uniformity in the quality of staff.

Our training makes us different from a lot of other early childhood services.

It was believed that the professionalism of teachers was threatened by the government requirement to improve the staff-child ratio when funding for the employment of more staff was not available. Teachers did not rely on parents to help make up the staff-child ratio requirement and parents were asked to participate as parent helps rather than as staff:

I don't like the way they [the Ministry of Education] said that we had to accept mother-help in kindergartens on a professional level rather than just helping out when teachers could do with the help.

Representatives believed that segregation of children into two age-groups, younger children attending afternoon sessions and older children attending morning sessions, added another dimension to the special quality of the kindergarten. If the kindergartens had a mixed-aged group policy then staff would be unable to cope with the wide developmental needs of children because of a low staff-child ratio. They believed that age-segregation was beneficial for children's learning because they were with same age peers:

You can work more effectively with children in the same age-group than you can with children of widely different ages.

Te Kohanga Reo

The main purpose of a kohanga reo programme is to provide immersion in the Maori language:

The name Kohanga Reo indicates that it is different from other preschools because it is a language nest. The names for the other preschools depict they are for other activities because they already have language - a foundation in English.

Hence a key requirement in the employment of kaiako (staff) to work with children is that they speak the Maori language.

There is an emphasis on the whanau (family) in kohanga programmes. Te Kohanga Reo aims to support cultural development through supporting parents and strengthening families:

Kohanga has spin-offs for parents. It is better for parents to be involved than staying at home. Parents learn new skills, which influence their daily living and job skills.

Family involvement keeps going past the time when children reach five years and go to school. Once a member of the whanau - always a member.

Differences between Early Childhood Groups in Programme Goals

Across the four early childhood groups some differences in parent and staff ratings of goal importance were identified using analysis of variance procedures. The Scheffe' test was used to identify significant pair-wise differences between either parent or staff ratings at two or more centres. Table 13 shows the goals on which parent and staff ratings were significantly different, and indicates which group's mean ratings were significantly higher or lower from the ratings of the other groups.

TABLE 13.Differences between the Early Childhood Groups on Ratings of Goal Importance

	Kindergarten		Childcare		Playcentre		Te Kohanga		Significance	
PARENTS RATINGS	Mean	SD	Mean	SD	Mean	SD	Mean	SD	p =	Scheffe' *
Promote own culture	2.73	.96	3.11	.79	3.04	.82	4.00	.00	.01	None
Promote self-confidence	3.89	.32	3.82	.43	3.96	.20	3.58	.52	.01	P, K > T
Provide warm loving care	3.72	.64	3.98	.13	3.86	.33	3.92	.29	.01	C > K
Learn to relate to adults	3.05	.86	3.46	.63	3.27	.67	3.33	.78	.01	C > K
Parent education	2.45	.94	2.26	.76	3.19	.85	2.83	.94	.00	P > C, K
Foster compliance with social expectations	2.45	1.05	1.84	1.03	2.48	1.12	3.58	.67	.00	T > K, C, P, K > C
STAFF RATINGS										
Encourage independence	4.00	.00	4.00	.00	3.25	.50	4.00	.00	.00	K, C, T > P
Keep children entertained	1.38	.74	1.89	.90	2.00	1.41	4.00	.00	.01	T > K, C
Foster compliance with social expectations	1.50	.76	2.00	.97	1.75	.96	4.00	.00	.01	T > K, C
Teach pre-school skills	1.50	.76	2.00	.84	1.75	1.50	4.00	.00	.01	T > K, C

* K = Kindergarten, C = Childcare, P = Playcentre, T = Te Kohanga Reo.

Parents' ratings of the importance of the goal of promoting children's own culture and language (te reo rangatira and nga tikanga) were significantly different across the four early childhood groups, with the mean rating of importance by kohanga parents, not surprisingly, being the highest. However, the Scheffe' test showed no significant pair-wise differences between the group ratings. On the next five goals listed in Table 13 the Scheffe' test indicated some significant pair-wise differences for parents from the different early childhood groups.

Playcentre and kindergarten parents' ratings of the importance of promoting the development of children's sense of self-confidence were higher than the kohanga parents mean rating. Kohanga parents' rating of the goal of encouraging children to comply with group norms was significantly higher than kindergarten and childcare parents mean ratings. These differences between kohanga parents values and those of the other groups suggests that they viewed their child as being part of a group whereas other parents placed more emphasis on their child as an individual.

Playcentre and kindergarten parents' ratings of encouraging children to comply with group expectations was higher than the childcare parents mean rating. This difference may be because parents who use a childcare centre perceive their child to be in more of an extended family situation. The physical settings of kindergarten and playcentre are more different from home and perhaps the need for children to follow rules and behave appropriately becomes more important from the parents' perspective.

Higher value was placed by childcare parents compared to kindergarten parents on the goals of encouraging children to relate with other adults and providing children with warm loving care. Again, these differences could be due to childcare centres being perceived as more of a family-like care situation

Playcentre parents gave higher ratings of importance to the provision of parent education than either kindergarten or childcare parents. Parent education was stated by playcentre representatives at the research meetings to be central to playcentre philosophy and this difference between the values of parent groups was therefore to be expected. Parents are required to take an introduction to playcentre course after enrolling their child and this experience may have influenced the importance they attached to the goal of providing parent education.

The close involvement of parents in playcentres could explain why the staff at playcentres compared to other groups of staff placed less value on the goal of encouraging children's independence. At the other early childhood groups the roles of parents and staff are more clearly defined and children gaining independence from parents is perhaps perceived to be more important because of this.

On three goals of keeping children entertained, fostering children's compliance with group expectations, and teaching pre-school skills the mean ratings of kohanga staff were higher than kindergarten and childcare staff ratings. It is difficult to draw conclusions about these differences because the kohanga reo staff sample was small with only three respondents. However, the three kohanga reo staff rated these goals a "4" which indicates that they valued group conformity, preparation for school and keeping children entertained.

Differences Between Early Childhood Groups in Quality Criteria Importance

Table 14 shows the quality criteria on which differences in the mean ratings of importance between parents and staff at the different early childhood groups were statistically significant.

Many of the differences between parents in their mean ratings of criteria importance were between kohanga parents and one or more of the other parent groups. Kohanga parents' mean importance ratings of biculturalism and support of family values and customs were significantly higher than other parents. As compared to childcare and kindergarten parents, kohanga parents' mean importance ratings of a home-like pleasant atmosphere, qualified staff and group size were significantly lower. The difference in values about qualified staff is easily understood because of the emphasis placed on staff ability to teach te reo rather than on a formal early childhood qualification in Te Kohanga Reo. Less easy to understand are the differences on the criteria of atmosphere and group size. Whanau (family) involvement is encouraged in kohanga reo and a small group size would be expected to encourage greater inter-personal communication than a large group size. On the other hand, large group size would be conducive to children learning how to get along as members of a group. Non-excessive punishment received a lower rating of importance by kohanga parents compared to childcare parents. This difference could also be related to the cultural values held by the parent

groups, as research has shown ethnic differences between parents regarding behavioural expectations of children (Powell, 1989).

TABLE 14.

Differences between the Early Childhood Groups on Ratings of Quality Criteria Importance

	Kindergarten		Childcare		Playcentre		Te Kohanga		Significance	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	p =	Scheffe' *
PARENTS RATINGS										
Peer group stability	3.06	.84	3.46	.69	3.12	.77	3.17	.84	.02	C > K
Outings and excursions	3.03	.89	3.43	.72	3.04	.72	3.59	.67	.01	C > K
Home-visiting	2.22	1.00	1.30	.51	1.28	.65	1.73	.91	.00	K > C, P
Professionalism	3.48	.74	3.17	1.00	2.92	.95	2.67	1.23	.00	K > T, P
Provisions for staff	3.61	.59	3.72	.50	2.68	.95	3.25	1.06	.00	K, C > P
Group size	3.79	.41	3.85	.36	3.56	.58	3.25	.97	.00	K, C > T
Physical needs are met	3.59	.61	3.82	.26	3.46	.65	3.92	.29	.00	C > P, K
Non-excessive punishment	3.72	.64	3.82	.55	3.68	.80	3.17	1.34	.04	C > T
Pleasant atmosphere	3.77	.44	3.87	.39	3.69	.47	3.33	.78	.00	C, K > T
Written programme schedule	2.64	1.06	2.56	.92	2.00	.91	2.75	1.06	.03	T > P
Biculturalism promoted	2.69	.98	2.79	1.00	2.72	1.02	3.75	.62	.01	T > K, C, P
Support family values	3.02	.92	3.35	.68	2.96	.96	3.83	.39	.00	T > K, P
Qualified staff	3.67	.64	3.47	.66	3.40	.71	2.83	1.27	.00	C, K > T
Good staff leadership	3.76	.47	3.76	.47	3.77	.65	3.09	.94	.00	K, C, P > T
STAFF RATINGS										
Home-visiting	3.13	.84	1.88	.78	2.00	.82	4.00	.00	.00	K > C
Staff join children in play	2.25	1.39	4.00	.00	4.00	.00	4.00	.00	.00	C, P, T > K
Staff team-work approach	4.00	.00	4.00	.00	3.50	.58	4.00	.00	.00	K, C, T > P
Physical needs are met	4.00	.00	3.94	.24	3.25	.96	4.00	.00	.01	K, C > P
Children's hygiene habits	4.00	.00	4.00	.00	3.50	.58	4.00	.00	.00	K, C, T > P
Written schedule	3.57	.79	3.17	.89	1.75	1.50	0.00	.00	.01	K, C > P
Balance child/staff activities	3.63	.52	3.94	.24	4.00	.00	4.00	.00	.00	P > K
Indoor/outdoor activities	4.00	.00	3.89	.32	2.50	1.29	4.00	.00	.00	C, K, T > P
Different group sized activities	4.00	.00	3.94	.24	3.50	.58	4.00	.00	.02	C, K > P
Meet for programme planning	4.00	.00	3.94	.24	3.00	.82	Did not ask		.00	K, C > P
Good staff leadership	4.00	.00	4.00	.00	3.50	.58	4.00	.00	.00	K, C > P
Provisions for staff	3.50	1.07	4.00	.00	2.00	1.41	4.00	.00	.00	K, C, T > P
Programme evaluation	4.00	.00	3.89	.32	2.75	.96	4.00	.00	.00	K, C, T > P

* K = Kindergarten, C = Childcare, P = Playcentre, T = Te Kohanga Reo

Compared to childcare and kindergarten parents, playcentre parents rated provision for staff needs as less important. An explanation of this difference is that whereas childcare and kindergarten staff have their own union and identity as staff who have needs, playcentre parents are counted as part of the staffing ratio when they are rostered to assist at their playcentre.

Higher ratings of some quality criteria by childcare parents could be because of the longer time during the day that children tend to spend in a childcare centre. Peer group stability and taking children on outings and excursions were rated higher in importance by childcare parents than kindergarten parents. Meeting children's physical needs was more important to parents in childcare than in kindergarten or playcentre.

Staff professionalism was more important to kindergarten parents than to either kohanga or playcentre parents. Home-visiting, a practice that existed only within the kindergarten group, was rated higher in importance by kindergarten parents and staff.

The mean rating of kindergarten staff for the importance of joining children in their play was lower than the ratings of the other staff groups. In addition, kindergarten staff rated a balance of child initiated and staff initiated activities in the programme as less important compared to playcentre staff. These differences could be because kindergarten staff have less opportunity to be involved in children's play due to higher child-staff ratios.

A number of quality criteria were less important to playcentre staff than to kindergarten and childcare staff: meeting children's physical needs, a written programme schedule, regular meetings for staff to plan the programme, provision of activities for different sized groups of children, and good staff leadership. In addition, playcentre staff mean ratings of importance were lower than staff from all three other groups on the quality criteria of: staff work together as a team, provisions for staff needs in the environment, on-going programme evaluation, a balance of indoor activities and outdoor activities, and children's personal hygiene. These findings suggest that differences in perspectives on the important indicators of good-quality are probably greatest between playcentre staff and the other groups.

Differences to the Experts' View on Quality Criteria

As explained in chapter three questionnaires were distributed to "experts" throughout New Zealand to identify the "experts" view on quality and to enable comparisons with the views of parents and staff from Otago early childhood centres. The data on the quality criteria for which experts' mean ratings of importance were significantly different to parents and staff is presented in Table 15.

TABLE 15.

Differences between Experts, Staff and Parents in Ratings of Quality Criteria

QUALITY CRITERIA	Experts		Staff		Parents		Significance	
	Mean	SD	Mean	SD	Mean	SD	p =	Scheffe' *
1. Child progress/activity reports	3.63	.53	3.44	.80	3.30	.80	.03	E > P
2. Parents and families welcomed	3.98	.15	3.94	.25	3.73	.51	.00	E > P
3. Provisions for special needs	3.89	.31	3.79	.41	3.53	.78	.00	E > P
4. Parents join in decision-making	3.75	.44	3.72	.52	3.45	.72	.00	E > P
5. Balance of indoor-outdoor activities	3.89	.31	3.75	.67	3.68	.53	.03	E > P
6. Formative programme evaluation	3.81	.49	3.77	.56	3.50	.65	.00	E > P
7. Written programme schedule	3.07	.92	3.07	1.03	2.55	1.02	.01	S, E > P
8. Developmentally appropriate activities	4.00	.00	3.97	.18	3.79	.41	.00	S, E > P
9. High ratio of staff to children	3.94	.25	3.84	.37	3.42	.78	.00	S, E > P
10. Biculturalism promoted	3.92	.31	3.71	.64	2.77	1.00	.00	S, E > P
11. Cultural awareness promoted	3.72	.45	3.75	.76	3.10	.84	.00	S, E > P
12. Parent contact encouraged	3.87	.34	3.94	.25	3.52	.62	.00	S, E > P
13. Parent-staff partnership	3.87	.34	3.91	.30	3.42	.79	.00	S, E > P
14. Family background differences are taken into account in the programme	3.85	.42	3.58	.72	3.12	.81	.00	S, E > P
15. Parents told about philosophy/practices	3.79	.42	3.77	.43	3.41	.70	.00	S, E > P
16. Parent education	3.49	.69	3.58	.56	2.61	.98	.00	S, E > P
17. Staff support family values	3.59	.83	3.72	.46	3.14	.87	.00	S, E > P
18. Provisions for parents	3.23	.66	3.32	.79	2.22	1.02	.00	S, E > P
19. Home-like pleasant atmosphere	3.55	.69	3.97	.18	3.76	.47	.00	P, S > E
20. Clean building, facilities, toys	3.57	.58	3.88	.34	3.80	.42	.00	P, S > E
21. Personal hygiene reinforced	3.36	.67	3.94	.25	3.75	.48	.00	P, S > E
22. Support community involvement	3.02	.68	3.47	.57	3.26	.76	.02	S > E
23. Clear pathways between activities	3.23	.70	3.78	.42	3.30	.71	.00	S > P, E
24. Regular outings and excursions	3.11	.79	3.75	.51	3.16	.84	.00	S > P, E
25. Stable peer group	2.89	.67	3.81	.40	3.17	.81	.00	S > P, E

* S = Staff, P = Parent, E = Expert

One puzzling result is the comparatively low rating by experts on the importance of peer-group stability because in the research literature this is a recognised indicator of quality (Smith & Swain, 1988). It could be that in comparison with other quality criteria, experts thought this was one of the least important criteria and rated it accordingly.

Table 15 shows that on six criteria (Nos. 1 to 6) experts' mean ratings of importance were significantly higher than parents. The statistics suggest that parents in contrast to experts, felt that programme evaluation and reporting of children's progress and activities were not very important practices for ensuring quality. Integration of children with special needs was not as important for parents as it was for experts. A balance of indoor and outdoor activities was rated as less important by parents than experts. Perhaps parents felt that if their child was provided with limited opportunity for one type of play or their child preferred either the indoor or outdoor type of activities provided at the centre, then they could compensate for this at home.

What experts viewed to be important for parents (and their children) parents gave less importance to. Parents' ratings of the quality criteria of parents and families being made to feel welcome and opportunities for parents to participate in the making of decisions at their centre were lower than the ratings of experts.

Most statistically significant pair-wise differences were between the staff and expert groups and the parent group (Criteria Nos. 7 to 18). This suggests that staff, because of their training and experience, are more similar to experts than parents in their values about the importance of quality criteria. The data reinforces other data reported in this chapter on differences between parent and staff values on the issues of biculturalism, promotion of cultural awareness, parent-staff relationships and parent involvement. These differences have practical implications for centre managers and staff who in order to meet the Ministry's requirement for charter development must consult with parents about issues of equity, the Treaty of Waitangi and relationships with parents and families.

Experts' ratings were significantly lower than both parents and staff ratings on the importance of a home-like pleasant atmosphere, a clean environment, and children's personal hygiene. Experts rated community involvement as less important than staff. On three more criteria experts' and parents' ratings were significantly lower than staff (Nos. 23 to 25). It seems that ratings of quality criteria may be influenced by the extent to which people are participating in the early childhood settings. For example, helping children learn good personal hygiene is likely to be of greater importance to parents and staff than to experts who do not see the day to day habits of children. Another example is that staff placed a greater importance on clear pathways than experts. This is probably because staff wish to avoid continually picking up and shifting things or lifting children over barriers and objects.

Perceptions of Quality

This section looks at parent and staff perceptions of the quality of their centres for the reason that they are the key parties in developing the "practical form" of educare (Lassbo, 1990a). How they regard their early childhood centre is influenced by experience and values. Their view on the quality of educare is as important as that of the observer or researcher (Balageur, 1991; Pence, 1992; Smith, 1992).

What Parents and Staff Liked about their Centre

In describing what they liked best about their centre the majority of parents mentioned one or more features of the programme (n = 170, 76.2% parents). Amongst these parents the programme feature most frequently referred to was the large number of toys, equipment and resources providing children with lots of things to do (n = 44, 19.7%).

Many parents also wrote that they were pleased their child was happy and well cared for (n = 156, 70% parents), and that the staff were really good either as people or because of the type of work they did (n = 141, 63.2% parents). What defined a "good" staff member from the parent's perspective is reflected in the following selection of quotes:

Most important are the staff themselves. Their attitudes and relationships with the children make or break a centre (Centre F).

The staff are very good with the children. They help them to get involved with things that I haven't always got the time for (Centre E).

I'm most happy about the fact we have a long-term supervisor who is most confident and able to run a varied and fun place (Centre B).

One-fifth of parents especially liked the atmosphere at their centre (n = 45, 20.2%). They described their centre as being a warm, happy, or relaxed place for children or adults. For example two parents wrote:

There is a very friendly, relaxed atmosphere - the children are made to feel wanted and the staff seem to encounter few discipline problems (Centre D).

There is a nice feeling of people looking after each other there (Centre K).

These findings are similar to those of Swain and Swain (1982) who asked parents what they liked about their childcare centre. Over three-quarters of the forty-two families in their sample made reference to the "warm", "caring", "friendly" staff, and the atmosphere being "family-like", "friendly" and "pleasant". Over half commented on aspects of the programme, being "organised", "well-structured" and "stimulating". As in Swain and Swain's (1982) study, most parents in this study did not focus on aspects of centre quality which are argued in the literature to be critical, for example trained staff and good staff-child ratios. It seems that the most likely conclusion is that "warmth beats training!" (Swain & Swain, 1982, p. 34).

Kohanga parents listed some additional aspects they liked about their type of centre which were not mentioned by parents at the other early childhood groups. Two parents at Centre J were pleased that their kohanga was marae based and one wrote that it was special because her kaumatua (ancestors) were buried in the grounds. One parent at Centre J praised the use of natural resources in children's play activities. Parents at both centres ($n = 3$ at Centre J, and $n = 4$ at Centre K) were pleased that at their centre children learnt Maori language, songs and about their culture.

Staff were more prolific than parents in the number of features they referred to because in addition to the features mentioned by parents they also mentioned employment related features and aspects to do with their physical working conditions. Their responses suggested that personal satisfaction was very important. For example compared with parents' responses, only fifteen staff (47%) referred to the kind of programme provided for children. This supports Maier's (1979) claim that staff need to experience good working conditions because their ability to provide good quality childcare can be affected by the care they receive.

The opportunity to form relationships and attachments with children was mentioned by one quarter of the staff ($n = 8$, 25%). While this was perceived to be an advantage of working with children versus other types of occupation, such a statement supports the social belief that caring for children is something that is natural for women to do (Cook, 1982; New & David, 1985). This has implications for whether early childhood work is viewed as a skilled occupation and what financial remuneration staff receive.

Some staff mentioned that they liked being able to relate well with their colleagues ($n = 12$, 37.5%). Some staff also liked the spirit of teamwork at their centre ($n = 12$, 37.5%). Interpersonal relationships were especially important amongst the kindergarten teachers as seven out of eight specifically stated that they got along well with their colleagues. Being able to relate with colleagues was important to staff because the early childhood setting creates a unique interpersonal situation (Veale, 1991). Research suggests that when staff relate well with one another their teamwork tends to be stronger and their job satisfaction is likely to be higher (Maslach & Pines, 1977).

Eight staff (25%) praised their centre's management team or committee for the effort they put into their role or their particular management skills. For example, a head kindergarten teacher wrote that her committee was "hard working" (Centre F), and a recently appointed playcentre supervisor had been to one parent council meeting and was "impressed" (Centre A). Jorde-Bloom (1986) argues that administrators need to foster good relationships between staff through collaboration and shared decision-making and by showing recognition of their individual efforts. The quality of staff leadership at Centre I was either especially important to its staff or superior in contrast to other centres because only staff at Centre I mentioned that they liked the leadership style of their head staff member.

What they Liked Least about their Centre

Every parent especially liked something about their centre but forty-three percent ($n = 96$) expressed no dislikes. Swain and Swain (1982) likewise found that less than half (48%) of the parents at a Hamilton childcare centre mentioned dislikes when they were asked. This suggested to the researchers that parents were satisfied with their centre and had more praise than criticism for it. Some further explanations could be that parents are more likely to say they are pleased because they do not know of other alternatives, or they fear admitting that their centre is in some way unsatisfactory for themselves or their child (Pence and Goelman, 1987).

The negative comments made by parents were specific to their attitudes, experiences and the characteristics of their own centre. Some of their dislikes related to centre policies, for example, a parent wrote that she was annoyed about being excluded from helping out on excursions because her younger child was not allowed to accompany her and baby-sitters were costly. Other negative comments related to the social dynamics of the early childhood setting, including bullying amongst children, inconsistency between staff in how they managed child behaviour, staff inattention to children when other adults visit or people pass-by on the street, and tension or disharmony between committee members. The standard of physical care was also commented on, for example, the difficulty of leaving one's child at the centre when no staff were free to settle the child; infrequent changing of nappies, insufficient or poor quality food, poor facilities and supervision arrangements for sleep, and problems in the physical environment such as too many corners for children to hide around or overcrowding due to lack of space.

In reading parents' written responses I noticed that only the parents at Centre C made similar negative comments and these were about one staff member ("Joan") or general references to staffing. To quote some parents:

I wish there was more time spent communicating with the children instead of talking to parents. I have noticed children trying to get the attention of [Joan] but to no avail. It takes a lot for some 3 year olds to speak up and if a teacher isn't attentive it can really hurt a child.

I don't think [Joan] is caring enough or has the patience.

Definite favourites as regards to children amongst staff, especially [Joan].

Saying things in front of children or to the children when a child can take it to heart, eg. what a bad cough, don't come back until it's better.

I also feel that children who are upset at parents leaving, should have time spent with them to help them overcome this, rather than to be sat on a chair and left to cry - or to be screamed at to shut-up and stop behaving like a baby.

Parents' comments indicated that Joan was not a source of support, encouragement and physical contact for children (Botkin & Twardosz, 1988). They felt that Joan did not have sufficient sensitivity to children's needs (Almy, 1981; Lero & Kyle, 1985). No negative comments about a second staff member, who was the head teacher, were made.

At each of the other ten centres, parents did not express similar concerns apart from general criticisms about the low staff-child ratio at three of the four kindergartens, for example:

There is no way two teachers can cope with forty preschoolers effectively (Centre D).

Given current government funding and the teacher pupil ratio - all things are not what they could be (Centre C).

In looking specifically at the criticisms made by kohanga parents four out of twelve parent respondents expressed concerns about staff knowledge of child development and education. For example, one parent suggested that staff should be trained so they:

... know how long children can sit still and learn in a formal way (Centre J)

The style of teaching, with an emphasis on rote learning and formal approaches, and whether it is only important for staff to be fluent speakers and not to be trained in early education are two key issues in the Kohanga Reo movement (Tawhiwhirangi, 1989; Tu Tangata, 1986).

The majority of staff were unhappy with one or more aspects of their centre ($n = 28$, 87%). Some general concerns were expressed about the need for their centre to have more money ($n = 8$, 25%) and a better staff-child ratio ($n = 4$, 12.5%). From a political perspective funding, staff training, and staffing ratios comprise a formula for the promotion and assurance of quality standards in centres (Gardiner, 1991).

More physical or social support was wanted by four staff (12.5%). Meade (1991) has argued the importance of this, stating that the development of children is facilitated when staff are "nested" in a support system including administrative support and personnel who support the programme.

Individual staff at the playcentres and childcare centres either wanted more equipment or more age-appropriate equipment and resources. This need appeared to be because of lack of finances or management spending priorities.

Insufficient room space or alternatively too great an area to supervise was mentioned by staff at Centres A, D, F, and I. Prescott (1981) suggests that problems of spatial and population density in a centre are entangled with the shape and organisation of the play areas, the amount of play equipment able to be offered, and how staff think space can be used most effectively. There also seems to be another issue implicit in staff comments, and that is that problems such as noise from crowding in small spaces or staff exhaustion from trying to keep track of children in large spaces affects them personally.

The low level of education and the unprofessional attitudes of other staff worried five staff, all of whom were trained childcare workers working with some untrained colleagues. This suggests that trained staff perceive that an early childhood qualification makes a difference to people's attitude and ability to work in an early childhood centre environment.

Ratings of Centre Quality

Parents and staff were asked in their questionnaires to rate how well they believed their centre met different quality criteria. The rating scale used was "3" met, "2" partially met and "1" not met. Table 16 shows only the quality criteria which parents and staff rated centres as not performing well on. In reporting the data I have made an arbitrary decision that a mean score of 2.50 or less on any of the quality criteria indicates that there is need for improvement in performance to meet parent and staff expectations.

TABLE 16.

Quality Criteria Not Fully met by Centres

QUALITY CRITERIA	Parents		Staff		Significance	
	Mean	SD	Mean	SD	T-Value	p =
1. Staff home-visit families	1.84	.91	1.59	.83	1.54	.13
2. Provisions for parents in environment	2.04	.76	1.93	.74	0.77	.45
3. Written programme schedule	2.27	.77	2.18	.77	0.57	.57
4. Parent education provided	2.18	.77	2.28	.65	-0.72	.47
5. Child progress/activity home reports	2.24	.75	2.23	.63	0.07	.94
6. Provision for sick children	2.39	.75	2.21	.77	1.19	.24
7. Differences in children's home background recognised in the programme	2.47	.65	2.37	.72	0.74	.46
8. Biculturalism promoted	2.46	.72	2.07	.70	2.77	.01 *
9. Community members involved	2.49	.69	2.17	.75	2.19	.03 *
10. Parents informed about philosophy etc	2.50	.66	2.48	.58	0.17	.87
11. High ratio staff to children	2.48	.70	2.60	.62	-1.01	.32
12. Notification of infections/diseases	2.53	.70	2.34	.72	1.27	.21
13. Cultural awareness promoted	2.57	.60	2.20	.71	2.69	.01 *
14. Staff have parenthood experience	2.58	.64	2.11	.83	2.85	.01 *
15. Staff carry out formative evaluations	2.64	.62	2.38	.73	1.77	.09
16. Family values and customs supported	2.68	.54	2.37	.62	2.67	.01 *
17. Outside professional assistance used	2.69	.55	2.40	.62	2.38	.02 *
18. Stability in staffing	2.70	.54	2.34	.61	2.96	.01 *
19. Refresher training	2.72	.50	2.29	.74	3.12	.01 *
20. Parents participate in decision-making	2.82	.38	2.47	.57	3.32	.01 *

* $p < .05$

The quality criteria which both parents and staff rated their centres as being poorest on were: home-visiting, provisions for parents in the environment, a written programme schedule, parent education, parents are informed about children's activities and progress, provisions for the care of children when they are sick, the programme takes into account differences in children's home background, biculturalism, and community involvement.

Most of the criteria relate to home-centre relations and parent involvement. The low ratings suggest that either the criteria were not being adequately met or they were being inappropriately met in centres. Perhaps staff were working hard in the area of home-centre relationships but the outcomes were not satisfactory from the perspectives of parents and staff. It seems that more attention could be given in centres and by parents to the links between home and centre settings for children (Bronfenbrenner, 1979). In chapter five observation data on the topic of staff-parent relations and continuity for children is presented.

Only on the quality criteria of staff-child ratio and parent education were the parents' mean ratings lower than those of the staff, but the differences were not found to be significant. On a number of criteria (Nos. 8, 9, 13, 14, 16, 17, 18, 19, 20) the differences between parents' and staff ratings of their centres were significant, with parents awarding higher ratings than staff. This could suggest that staff were harder than parents in their judgments of centre quality. Alternatively this finding might suggest that where parents lacked knowledge of centre practices and provisions they tended to award higher ratings.

A possibility of incongruity between parents' and staff perceptions was raised by a centre representative at a research meeting when she talked about her committee's consultation efforts with parents:

Silly comments like we had nowhere to welcome them or nowhere for them to sit. Well we've got a sofa and we've got various other things. These are comments from parents who are ignorant of what we've obviously got. Like the outdoor area, "you could have some grass", well we've got grass (Centre C).

On some criteria (Nos. 8, 9, 13, 16, 20) the explanation that parents were less critical than staff seems to be more likely. Parent knowledge of the extent to which three criteria (Nos. 8, 9, 13) were practised is likely to have been influenced by how much of the daily programme they had observed. On the other criteria (Nos. 14, 17, 18, 19) parents may have had insufficient information on which to make a judgement. For example it is probable that most parents would not know or at least be unsure about staff contacts with outside professionals and agencies.

Chapter Summary

Goals, Values and Definitions of Quality

The programme goals which parents and staff rated high in importance were about promotion of children's psycho-social, language and physical development. Also important were a range of other goals including support of children's individual learning needs, partnership and parent support, children learning to relate with other adults, and aesthetic, intellectual, and moral development. Of minimal importance were goals of supporting children's own culture and promoting their awareness of other cultures, parent education, keeping children entertained, fostering children's compliance with group expectations, teaching pre-school skills and spiritual development.

Parent and staff descriptions of a good-quality centre reflected the goals they valued. Both groups commented most on features of the social-emotional climate, staffing, programme structure, the play environment, and the physical environment (including health and safety). The features most frequently mentioned by parents were that staff like or love children, a happy, warm, friendly or homely atmosphere and children's eagerness or happiness in attending the centre. Staff also frequently referred to the importance of atmosphere and that activities should be appropriate for children.

Many quality criteria were rated by parents and staff as important. Parents' mean ratings of importance on thirty-one out of fifty-six quality criteria was 3.5 or higher and staff mean ratings were similarly high on forty-nine quality criteria. Every staff member and nearly all parents gave a rating of "4" (very important) to the criterion of staff are responsive to children. The next most important criteria for both groups were: staff are warm and caring people, staff care about/love children, child supervision, staff work as a team, toys and equipment are safe and maintained, activities are developmentally appropriate, the building, facilities, and toys are clean, there is a home-like pleasant atmosphere" and "a variety of play activities. Criteria that had little importance from the perspectives of staff and parents were a written programme schedule, staff who are parents, provisions for parents needs at the centre, and home-visiting by staff.

Parent and staff combined mean ratings of the importance of quality criteria indicate that their views on the most important criteria of quality differed from those contained in the early childhood literature. For example, qualified staff was the twenty-seventh most important indicator of quality and staff-child ratio was thirty-third in importance.

Differences in Values

On six goals the differences between parent and staff mean ratings of importance were significant and the size of the differences between the sets of mean ratings were large (.50 or greater): parent education, support of children's language and culture, promotion of cultural awareness, parent support and friendship, and partnership with parents and keeping children entertained. On the goal of keeping children entertained the parents' mean rating was higher than the staff mean rating. On the remaining five goals staff mean ratings were higher than parents.

Looking at parent and staff ratings of the importance of quality criteria, parents again placed less value than staff on the importance of home-centre relationships and children's cultural development. A pressing issue seems to be how staff interact with parents and encourage their participation because as Bronfenbrenner (1979) argues, reciprocal and warm interconnections between home and centre settings are vital for positive child development.

Data on differences between the ratings of qualified staff and staff without an early childhood qualification suggests that training influences staff values. For example, qualified staff placed less importance on the goal of keeping children entertained whereas staff who were not qualified viewed this as more important. A number of significant differences were identified between each group's mean ratings of quality criteria importance but it was not possible to draw conclusions from the data because of the small number of unqualified staff in the sample, all of whom awarded a rating of "4" to the criteria on which significant differences were identified.

Parents whose income was higher (\$30,000 or more) awarded higher ratings of importance to the programme goals of promotion of motor-skill development and cultural awareness. Higher income parents awarded higher ratings of importance to the quality criteria of qualified staff, group size and staff-child ratio. Low income parents gave higher ratings of importance to the goals of fostering children's compliance, keeping them entertained, and parent education. Their ratings of quality criteria were higher than those of high income parents on: staff should be parents, staff care about children, peer-group stability, and the programme supports differences in children's family background.

The parents who were in paid employment or went to a tertiary institution gave lower ratings of importance to the programme goals of keeping children entertained and fostering children's compliance, compared with the parents who stayed at home, parent-helped at their centre or engaged in leisure activities. On eleven quality criteria the mean ratings of employed or student parents were higher than other parents. The results suggest that parents who are less available for their children place higher value on the care needs of their child, a stable peer-group, support of family values and needs, outings and excursions, and a bicultural and non-sexist programme.

On some quality criteria differences were identified between parents' mean importance ratings based on their child's ethnicity. For example, parents with Pakeha children rated the importance of non-excessive punishment and qualified staff higher in importance than parents with children from other

ethnic groups. No differences based on ethnicity were found between parents' ratings of programme goals.

Members of each early childhood group identified features that made their service distinctive in quality. The childcare service appeared to be most flexible for parents' childcare needs and staff are noted for their diversity in training and backgrounds. Another difference was the closeness of relationships between staff, children and parents because of the extended period of time children spend in their centres compared to the other early childhood groups. Playcentres and kindergartens contrasted in terms of emphasis on staff professionalism (providing a child-centered service) and operation as a parent cooperative (providing a parent-centered service). Kohanga Reo contrasted with the other three early childhood groups in the emphasis placed on language learning (te reo Maori) and whanau/cultural development.

These differences in group philosophy were reflected in parent and staff ratings of the importance of various programme goals and quality criteria. For example, kohanga parents' mean rating of the goal of promoting children's own culture and language was significantly higher than the mean ratings of the other groups of parents. Kohanga parents also gave more importance to biculturalism and support of family values and customs.

A number of quality criteria were less important to playcentre staff than to kindergarten and childcare staff. It is difficult to see how differences in group philosophy could explain all of the identified differences between staff values. A possible explanation could be that because there is less distinction between parents and staff in playcentres, parents are seen to maintain responsibilities for their child rather than passing their child on to staff, for example in the areas of children's personal hygiene and physical needs. Two differences between the ratings of kindergarten staff and other groups of staff suggest that their values were influenced by the conditions they worked in rather than by any difference in group philosophy. It could be that due to the higher child-staff ratios in kindergartens, programme structure and staff involvement in children's play has to differ from the other early childhood groups who have smaller group size and higher staff-child ratios.

Differences to the Experts' View on Quality Criteria

While staff and experts were mostly alike in their views of the relative importance of various quality criteria, parents and experts differed in the value they attached to a number of criteria. This suggests that staff, because of their training and experience, are more similar to experts in their views than parents.

The data on differences between experts' and parents' ratings of quality criteria reinforced other data reported in the chapter on parents placing less value on parent-staff relationships and cultural criteria. Parents, compared to experts, rated provisions for special needs children, a balance of indoor and outdoor activities, and regular programme evaluation as less important.

Experts' ratings of importance were significantly lower than both parents and staff on the criteria of a home-like pleasant atmosphere, a clean environment, and teaching children personal hygiene. Experts' and parents' ratings were significantly lower than staff ratings on some criteria which had implications for the level of stress staff might experience in the workplace. These criteria were clear pathways between activity areas, regular outings and excursions, and a stable peer-group. The low mean rating of experts on the importance of peer-group stability suggests that they viewed this as either a less relevant indicator of quality in New Zealand centres or not as important as a number of other criteria.

Perceptions of Centre Quality

Parents' main likes in their own, unprompted, words were the programme (especially the number of toys and activities for children to do), that their child was well cared for and happy about being at the centre, and that staff were good with their child. Less than half the parent sample mentioned aspects which they disliked (43%). The negative comments made by parents were specific to their own values, experiences, and centre. An exception was critical comments made about a teacher at one kindergarten, which indicated that parents are most concerned when they perceive that those caring for their child are not warm and responsive to their child.

The social and organisational conditions of work was what stood out most for staff in responding to the question of what they liked best about their centre. Most of their likes centered on relationships with colleagues, attachments with children, and their centre management team or committee. Most staff mentioned one or more aspects that they disliked (87%), including the centre not having sufficient money for spending or increasing staff wages, a low staff-child ratio, and not enough support from parents and committee members. These concerns are partly due to the conflict between Government requirements on staff-child ratios and the separate issue of Government funding constraints on staff numbers (Gardiner, 1991). Comments about a wish for better support from committee members and/or parents in general suggests that staff sometimes feel taken-for-granted and would like their needs acknowledged (Maier, 1979; Smith & Swain, 1988).

While the parents' perspective on what they liked most and least about their centre focussed on their child's care and experiences and interactions with staff, the staff viewed quality more in terms of satisfying conditions of work including their relationships with other staff and children. It seems that parents and staff have distinct perspectives on quality due to their own interests. Parents' comments, both negative and positive, showed that they were "hot" about their child (David, 1992), while staff comments showed that how they felt about their work was most salient in their minds.

Parent and staff mean ratings of how well centres met a number of home-centre relationship criteria indicated that both groups viewed centre quality to be particularly low in this area. Other criteria which the parent and staff mean ratings were both below 2.5 included: a written programme schedule, provisions for sick children, recognition of children's individual differences in the programme, biculturalism, and community involvement. There was variation amongst parent and staff mean ratings of centre quality on some criteria, suggesting either that parents' perceptions are influenced by their

knowledge and level of participation in the programme or that parents and staff differ in what they notice and how they judge their centre.

Chapter Five

PRACTICES OF QUALITY

In this chapter data on centre practices, including observation ratings and feedback from staff about the observation ratings is presented. The observation data is contrasted with parent and staff importance ratings to see in which areas there was congruence or incongruence between practices and values.

In the methodology chapter it was explained that the tool for observing and forming conclusions about centre quality was the Quality Review Checklist. Implementation of the QRC involved at least one day of observation in each centre, interviews with five parents/caregivers and staff, and discussion about the observational ratings with head staff members.

The kohanga reo were not involved in this part of the study. A trial of the QRC showed that it would not be acceptable according to requirements for doing research on Maori people and in Maori settings (Bishop & Glynn, 1992), and that it could potentially harm the relationship between the researchers (Karina and myself) and the whanau of the kohanga reo.

The Quality of Centres

Table 17 presents each centre's Quality Review Checklist rating on quality criteria under the headings of: social-emotional, physical health and safety, programme, relationships with parents and community, organisational-structural, and equity-values. The data represent what that Trisch and I agreed on after working as independent observers in the settings (see chapter three). The rating scale on the QRC was "1" not met, "2" partially met, "3" mostly met, and "4" fully met.

TABLE 17.

Observation Ratings

	Centres										
SOCIAL-EMOTIONAL	A	B	C	D	E	F	G	H	I	Mean	SD
1. Staff care about children	4	4	3	4	4	4	4	4	4	3.89	.33
2. Settling-in process	4	4	3	4	4	4	4	4	4	3.89	.33
3. Behaviour management	3	4	3	4	3	4	4	4	3	3.56	.53
4. Pleasant atmosphere	3	4	4	4	4	4	4	3	3	3.72	.25
5. Staff warm and caring people	4	4	3	4	4	4	4	4	4	3.89	.33
HEALTH AND SAFETY											
6. Children's physical needs	4	3	3	3	3	2	4	4	2	3.22	.67
7. Clear pathways	3	4	4	4	4	4	4	4	4	3.89	.33
8. Safe toys, equipment etc	3	4	4	4	4	4	4	2	4	3.67	.71
9. Children supervised	3	4	4	4	4	3	4	3	4	3.67	.50
10. Clean building, facilities, etc	4	4	4	4	4	3	4	3	4	3.78	.44
11. Personal hygiene taught	3	1	3	4	3	1	3	3	4	2.78	1.09
12. Provision for sick children	3	4	4	2	1	3	3	3	3	2.89	.93
13. Notification of infections	1	4	2	4	4	3	4	4	4	3.33	1.12
14. Staff health and hygiene	4	4	3	4	2	2	3	3	3	3.11	.78
PROGRAMME											
15. Staff responsivity	4	4	3	4	3	4	4	3	4	3.67	.50
16. Staff join in play	4	4	3	4	2	4	2	2	4	3.22	.97
17. Balance child-staff activities	4	4	4	4	4	4	3	2	4	3.66	.71
18. Stimulating activities	4	4	4	4	4	4	3	2	4	3.67	.71
19. Developmentally appropriate activities	4	4	3	4	4	4	3	2	4	3.56	.73
20. Sufficient toys, resources	4	4	4	4	4	4	3	2	4	3.67	.71
21. Different sized group play	4	4	4	4	4	4	4	2	4	3.78	.67
22. Balance indoor-outdoor play	4	4	3	3	4	4	3	2	3	3.33	.71
23. Outings and excursions	3	4	3	3	2	3	4	4	4	3.33	.71
24. Differences in family background recognised	4	3	2	3	3	4	3	2	4	3.11	.78
FAMILY/COMMUNITY											
25. Home-visiting	1	1	4	2	3	2	1	1	1	1.78	1.09
26. Parent contact with centre	4	4	4	4	4	4	4	4	4	4.00	.00
27. Parents, families welcome	4	4	3	4	3	4	3	4	4	3.67	.50
28. Provisions for parents	3	4	3	3	3	3	3	3	2	3.00	.50
29. Child progress/activity reports	4	3	2	2	3	3	4	2	4	3.00	.87
30. Inform about philosophy, etc	4	4	4	3	4	4	4	3	4	3.78	.44
31. Staff-parent partnership	4	4	2	4	3	3	4	3	4	3.44	.72
32. Parents involved in decision-making	4	4	4	4	4	4	4	1	3	3.56	1.01
	A	B	C	D	E	F	G	H	I	Mean	SD
33. Parent education	4	4	4	3	1	4	2	2	3	3.00	1.12

34. Parent friendship, support	4	4	3	4	3	4	4	4	4	3.78	.44
35. Community involvement	4	3	4	3	4	4	4	3	4	3.67	.50
36. Specialists called on/used	3	4	3	4	4	4	4	4	4	3.78	.44
ORGANISATIONAL											
37. Peer group stability	4	4	4	4	4	4	4	4	4	4.00	.00
38. Staff stability	2	2	4	3	4	3	4	3	4	3.22	.83
39. Staff are parents themselves	4	4	3	4	3	3	3	1	3	3.11	.93
40. Staff experience	4	4	4	4	4	4	4	4	4	4.00	.00
41. Qualified staff	3	3	4	4	4	4	3	3	3	3.44	.53
42. High ratio staff to children	4	4	2	3	2	3	3	4	4	3.22	.83
43. Group size is not too big	4	4	3	4	4	3	2	2	4	3.33	.87
44. Written programme schedule	1	1	2	2	4	2	3	3	3	2.33	1.00
45. Meet for programme planning	4	4	4	4	4	4	4	4	4	4.00	.00
46. Evaluate programme	4	4	2	3	4	4	4	3	4	3.56	.73
47. Staff work together as a team	4	4	4	4	4	4	4	4	4	4.00	.00
48. Good staff leadership	4	4	4	4	4	4	4	3	4	3.89	.33
49. Professionalism	3	4	2	4	3	4	4	2	4	3.33	.87
50. Inservice courses	3	4	3	3	4	3	4	1	4	3.22	.97
51. Provisions for staff needs	2	3	3	4	2	4	4	4	4	3.33	.87
EQUITY/VALUES CRITERIA											
52. Provision for special needs	3	4	4	4	4	4	4	4	4	3.89	.33
53. Biculturalism promoted	3	2	2	2	2	2	1	1	3	2.00	.71
54. Cultural awareness promoted	3	3	2	4	1	3	1	1	3	3.33	1.12
55. Non-sexist curriculum	4	4	3	4	4	4	2	3	4	3.56	.73
56. Support family values	4	4	3	4	3	3	3	3	4	3.44	.53

1. Staff Care About Children

All centres, except for Centre C, fully met this criterion. The importance of staff expressions of affection, smiling and support has been demonstrated in research studies (Larsen, 1975; Zanolli et al, 1990). Three of the five parents interviewed at Centre C talked about one teacher being more caring towards the children than the second teacher who was "sometimes detached", "often short with their children" and "inconsistent towards them". Their comments supported researcher observation and led to a decision to award a "3" of mostly met. At Centres G and I this criterion was met to a very high level. Considerable staff-child interaction and display of affection was observed. Botkin and Twardosz's (1988) research has shown that this is related to children making use of and benefiting from the educational opportunities of the programme.

2. Settling-in Process

At only one kindergarten (Centre C) was there a problem with the way new children and parents were introduced to the programme. Some parents at Centre C said that procedures for familiarising children and parents did not exist and they were disadvantaged by not participating in a play-group run by parents for children too young to be enrolled. Both playcentres met the criterion to a high level because there was a commitment towards settling in both children and parents (Centres A and B). As Smith and Swain (1988) have stated, preparing children for entry into a group situation requires that staff and parents cooperate with the utmost care. The playcentres had an Information Officer responsible for introducing individual parents to the centre. Other centres used a variety of ways to ensure a sensitive settling-in process. For example, at Centre G a staff member was observed lifting a child up to the window to wave good-bye to her mother. At Centre H staff were assigned personal

responsibility for the care of new children from their first day. Parents at Centre D were asked to arrive early to pick up their child during the first week of enrolment.

3. Behaviour Management

At all centres, staff used positive methods of behaviour management, for example praise for good behaviour and redirection. However, not all centres were able to be rated a "4" on this criterion. At Centre C time-out was used as the main form of behaviour management. At Centre E the teachers did not feel they needed to discuss behaviour management with parents. Centre A had a child with a recognised behaviour problem who frequently received staff attention through being disruptive. The technique used of redirection and remaining with the child after she misbehaved, reinforced her behaviour and provided a poor example to others on how to get adult attention. If children learn that they can get their own way through negative behaviour then this positively reinforced behaviour will be hard to eliminate (Caldwell, 1974). At Centre I one method of behaviour management was relied upon which did not seem to be appropriate to every child in every situation: staff talk through a behaviour problem with the particular child concerned. For example, I observed most of the children at the centre being held up from going for a walk because a child was being disruptive and a staff member took this child aside to talk with her. As soon as the child was returned to the waiting line of children, she began to jostle her peers and grizzle for staff attention which she again received while other children waited and looked on. A supervisor at Centre B, which fully met the criterion, mentioned that sometimes inconsistencies in behaviour management occurred but this was accepted as part of parent education:

As parents are included as staff they are encouraged to use recognised discipline practices. But this can be variable and it is not unreasonable to expect the occasional shout.

4. Atmosphere

At all centres there was an atmosphere of warmth and friendliness, although for various reasons three centres were not rated a "4". There was sometimes a frantic and noisy atmosphere at Centre A when all children were indoors due to cramped space for activities and movement. On the day Trisch and I observed at Centre I there was quite a bit of grizzling and crying amongst the children. At Centre H there was little grizzling and crying but there was also little laughter and few happy, pleasurable sounds. Parents' comments suggested that at two centres, a kindergarten and a playcentre, the atmosphere was very calm, warm and welcoming (Centres B and E). Such an atmosphere has been linked to parents' satisfaction with their centre (Swain & Swain, 1982).

5. Staff are Warm and Caring People

The majority of staff at each of the centres could be described as being warm and caring people. Observational data of staff interactions with children was well supported by parent interview comments about staff. Staff friendliness and sensitivity to the needs of all parents is vital for a staff-parent partnership which in turn affects children's interactions with staff (Kontos & Wells, 1986; Smith & Hubbard, 1988b). However, parents at Centre C made some negative comments about one of their teachers. The teacher was "stand-offish" towards some children and had "favourites" who

received more attention than others. Perhaps the personality of this one teacher might not have been so noticeable to the parents who were interviewed if there had been more than two staff to interact with. The second teacher at Centre C displayed much warmth and a caring approach in her interactions with children and parents. According to Anderson et al. (1981) staff warmth and physically close interactions with children leads to secure and trusting relationships with staff.

6. Children's Physical Needs

At Centre E children's physical needs were met with the exception that children were observed drinking water from the water-play trough. Fresh water could have been made accessible to children at this and other kindergartens. At Centres D, F and B children brought their own snacks and could eat when they wanted, but whether every child had sufficient and nutritious food was questionable. At two kindergartens the inside temperature was cold enough for children, staff, and observers to be wearing jumpers and even coats. At one kindergarten it was warmer outside than inside (Centre C). At the second kindergarten, the cool temperature meant that everyone kept moving about and few children sat for more than a minute or two at table activities (Centre F). At Centre I some children (in the toddlers room and in the over-three-year-olds room) did not have access to toilet facilities without asking staff or being lifted over a door barrier. It should be noted that amongst the submissions on the review of government early childhood policy, one of the main concerns expressed was the appropriateness of government regulations concerning the physical environment and facilities (Ministry of Education, 1991b). The observation evidence suggests that government regulations may not be enough to ensure standards of provision for the physical care of children. For example, other considerations include the cost of heating, problems in the structural design of a centre's building, and the strategies staff use to provide for physical care.

7. Pathways Between Activity Areas

Prescott (1981) reports that clear pathways are important to the safety of outdoor areas and to the prevention of unnecessary chaos and interference in indoor areas. At all centres, except for Centre A, there were clear pathways to enable unrestricted movement around the play areas and activities. At Centre A the cramped indoor conditions limited children's access to activities and by the end of the day materials were cluttered and the environment had a disorganised appearance.

8. Safety of Environment

Across the centres, staff were aware of the importance of safety, for example a teacher at Centre D was observed carefully checking and removing protruding nails from cable reels in the children's junk area. At Centre A a few minor self-induced accidents were observed (Elardo et al., 1987). This was because of differences in the abilities of children to use equipment, for example to balance in walking along a plank. The planks and some other outdoor climbing equipment were not stable enough or fixed securely for the children. Although no accidents were observed at Centre H there were a number of problems in how the outdoor area was used by both toddlers and older children. For example, older children were observed on tricycles speeding around toddlers standing (helplessly still) on a concrete ground surface. Centre H had some potentially dangerous structural features inside its

building. For example there was a large wooden free-standing shelf on carpet in the children's playroom which could have fallen if an older child climbed it to reach for a toy. In research by Howes (1983) the frequency with which staff restricted toddlers' activities was linked to the appropriateness and safety of the physical environment.

9. Supervision

There were problems with child supervision at Centres A, F and H. The parents and supervisors at Centre A were usually careful to ensure that an adult was positioned in areas where children played. However, parent-helpers sometimes gathered inside without realising that no adults were outside. Staff needed to be aware that too many adults in one area can mean less adult-child contact, as adults become engaged in conversation (Meade, 1985a; Weikart et al., 1978). At Centre H a number of instances were observed where a child being attended to in one room, usually the bathroom or the kitchen, was left alone while a staff member checked on children or talked with staff in a different room. Moreover, the supervision arrangements in the outdoor area were not always ideal, with one staff member often supervising up to fourteen children, including toddlers and at least one or more infants in prams while other staff were inside with only a few children or engaged in domestic work (Bredenkamp, 1989). This observation has implications for child safety as well as for children's opportunities to interact with staff. For example, Meade (1985b) claims that the frequency of staff interaction with children is too low in early childhood centres and that some children tend to miss out on staff attention. The large physical size of Centre F meant that more staff were needed to ensure supervision of all areas. There were brief periods of a few minutes when no staff (or adults) were inside because the supervising staff member was called outside to assist another staff member. A large cloak and toilet room at one side of the main playroom could not be supervised unless a teacher was actually in there. The outdoor playground was large and had many separate areas unable to be adequately supervised by only one or two teachers. Centre D also had a large indoor and outdoor area but there were not so many corners and rooms where children could be out of sight and sound as there were at Centre F.

10. Cleanliness of Environment

There was a high standard of cleanliness in the physical environments of the centres, but Centres F and H had some hygiene problems. At Centre F the children were allowed to have their food and drink at a table anytime during session. The table, chairs and surrounding floor become sticky, grubby and unhygienic during session. At Centre H the toys mouthed by toddlers were tidied up and stored by staff at the end of each day. The supervisor said that they cleaned the infants' toys when staff noticed they needed to be cleaned, rather than on a regular basis (which would ensure good hygiene).

11. Child Hygiene

Children's personal hygiene was strongly emphasised and encouraged by staff at Centre I. For example, individual toothbrushes were provided and used by children. Children had their own flannels for washing. In contrast at Centre H a staff member washed each child's hands and face using the same flannel before and after meals. At Centre B the bathroom hand-towels become dirty and

unhygienic during the day. Centre C had no facility for drying hands and no towels available for children in the toilet room. At Centres E and F the staff asked children to wash their hands before eating, but did not supervise or check the older children's hand-washing in the morning session. At Centre G staff washed children's hands in a basin for them before meal and snack times, instead of giving children time and space to do this for themselves. At Centres A, B, C and F staff were not observed talking with children about how to have good personal hygiene, for example the importance of people putting their hand over their mouth when they cough.

12. Provision for Sick Children

Parents and staff rated provisions for the care of sick children as important and yet observations showed that at most centres areas for the isolation and care of sick children were inadequate, procedures for staff to follow were not formalised, and parents often did not have clear information on when it was all right and not all right for them to take their child to centre. Only Centres B and C had an explicit policy on child sickness which parents knew of. Not all centres had adequate provisions for the isolation and care of sick children. Researchers Whitebook and Ginsburg (1983) argue that such provisions are vital to prevent risk of cross-infection. Centres D and E had no quiet comfortable area to isolate a sick child. The childcare centres did not have adequate facilities to care for sick children. The director of Centre H, for example, said that they used the staff room. The director of Centre G said that they had a fold-up stretcher which was brought out if necessary. A lack of provisions and clear policies on what should happen when a child is sick can only place added stress on parents whose work or daily schedule may be disrupted with little warning (Coombe, 1991).

13. Parents Notified about Infectious Diseases

At seven centres parents were notified if any child had a contagious infection or disease, for example, through newsletters, notices, and telephones calls (Centres B, D, E, I, F, G, and H). Most staff also advised parents or asked the public health nurse to explain what to do if their child, for example, had head lice. At Centres A and C there was no systematic way of ensuring that parents knew to watch out for a particular infection or to take certain precautions. Only the parents of children who were noticed to have an infection or disease were informed.

14. Staff Health and Hygiene

A good example from Centre D of staff modelling good health habits included me when I took along some home-made biscuits for the staff morning-tea. A teacher explained that we should not let the children see us with them because the children had been told to bring healthy foods such as apples and yoghurts for morning tea. Ways that this criterion was not met at some other centres included: staff not washing their hands after changing nappies or assisting children to blow their noses, not washing their hands before serving or assisting children with their food, and eating and drinking hot drinks while working with the children. Aronson (1987) says that staff-hand washing practices affect the health of children within the early childhood group setting. Staff at Centres C, E and F mentioned that they felt obliged to go to work when they were unwell, had a cold, or a temperature. But by doing this they risked the spread of infection or becoming sicker themselves (Whitebook & Ginsburg, 1983).

15. Staff are Responsive to Children

Two kindergartens "fully met" this criterion for the reason that there was always at least one adult available to respond, and to be responsive to individual children (Centres D and F). At two other kindergartens the teachers were not always observed to be, or able to be, responsive (Centres C and E). For example, teachers were observed asking children to wait until they were ready to talk with them or to come back in five minutes. Centre H was rated "partially met" because staff spent more time with the infants and toddlers and older children received little attention and staff sometimes discouraged or ignored their social bids. Stallings and Porter (1980) in their study of family daycare report a similar finding - that when infants are present adults spend less time with older children than they would if all children were older.

16. Staff Play With Children

At most centres staff joined in children's play which research by Sylva et al. (1980) has shown this to be beneficial for extending the time children elect to spend in an activity and promoting their learning. Two kindergartens and one childcare centre were not rated a "4" because staff had mainly supervisory and caretaking roles (Centres C, E and G). The staff at Centre H engaged in a lot of child cuddling and rough-and-tumble play rather than supporting children's play initiatives and not letting themselves become the focus of attention (Saracho, 1991).

17. Balance of Child and Staff Initiated Activities

At all except for two centres there was a balance between adult directed activity and free-choice or self-selected activity (Bruner, 1980; Smith & Swain, 1988). At Centres G and H children engaged in social and rough-and-tumble play between routines and staff directed activities. Centre G provided more structured materials and activities for children to choose and engage in self-directed play than Centre H. The environments of both centres could have been better designed to encourage children's involvement in their own purposeful activities. The staff at these centres could have been more active in encouraging and supporting children's own ideas and play.

18. Stimulating/Interesting Play Activities

All centres had stimulating interesting toys, equipment and materials for children's use (see Prescott, 1981; and Smith & Swain, 1988). At Centre H most manipulative activities, books, and soft toys were on shelves and high ledges. Staff left children to help themselves to the toys they put out on the floor and few activities designed to attract their attention and stimulate interest were set up. There was a large range of toys for the younger age-group but not for the older age-group. At Centre G there were interesting activities but not enough resources to ensure daily/weekly/or monthly variety in what was available for children's use.

19. Developmentally Appropriate Activities

Activities were appropriate for the developmental stages and ages of children at six of the nine centres (Bredekamp, 1989; Schweinhart & Weikart, 1985). At Centres C, G and H children were observed doing activities too simple for their age group. At Centre H the three to five year old children did much aimless wandering and when they started an activity the duration of their involvement was usually

brief. Staff did little to facilitate developmentally appropriate play as they were mostly involved in supervision of children's own activity and caring for their physical needs (Bruner, 1980; Saracho, 1991).

20. Sufficient Toys, Equipment and Resources

At the majority of centres there were sufficient toys, equipment, and resources for children's use. Smith and Connolly's (1981) research findings indicate that more equipment is related to children playing in smaller subgroups and doing less crying and thumb sucking. The directors of Centres G and H knew they did not have sufficient equipment and activity materials, and Centre H had considerably less than Centre G. The directors said that their centres did not have the money to buy more equipment and resources. This is an example of a trade-off between the cost, when money could for example be spent on staff wages, and expenditure to improve centre quality (Ruopp & Travers, 1982; Willer, 1990). It may also be an example of a trade-off between standards and trying to obtain some return on investment in the case of Centre H (a privately owned business).

21. Activities for Different Group Sizes

At eight centres most activities fostered small group play and were set up to allow children to choose to be on their own or with a small group of other children. According to Bruner (1980) when children play in pairs some of their most elaborate and intellectually demanding play occurs. The centres also had some large group times for singing or stories usually prior to meal and snack times. The kindergartens had mat-times at the end of most sessions. Centre G had at least two large group activities daily, such as story and singing sessions which all children were required to participate in. The layout and division of space at Centre G was not conducive to small group activity. There were no divisions of floor space in the two playrooms for different activities or for children to have privacy from other children (Prescott, 1981).

22. Balance of Indoor and Outdoor Type Activities

At all centres children had access to indoor and outdoor areas for most of the time (Bredekamp, 1989). Concerned that boys were not participating enough in indoor-type activities the teachers at Centre D had incorporated activities such as easel painting and family play into the outdoor area. The teachers reported that this had not been successful and now they restricted all children's access to the outdoor area for the first half hour of each session. Some centres ensured that children had access to either indoor or outdoor activities during occasions when their access might otherwise be restricted due to the weather or most children and adults being either indoors or outdoors (Centres A, B, E and F). For example, Centre B had a large sheltered veranda that was used on wet days for outside activities such as woodwork. Centre E often had typically inside activities, such as books and tea-party equipment, incorporated into outside activity areas such as the sandpit.

23. Outings and Excursions

Children were taken on regular local outings at least once a fortnight and on two or more major excursions a year at Centres B, I, G and H. Smith and Swain (1988) state that children should be exposed to everyday situations outside of the centre so they can develop an understanding of the

world around them. The staff at Centre E said that children were not taken to the shops or local areas because these were too far away to walk to. An excursion, using cars or buses for transport, was organised once a term but only for the older children in the morning session. At Centres A, D and C the older children were sometimes taken in small groups on short outings and about once a term on an excursion as a whole group, however, the younger children were not taken out. The head teacher at Centre D explained that "a lack of staffing limits our opportunities for spontaneous walks".

24. Differences in Family Background are Taken into Account in the Programme

Centre I had more of an emphasis on shared child-rearing than did the other centres (Smith & Hubbard, 1988a). The staff attempted to find out as much as they could about children's home experiences and parents methods of care (for example, they introduced daily home reports for parents to complete, staff carried out regular written observations of child behaviour, and staff meetings included discussion of individual children and how best to meet their needs). The programmes of Centres A and F were also based on an understanding of children and their family life through child observations and discussions with parents about these (Bredekamp, 1989). At the other centres it was usually left to the parents to tell staff about any requirements for their child. In the kindergartens, the routine of mat-time at the end of most sessions restricted opportunities for parents to talk with teachers on a one-to-one basis at the end of sessions. It was more a case of children fitting into the programme rather than staff seeking to ensure optimal continuity between home and centre settings for every child.

25. Home-Visiting

Despite evidence of the usefulness of home-visits for enhancing family centre relationships (Fox-Barnett & Meyer, 1992), home-visiting was not a common or a frequent practice. As in Renwick's (1989) study, teachers at three kindergartens were uncomfortable about this practice because of negative reactions from parents and other issues such as shortage of time to visit families. Only at Centre C did the teachers attempt to visit every family, and this was usually after a child had been attending afternoon sessions and was about to be moved to the morning session for older children. At Centres D and F home-visits were carried out when the teachers identified a problem that they wished to talk with parents about and to see children's home environment. At Centre E, the teachers visited parents only if parents requested this. Home-visiting was not an accepted practice at the playcentres. The supervisor at Centre A said that parents and supervisors usually got to know each other very well and sometimes visited one another at home on a personal basis. The directors of Centres G and I believed that home-visiting was a good idea for learning about children and families, but problems of staff time and arranging a visiting time that suited parents out of work hours meant that it was impractical. At Centre H the director said that she and her staff were uncomfortable with the idea of home-visiting and had no wish to carry out home-visits.

26. Parent Contact is Encouraged

This criterion was fully met at the centres. Parent contact with the staff at the centre was encouraged in various ways at all of the centres.

27. Parents and Families Welcomed

Most parents who were interviewed felt that staff and centre policies were welcoming of them and other family members. Three of the five parents interviewed at Centre C felt uncomfortable and not accepted within the kindergarten. Yet research evidence suggests that positive staff-parent interactions are vital as parents are then happier with their childcare arrangement, and children notice whether their parents and staff relate well (Phillips & Howes, 1987; Smith, 1980; Smith & Hubbard, 1988b). At Centre E, two parents out of five who were interviewed felt excluded from helping and going on excursions because they were discouraged from taking younger siblings. The director of Centre G said that parents were not usually invited to participate in centre activities because she believed they were too busy to be involved. While this was probably true for most parents, it is advisable to ask parents and to keep them informed of what is happening (Farqua & Labensohn, 1986).

28. Provisions for Parents

At Centre B provisions for parents' needs were provided for, including some comfortable adult-sized seats, access to tea and coffee making facilities, an adult's bathroom, and no problem with parking outside the centre (Harms & Clifford, 1984). At the other centres, parents' needs could have been better provided for. Most centres had no facilities for parents or spaces for parents to rest or meet with other parents.

29. Reports on Child Activities and Progress

Staff should keep parents informed about their child (Smith, 1980; Farqua & Labensohn, 1986) and at Centres A, G and I staff did this in various ways. These included individual discussions with parents when they collected their child, a daily record of children's activities and routines such as sleep patterns, sending notes home with children, and regular meetings with individual parents. At the other centres, apart from occasional chats with parents usually at child drop-off and pick-up times more could have been done to communicate with parents about children's activities and progress. Perhaps some staff believed that they did not need to make a conscious effort to do this. A teacher at Centre C suggested that parents did not always ask for information:

We talk of a child's progress if a parent is interested, but not to all [parents].

30. Parents Informed of Philosophy/Practices

Parents at each centre were given some information about centre policies, staff practices and programme philosophy when their child started. The amount of information, verbal and written, given to parents varied from centre to centre. Centres D and H did not have a copy of their draft charter displayed for parents and no written literature had been prepared for parents information. According to Rosenthal (1991) staff communication about their philosophy can help to prevent possible conflicts with parents who might hold different views and not understand why certain things are done in the centre.

31. Parent-Staff Partnership

At centres A, B, D, G and I staff saw themselves as extending upon the care and education provided by parents, respecting parents child-rearing practices and not undermining these (Smith, 1980; Smith & Swain, 1988). Observational data of staff interactions with parents and parents' interview comments support the claims of staff at these centres. However, parents from Centres C, E, F and H felt that there was little sharing of information apart from when they approached a member of staff to talk about a problem or to tell them something such as that their child feeling off-colour or was tired.

32. Parent Involvement in Decision-making

At the majority of centres opportunities for parents to participate in formal decision-making were available. Staff also ensured that parents were aware that they welcomed their informal, suggestions, and ideas. At Centres D and F all parents were sent reminder notices and invited to attend committee meetings even if they were not a member of the committee. At Centre I there was an openness and keenness for parents' input and involvement in decision-making but no formal opportunities existed, apart from meetings for charter consultation. At Centre H parents were not involved in formal or informal decision-making processes, apart from a parents' committee temporarily formed for the purpose of charter consultation some months earlier. According to Cook (1982) the parents at this centre have a right to be involved and processes should be set up to enable them to provide input.

33. Parent Education

Parent education was provided to a varying extent at eight of the nine centres (see Powell, 1989). Centre E provided no form of parent education. The head teacher explained that parents were not interested and that in the past it had been a waste of time to organise anything for them. Centres A, B, C and F provided the greatest variety of parent education opportunities, including parent discussion evenings and seminars, workshops, guest speakers, a parent library, display of information on the noticeboard and use of newsletters. Parent education was an important part of playcentre philosophy according to the supervisor of Centre A because ..

it means mutual support between parents, empowerment through developing communication skills, and developing confidence and personal abilities generally.

The director at Centre G said in response to her low rating that:

Parents find it difficult to attend meetings perhaps due to work and home commitments. We have a parents library and leaflets readily available. Our monthly management meetings draw just two parents.

34. Parent Friendship and Support

There was considerable evidence of parent support and friendly relationships between parents and staff at the childcare centres (Centres G, H and I). Lots of hard work was being put in by staff to provide social support (Powell, 1989; Smith and Swain, 1988). For example, staff listened to parents who had personal problems they wanted to share. On occasions staff had taken children home with them and they had kept the centre open when parents needed extended hours in an emergency. At Centres A, B, D and F some personal friendships between staff and parents had formed and the parents interviewed all said that the staff were friendly and approachable. Staff at Centres C and E did not view parent support as part of their role. They said they were available two afternoons a week if parents wanted to make an appointment.

35. Community Involvement

The programmes of Centres B, D and H could have reflected their community better (Meade, 1988). The staff at one childcare centre considered that they were making a contribution to the community by involving men who were on periodic detention in doing carpentry and painting work (Centre G). However, as children reside in both the community and the centre it is more important to foster links between both for children rather than for people outside of the centre (Olenick, 1986). The other centres had various ways of involving people from the community, local groups and organisations. The most common way was to invite people who represented various occupations to meet and talk with the children.

36. Use of Specialists

At most centres a list of local agencies and health and social service professionals was kept. The Ministry of Education (1990c) requires that centres make use of appropriate advisory services. The Meade Report (1988) states that staff should support parents' use of community services. Staff at most centres called upon specialists from time to time for advice and to make child or family referrals (Olenick, 1986). Conversely, head staff members at Centres A and C said they did not keep a contact list of relevant professionals and agencies and did not make referrals for parents.

37. Peer-group Stability

This criterion was fully met at the centres because no centres provided for children on a casual basis, and regular attendance was encouraged by staff and management policies.

38. Stability in Staffing

There had been no recent changes in staff at Centres C, E, I and G. A supervisor at Centre A believed that changes in staff were good for allowing other parents the chance for personal development and employment. Perhaps this is a difference between being a parent-focused service and a child-focused service, because staff in the kindergartens and childcare centres knew that changes in staff were not good for children's feelings of security and trust (Cummings, 1980; Erikson, 1963). Centre H had recently had a staff change. At Centre D both teachers were in relieving positions, although the relieving head teacher had previously held the teacher's position. Centre F had

a relieving teacher. A second supervisor had recently been appointed to take the place of one who was leaving at Centre A.

39. Staff are Parents

The playcentre supervisors were all parents and so too were the teachers at one kindergarten (Centres A, B and D). Centre B supervisor said that it was "playcentre philosophy" to employ parents. The director of Centre I said that this was "not a hiring criteria", and the head teacher of Centre D commented that "we just happen to all be parents, but it is not required". Some staff at the other six centres were not parents, including Centre H which had no parents amongst its staff. To some extent the research on effective parenting can be applied to staff interactions with children in a centre setting (Katz, 1980). There is not, however, sufficient evidence that being a parent is necessary to be able to work effectively with young children and their parents. At the centres mothering was regarded by staff as being distinct from the functions they performed (Stonehouse, 1989).

40. Staff Experience

All staff had worked with young children in some form of early childhood service for at least six months.

41. Qualified Staff

The kindergartens all had qualified staff because only College trained teachers are employed in kindergartens. It is most desirable that centres have staff who hold an early childhood qualification (Almy, 1981; Meade, 1985a) but a shortage of qualified staff was reported to be a problem by the director at Centre G:

In a recent advertisement for trained staff in our local paper we received only three replies.

Each of the childcare centres had some unqualified staff at the time of observation. At the playcentres, parents were rostered to work with the qualified supervisor. Playcentres were difficult to rate on the QRC scale of "1" to "4" because they operated as parent cooperatives and viewed parents as part of the adult ratio. Trisch and I decided to award a "3" of "partially met" to both playcentres because they had one trained supervisor at all times and a number of parents undergoing various levels of training.

42. Staff-Child Ratio

The playcentres and childcare centres had high ratios of staff or adults to children ranging from 1:3 to 1:6. It should be noted that the parents assisting at playcentres were counted as staff. The kindergartens had very low ratios of either two staff and thirty or forty children, or three staff and forty children. The number of children which kindergarten staff were coping with was high, and especially high because as a part-day service teachers had to responsibility for double this number of children over a full day (Smith & Swain, 1988; Travers et al., 1980; Veale 1991).

43. Group-size

Centres C and F had what research suggests to be a large group size of between thirty to forty children (Ruopp et al., 1979). Centres G and H sometimes had over twenty children and up to forty

children of mixed age range, which constitutes a large group size (Clarke-Stewart & Gruber, 1984; Howes, 1983). On paper Centre I had a large group size of up to thirty-one children including infants, however the children were divided into "rooms" or sub-groups which allowed for more intimacy, warmth and flexibility (Ruopp et al., 1979).

44. Written Programme Schedule

Centres varied in the extent to which they met this criterion. Centre E for example, had a written programme listing planned activities and variations on these as well as the approximate times of various routines. Centre E had its programme displayed in a conspicuous place for parents, visitors and staff to refer to. Centres A and B did not have any form of programme or schedule of activities or routines. Centres C, D and F had a schedule of routines displayed for the purpose of informing parent helpers what their tasks were rather than showing what was planned for children (Meade, 1987). Across the centres staff mainly discussed their ideas and plans during meetings and whilst working with the children. However, evidence of formal programme planning is expected by the Education Review Office when they carry out their reviews and audits. In the future there may be more systematic programme planning in centres as more trained staff from College programmes enter the early childhood work force because this is a practice and skill that is emphasised as part of their professional development.

45. Joint Programme Planning

All centres fully met this criterion because there were regular meetings of staff. Although it should be noted that most of these meetings took the form of casual discussions to discuss and plan activities and experiences for children, whilst staff were working with children.

46. Evaluation

As Smith et al. (in press) report, early childhood staff make countless decisions during the course of their work. Apart from discussions with each other whilst working with the children, the staff at Centres D, C and H did not practise any systematic approaches to evaluation. There was some form of on-going evaluation at Centres A, B, E, F, G and I. At both playcentres, for example, the supervisors reported and discussed activities and happenings with members of their Parent Council and parents who were undertaking training often shared their child or play area observations with the supervisors. The staff at one centre (Centre I) had a high level of commitment to personal reflective practice, incorporating time for this during staff meetings and the director made regular evaluations of staff performance (Veale, 1991).

47. Staff Team-work

A teamwork approach was practised at all of the centres. For example, staff were often aware of each other's needs. They assisted each other in their duties where necessary, and they frequently consulted with one another.

48. Staff Leadership

At the eight centres the head staff members encouraged staff to work collaboratively to achieve goals that all agreed. They also acknowledged and at times praised the individual efforts of their staff (Jorde-Bloom, 1986). Leadership was lacking amongst the staff at Centre H. The director of Centre H accepted overall responsibility for the smooth running of the programme, but she had not informed her staff of various policies and she provided little positive feedback and guidance. Poor leadership at Centre H had potential to lead to disagreements and dissension's amongst the staff, which young children can be sensitive to (Cummings et al., 1985).

49. Professionalism

Across the centres head staff members viewed their work as important and believed in communicating this to parents and others (Cook, 1983). A particularly good level of professionalism as defined by Rodd (1988) was evidenced at Centres B, D, F, I and G. This included staff membership of early childhood organisations, professional journals and books for staff at the centres and frequent feedback between staff on what they liked about each others individual efforts. Professional literature was lacking at Centre A and the few available books were worn and outdated. Centres C, E and F had no professional books and staff usually did not provide each other with feedback.

50. In-service Training (Staff Development)

In-service training for staff development was argued in the Meade Report (1988) to be vital for ensuring a good-quality programme. At Centres B, E, G and I staff participation in courses was supported and encouraged, for example though subsidies for course fees and provision for paid leave. At other centres there was less support for staff development. Records of the courses staff attended were not kept for the purpose of planning the professional development of the staffing team. Centre H was rated a "1" on this criterion because staff attendance at courses was not supported, there was no policy for staff development and there was no recognition of the value of this.

51. Provisions for Staff

Personal areas for staff, such as a bathroom, office or lounge area and storage for personal belongings are part of what constitutes good working conditions for staff (Harms & Clifford, 1984; Jorde-Bloom 1986; Whitebook & Howes, 1980). Centres C and E each had a staffroom but this was not space exclusively used by staff. For example, staff rooms were used for taking mat-times. Centre B had a kitchen which doubled as a staff (parent) room at morning-tea times. Centre A had a definite lack of space as staff (parents) stood in the kitchen for their coffee breaks and there was only one toilet shared by children and adults. Centre E had no secure cupboard space for staff belongings and at Centre C the bathroom basin taps did not work.

52. Special Needs Children

Each centre had stated in their draft charter that children with special needs would be accepted and modifications to the environment would be done as necessary. Few centres had children whose needs could not ordinarily be provided for within the early childhood programme and the majority of centres were therefore rated on the basis of their stated policy. Centre A and H had children for whom

changes to the programme and/or modifications to the environment were needed. Centre H had a special needs infant who required careful and constant one-to-one care when not sleeping, and this was provided. The special needs child at Centre A could not move without assistance. A parent had made a special book for adults to read to her. Most of the time the child was seated on a bean chair and she was not helped to move around and participate. There is evidence though, that social interaction is particularly important for young children with physical disabilities or developmental delays (Swadener, 1988).

53. Biculturalism

No programmes could be described as bicultural (Holmes, 1991; Metge, 1990). At Centre A, for example, the supervisor said good-bye to children in Maori, Maori words were stuck around the walls and furniture as labels, and there were a few books about Maori culture and people. At Centre H a few Maori words were recited regularly during group music times, for example "E Tu", meaning stand up, and "E Noho" meaning sit down. A few posters with Maori words on the walls was the only form of acknowledgment of being part of a bicultural society at Centre G. The director of Centre G explained that they were waiting for help from the Early Childhood Development Unit. The staff at Centre I made a conscious and determined effort to make their programme more bicultural. A fluent Maori speaker was on the staff, and he sang Maori songs and introduced Maori cultural activities. Maori values were often reflected in staff behaviour and interactions with others, for example food was always shared with visitors.

54. Cultural Awareness (including fostering non-racist attitudes)

The teachers at Centre D were promoting cultural awareness through talking and teaching about other cultures and lifestyles. The family play area had a Chinese wok and dolls with different skin and hair colour. The children's books portrayed a variety of other cultures and lifestyles. Parents from different ethnic groups were often asked to share aspects of their culture with the children and teachers. At the entrance to Centre D a notice welcoming children and parents in a number of different languages was displayed. At the other eight centres there was little promotion of awareness of ethnic diversity and cultural differences. The director of Centre G was not aware that promoting cultural awareness involved much more than having non-racist toys and materials (Clark et al., 1992)

Multi-racial toys are often hard to purchase in the local shops - our one "coloured" doll was purchased in Australia.

55. Non-Sexist Curriculum

Across the centres there was a high level of awareness about sexism in children's play and how sex stereotyped behaviour is developed (Watkins & Bradbard, 1982). But Centres C, G and H had some problems in meeting this criterion. Most of the books and puzzles at Centres G and H showed people in traditional sex-stereotyped roles. The staff at Centre G were observed only in caring and domestic roles and the boys and girls seemed to have their own activities with little interaction between them. For example, few girls and mainly boys were observed on the climbing equipment and few boys and mainly girls were observed doing puzzles and playing with the dough. Some boys at Centre

C were observed making sexist comments in the playground and the teachers appeared not to have picked up on these, for example one boy said: "go away, only boys allowed here" and "we're strong, you're not".

56. Support of Family Values and Customs

Respect of family values and practices is important for good parent-staff relationships (Kontos & Wells, 1986; Rosenthal, 1991) and for continuity of experience between home and centre settings (Bronfenbrenner, 1979). But interviews with parents across the centres suggested that staff usually did not ask them about their family values and practices. At five centres, head staff members stated that they had not thought about finding out if families had certain values or customs that they should be aware of. They did, however, respect family values and customs where these were known to them. For example, at Centre D the staff gave a girl other activities to do whilst children were celebrating a birthday party because the mother had told them that as a Jehovah Witness her daughter's birthdays were not acknowledged. An interview with a parent at Centre F from a recently immigrated family revealed that she wanted her twins to hear and experience only the English language. This raises the question of whether, at the parent's request, assimilation and not showing recognition of children's native language and culture is best.

Patterns in Ratings of Centre Quality

TABLE 18.

Total QRC Scores for Each Centre on Categories of Quality Criteria and the Total Mean Scores Across Centres

	Playcentre		Kindergarten				Childcare			Mean	SD
	A	B	C	D	E	F	G	H	I		
Social-Emotional	18	20	16	20	19	20	20	19	18	3.78	.42
Health and Safety	28	32	31	33	29	25	33	29	32	3.36	.84
Programme Criteria	39	39	33	37	34	39	32	23	39	3.50	.72
Family and Community	43	43	40	40	39	43	41	34	41	3.37	.89
Organisational-Structural	50	53	48	54	54	53	54	45	57	3.47	.80
Equity-Values	17	17	14	18	14	16	11	12	18	3.04	1.02

Table 18 shows that there was greatest variation in the quality of the childcare centres, with Centre I having higher ratings on most criteria and Centre H tending to have lower ratings. The playcentres were more similar in their observed quality compared to the childcare centres and kindergartens. This could be due to the smaller size of the sample of playcentres, but probably it reflects greater homogeneity within the playcentre organisation. The standard deviation for criteria ratings in the equity/values category is large and this indicates that centres varied most in their fulfilment of these type of quality criteria.

Practices in Relation to Importance

To see if parent and staff values reflected standards of practice in their nine centres the correlation coefficients of mean importance ratings for each criteria and the mean QRC ratings for centre practices were calculated. On ten quality criteria significant relationships were found between centre mean QRC ratings and parent and staff mean importance ratings (see Table 19). Note that a correlation greater than the critical value of 0.66 ($p < .05$) indicates a significant relationship between observation and importance ratings.

Table 19 shows statistically significant negative correlations between QRC ratings and parent importance ratings on provisions for special needs children and staff model good health and hygiene. This suggests that the more importance parents attributed to these criteria, the less likely they were to be practised. On the criteria of special needs provision only Centre A received a QRC rating other than a "4" and so the correlation relates to parents' importance ratings at that one centre. This means that the parents at Centre A tended to rate the importance of provision for special needs higher than the quality of observed practice.

TABLE 19.

Quality Criteria on which the Correlation Coefficients between QRC Ratings and Ratings of Importance were Significant

	QRC		Parent Importance		Staff Importance		Parent	Staff
	Mean	SD	Mean	SD	Mean	SD	r	r
Staff model good health/hygiene	3.11	.78	3.73	.51	3.89	.32	-.73 *	-.42
Special needs provisions	3.89	.33	3.52	.79	3.79	.42	-.68 *	-.27
Staff show children they care	3.89	.33	3.87	.34	3.90	.31	.80 *	-.14
Sensitive settling-in process	3.89	.33	3.72	.58	3.93	.25	.92 *	-.14
Written programme schedule	2.33	1.00	2.54	1.02	3.07	1.03	.78 *	.39
Qualified staff	3.44	.53	3.59	.66	3.57	.63	.80 *	.54
Staff are parents themselves	3.11	.93	2.37	1.06	2.27	1.14	.86 *	.39
Staff home-visit families	1.78	1.09	1.89	.96	2.24	.95	.85 *	.78*
Home like pleasant atmosphere	3.72	.25	3.79	.43	3.97	.18	-.07	1.00*
Notification of infections	3.33	1.12	3.54	.67	3.55	.74	.43	.87*

* $p < .05$ (ie. $r > 0.66$ for sample size of nine centres)

The correlation coefficient on the staff health and hygiene criterion indicates that parents tended to rate the importance of this higher in centres where staff practices were lower (Centres E and F in particular). The main problems were insufficient attention to hand washing by staff (for example, after wiping children's noses and before handing food) and staff going to work when they were unwell. These could be remedied by staff becoming aware of the problems, perhaps through in-service training. Also, centre managers need to check that staff do not feel obliged to go to work when they are unwell through ensuring that relievers are readily available and staff have sufficient sick leave provisions (Aronson, 1987; Whitebook & Ginsburg, 1983).

Only Centre C received a QRC rating lower than a "4" for the criteria of staff care about children and a sensitive settling-in process. The positive high correlations are therefore reflective of the relatively lower importance ratings of parents at Centre C. This is somewhat puzzling given that some parents at Centre C had expressed concerns in their questionnaires and interview during the QRC evaluation process about one teacher's attitude and approach towards their children. Perhaps the parents were satisfied that other staff made up for the poor one, or they felt that they could not expect what was not necessarily possible.

There was greater variation among the centres in their QRC ratings on the criteria of a written programme schedule, qualified staff, staff with parenthood experience, and home-visiting. The high positive correlation between QRC ratings on these criteria and parents' ratings of importance suggests for example, that the centres where parents thought home-visiting was most important this was in fact carried out by staff. It could be that parents valued these practices and so selected their centre accordingly (Pence & Goelman, 1987; Phillips et al., 1987). Alternatively, because these practices occurred where parents rated them highest in importance, their ratings may have been influenced by their experience and increased awareness.

Table 19 also shows significant positive correlations between staff mean importance ratings and QRC ratings for the practices of home-visiting, a pleasant atmosphere, and notifying parents of any contagious disease or infection. The correlation coefficient for the criterion of a pleasant atmosphere was large at 1.00. It seems that because staff thought these were important they carried out home-visiting, they were more likely to have a pleasant atmosphere at their centre, and they ensured that parents were notified of any contagious disease or infection. Similarly, Meade's (1985a) research showed that if staff aimed, for example, to make parents feel welcome then parent involvement was higher.

Figures 1 to 6 below illustrate the magnitude of the differences between parents' and staff mean importance ratings and observation ratings on each of the quality criteria. The Figures were designed for the direction of the relationship between the two sets of ratings to be easily seen (ie. whether each observation rating is higher or lower than parent and staff ratings of importance).

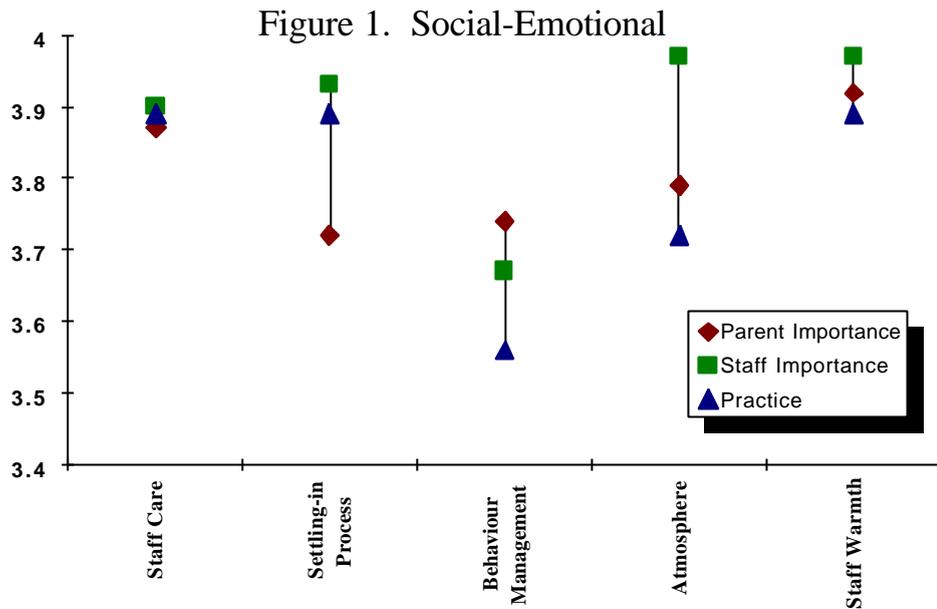
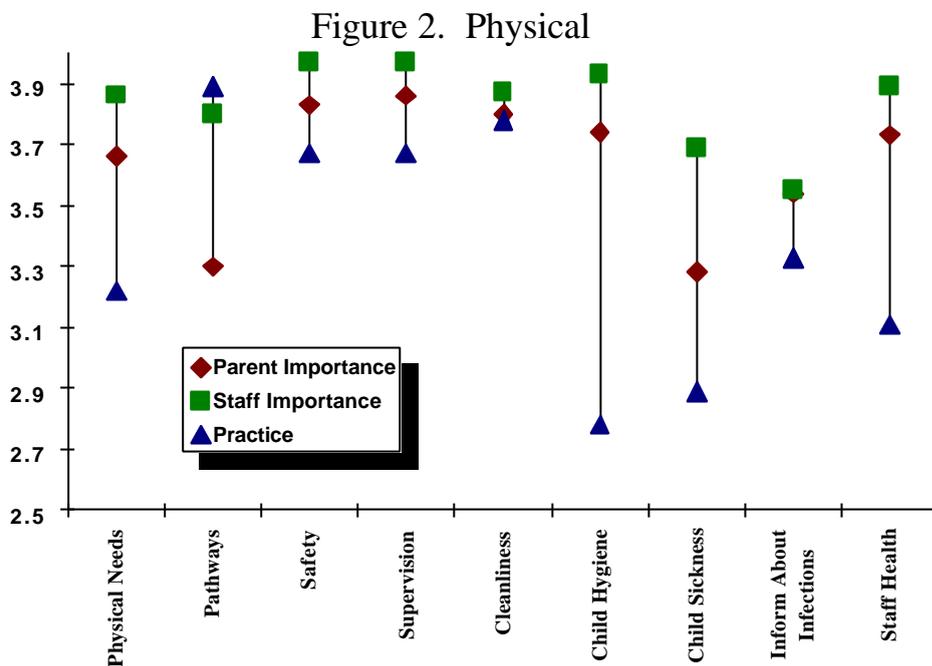
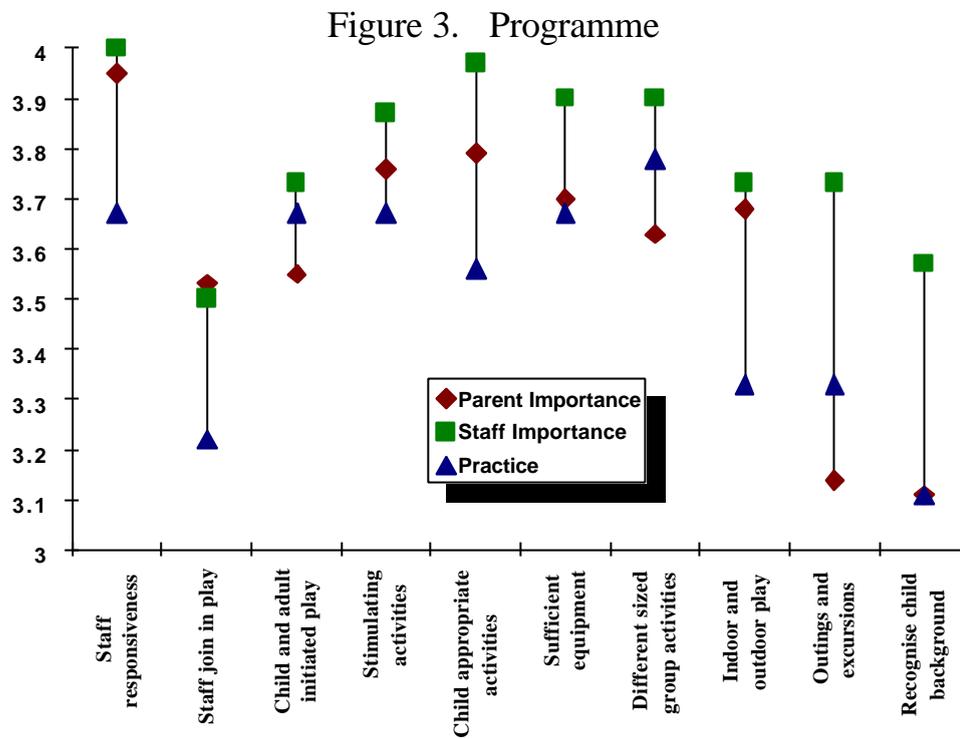


Figure 1 shows that on criteria in the "social-emotional category" the differences between the mean importance ratings of the parent and staff groups and QRC ratings of centre quality are small. The high magnitude of the importance ratings and of the QRC ratings indicates that parents and staff valued these criteria highly and that their values were reflected in what happened in centres.



The mean importance and QRC ratings for the criteria of safety, supervision, and cleanliness of the environment are shown in Figure 2 to be very close. The criteria of children's physical needs, child hygiene, provisions for sick children, and staff model good hygiene and health are shown to have large differences between importance ratings (particularly the staff ratings) and observation scores. The differences suggest that centres are not providing well enough in these areas from the parent-staff perspectives. Conversely, on the criterion of clear pathways between activity areas the observation rating of practice was much higher than the parent importance rating.



On most of the criteria shown in Figure 3 the size of the differences between observation and parent/staff importance ratings was small (especially parents' ratings). On the criteria of developmentally appropriate activities for children, outings and excursions, a balance of indoor and outdoor play, and recognition of differences in children's backgrounds in the programme it appears that practices were not adequate in relation to the importance staff attached to them.

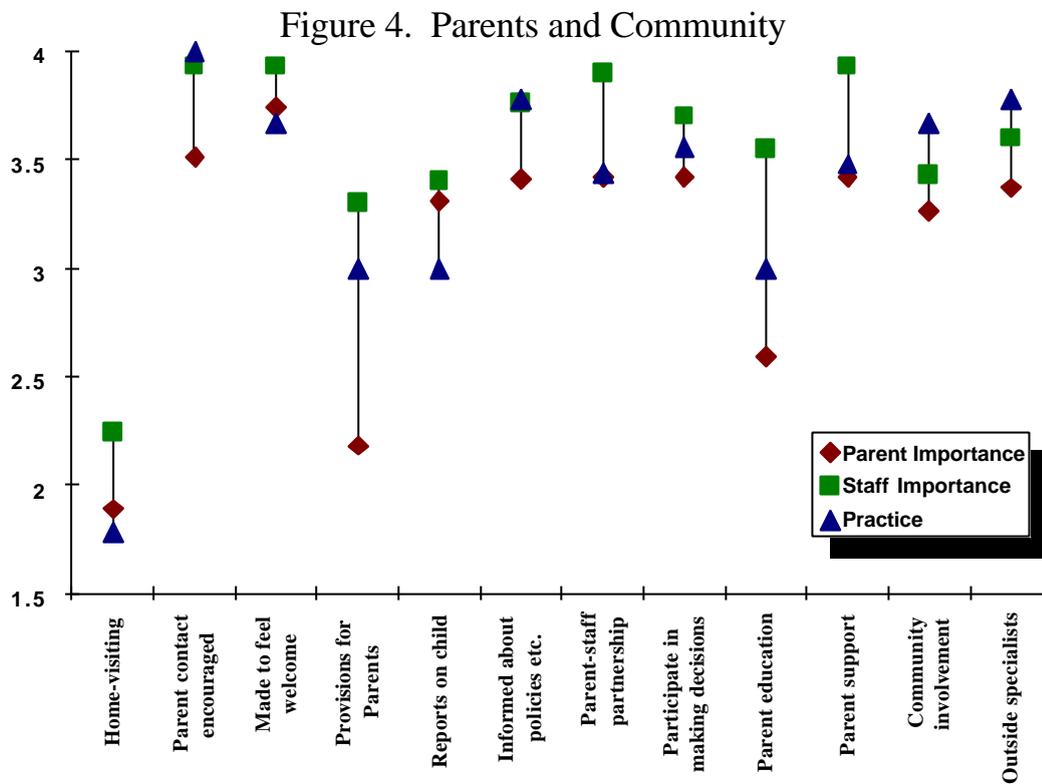
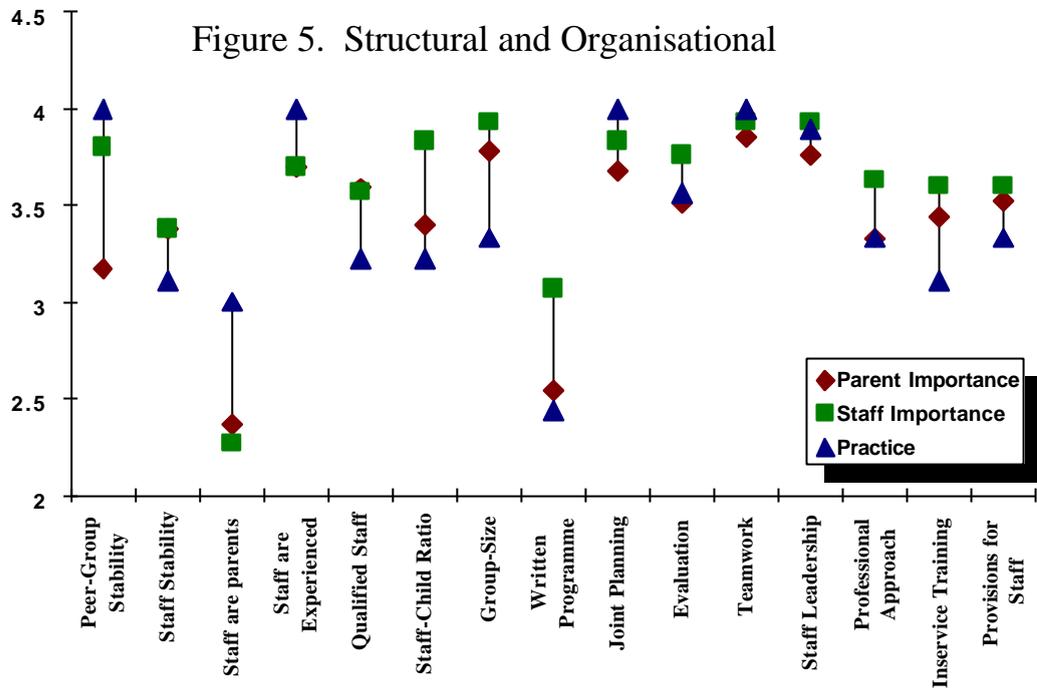


Figure 4 clearly shows some large differences between parent and staff values on criteria associated with parent-staff and home-centre relationships. The staff mean importance rating for parent contact being encouraged was similar in size to the observation rating, but the parent importance rating was lower by about half a point. On the criteria of provisions for parents' needs in the centre and parent education, the staff mean importance ratings were closer in size to the observation ratings than to the parents' importance ratings. The parents' importance ratings were much lower than both the staff importance ratings and the observation ratings. On the criteria of parent-staff partnership and provision of parent support the observation ratings were similar to the parents' mean importance ratings and much lower than the staff mean importance ratings.



Looking at Figure 5 observation scores were much higher for practice compared to parents' importance rating of peer-group stability and also to parent and staff ratings of importance of staff being parents. From the staff perspective practices of a written programme schedule, group-size and staff-child ratio could have been better in the centres.

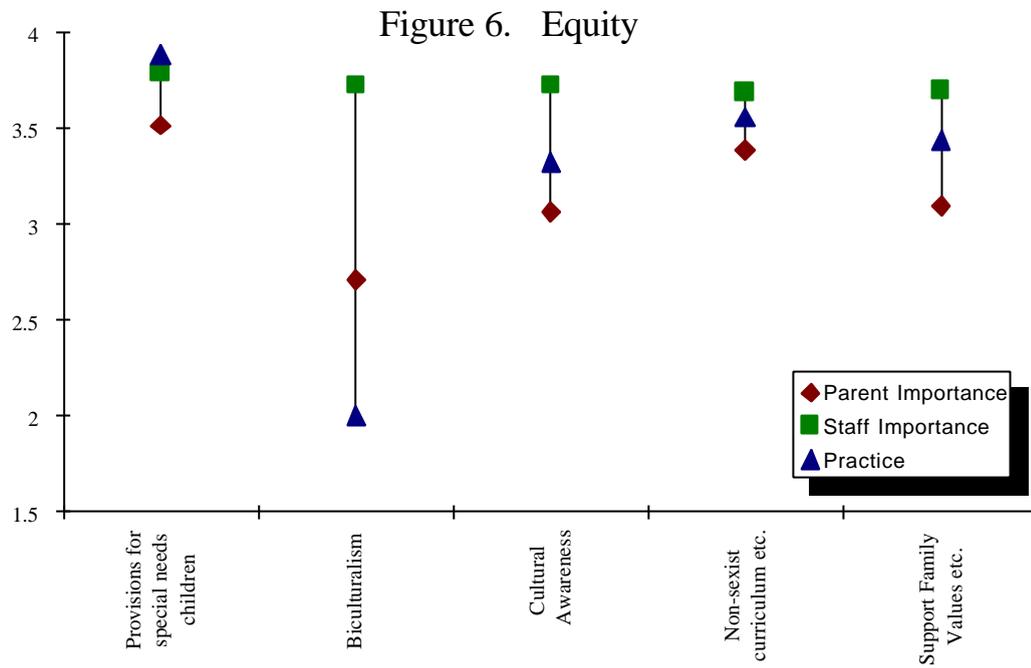


Figure 6 shows a large discrepancy between the staff importance rating of biculturalism and the observation rating, and a moderate difference between the parent importance and observation ratings. Although the staff rating for biculturalism was high observational evidence of biculturalism in centres was minimal. Explanations for low performance on this criterion were provided earlier in the chapter.

Chapter Summary

The Observed Quality of Centres

The three types of centres differed in their QRC ratings on some criteria due to their particular group's organisational and philosophical characteristics. For example, kindergartens had lower ratings for staff-child ratio and higher ratings for home-visiting, while playcentres had consistently higher ratings for criteria related to parent involvement and participation.

Playcentres were more homogenous than other groups in the observed quality of their practices. There was, however, greater variation within the early childhood groups on individual criteria than between the groups. A childcare centre had one of the highest ratings on most criteria while another childcare centre received the lowest ratings on most criteria.

Across the six categories of social-emotional, physical health and safety, programme, relationships with parents and community, organisational/structural, and equity/values criteria, centres were observed to be highest in quality on criteria in the social-emotional category and lowest on equity. Given that until the introduction of charter requirements some of the equity criteria which centres were evaluated on had not been mandatory for staff and managers to meet, their lower ratings are understandable.

Looking at the criteria which centres did not rate well on, the main reasons (not in any order) were centre policies, staff awareness of the implications of certain practices, physical resources, finances, staff time, and staff skills and confidence (for example, bringing Maori language into the programme and involving parents more in the programme). A paper by Meade (1991) draws attention to the need for staff to be "nested" in a wider support system, including provisions for in-service training, professional support networks, administrative support and licensing standards. In addition to support, staff need to have the resources with which to meet minimum standards, charter standards and their own expectations about quality.

Contrasts Between Observation Data and Parent and Staff Importance Ratings

Parents who rated the following criteria as more important had their children at centres which were observed to meet the criteria to a higher level: staff care, a sensitive settling-in process, written programme schedule, qualified staff, staff are parents themselves, and home-visiting. Staff health and hygiene practices were observed to be lower in quality at centres where parents placed more importance on this. Staff importance ratings correlated significantly with only three QRC ratings of observed quality. The correlations in all cases were positive, indicating that staff who placed greater value on home-visiting, a pleasant atmosphere, and informing parents of any contagious disease received higher observation ratings.

Chapter Six

C H A R T E R D E V E L O P M E N T

Developing and ensuring high quality early childhood services is not only a problem in psychology of how best to support children's development, it is also a philosophical problem and a political concern. The previous two chapters examined meanings and practices of quality in the centres. Quality assurance was a key concern in the government's educational reforms. The government's requirement for centres to develop a charter provided a major challenge to centres to look closely at programme and management philosophy, and at what parents wanted and what was provided.

This chapter examines how centres approached the task of charter development and the outcomes of it. At the time of study Te Kohanga Reo were not required to have individual centre charters. Therefore, the process of charter development was studied only at the kindergartens, childcare centres and playcentres. Details of how charter development proceeded in each of these centres is presented at the beginning of the chapter. Findings on how charter discussions helped groups to construct their own understandings of quality are presented and discussed. The chapter concludes with a look at the limitations of the charter process and the degree to which the charter document was able to reflect the process of development and discussion.

The Process of Charter Development in Centres

Centre A

Small group meetings of parents were held either during the day or evening between February and June 1990. At most meetings there were between five to six parents. Four parents were described by the president as being the "stalwarts" who "put their energies into writing the charter". They were the charter committee. In addition to the meetings there was a questionnaire for parents. A public meeting was advertised but only playcentre parents attended. A telephone tree was organised whereby each committee member had responsibility for phoning a group of parents before each meeting. A noticeboard was set up to display charter news and information from the Ministry. Newsletters to parents contained information on progress in drafting the charter and upcoming meetings. On June 1st 1990 at a parent council meeting the president began with this comment in giving her report:

It is with much relief that I am writing this report on the draft charter. It has been an interesting exercise, but tedious at times, and very time-consuming. It certainly feels good to be nearing completion!

Centre B

The first charter meeting was held on February 28th, 1990. Thirteen parents discussed the form the consultative process would take and which parents would be responsible for drafting individual sections of the charter. Two other meetings were organised specifically for working on the charter, including one at which local Maori people were invited to give input. A public meeting was organised at the local tavern to talk about the charter and ask community members to support the playcentre's goals. Another way of consulting with parents was through a questionnaire sent home with children. The questionnaire asked thirty-one questions, for example, on the provision for special needs children questions included: How would you welcome children with special needs into our centre? How would you encourage centre parents to work with the child? What professional support would you seek? and, What support would you give your supervisor? Most parents worked on their own or with another parent to draft their particular charter section using feedback from the meetings, the questionnaire and the Playcentre Federation's guidelines or framework for writing a charter. Parents presented what they had prepared for their charter section at a meeting on April, 26th. Their notes were written on overheads to apparently save the cost of photocopying copies for each parent. The president repeated a statement made by the supervisor to her: "I'll be so glad when July comes and we can get back to what we are here for - the children". After the meeting the secretary and president compiled the notes, checked for consistency in language and presented the completed draft to their parents' council.

Centre C

A sub-committee of six including the two teachers, the president of the committee, and three parents first officially met on the 31 January 1990 to discuss the charter guidelines of the Dunedin Kindergarten Association. Five copies of the Association's guidelines were displayed at the kindergarten for parents to read. Two weeks later, at a public meeting the president distributed copies of the Association's guidelines to the seventeen parents and teachers present. Most of the discussion at the meeting centered on the requirement to consult and how the sub-committee should go about this process. A sub-committee meeting was held a week later at which two questionnaires were drafted for distribution to parents and people living in the neighbourhood. The questionnaires had up to five closed questions, for example, one question was:

This kindergarten will recognise the individual needs of the child regardless of race, sex, ability, religious beliefs and socio-economic background. Do you agree/disagree that the kindergarten meets the above definition with regard to your child? Agree/Disagree. Please comment.

A summary of the questionnaire responses was presented by the secretary at a subsequent sub-committee meeting. There was considerable discussion about some of the negative responses received, suggesting that parents had misread or weren't given enough information to reply to the questions. A second public meeting was organised in April at which a representative from the Te Kohanga Reo Trust spoke on how the kindergarten could support and reflect the principles of the

Treaty of Waitangi. In addition to the two teachers and the president, four parents all of whom were committee members attended this meeting. The president and secretary in close collaboration with the head teacher drafted the charter following the Association's guidelines. The draft charter was displayed for parents to approve by signing.

Centre D

In the first week of February 1990 a committee meeting was held to discuss the Kindergarten Association's charter guidelines. Four weeks later the first meeting of a subcommittee was held at the president's house. The two teachers, secretary and two committee members were present. They discussed the Association's guidelines and points within it that they saw as issues. Members of the main kindergarten committee were responsible for keeping in contact with individual families about consultation gatherings. Four informal gatherings were organised to give sub-committee members an opportunity to inform parents about the charter, including a children's fun-day barbecue and a pizza making session. Letters were sent to local schools and four short questionnaires were prepared for parents outlining particular points they wanted feedback on. Sub-committee meetings were held fortnightly at which members discussed and drafted the charter. Copies of the charter were available for parents to approve by signing.

Centre E

A sub-committee was formed as early as October 1989 for the purpose of formulating comment on the Kindergarten Association's charter framework. In the third week of March 1990 all families were telephoned and asked to attend a meeting on one of five dates to discuss sections of the charter. Three meetings were held at committee members' homes in the morning and one in the afternoon and evening. The fifth meeting was held in the evening at the kindergarten. Over the five scheduled meetings forty-seven out of a possible ninety families (including the pre-entry group) were represented. In April all families were telephoned again and offered a choice of either completing a questionnaire or attending a meeting on one of three dates to discuss the Treaty of Waitangi, Equity, and Special Needs sections of the charter. Seventy-three out of ninety families completed a questionnaire or attended a meeting. In May, members of the sub-committee met with a representative from the Te Kohanga Reo Trust for assistance in drafting the Treaty of Waitangi section. Drafts of their charter sections on health, safety and the environment were posted to the local Plunket and Public Health nurses for comment. Copies of The Learner section were sent to six school principals for comment. By the second week of May the subcommittee (namely the president and secretary) had completed the draft charter. Parents were asked to read and sign the charter.

Centre F

The committee first met at the beginning of February 1990. A number of meetings for parents were subsequently organised. Numbers at these meetings dwindled and so the committee held a parent lunch to encourage attendance. Committee members took responsibility for phoning other parents to

ensure all families received information on charter meetings. A suggestion box was put out for parents. Each week information about the curriculum and proposals for charter content were displayed on the noticeboard for parents comments. The final meeting to discuss the completed draft charter was held at the end of April. Seven people were present including two teachers, the president, the secretary and three committee members. An executive member of the Kindergarten Association was invited. The Association representative suggested that the committee shorten their charter by writing one sentence or a small paragraph on each point instead of discussing single points under various subheadings. The committee had written their charter in two sections, a "legal part" and a "descriptive and measurable part". The head teacher said that this was to make the charter more accessible to parents because they only needed to read details of centre management. The president said that they were unhappy with the compulsory wording in the Association's guidelines about mainstreaming because it was not relevant for the kindergarten. The teachers were angry that full integration of their special needs group of children would put a strain on them and probably mean the loss of a specialist teacher currently employed. A committee member told the Association representative that "committees are tired. Next year someone else will have to cut and paste the charter".

Centre G

The management committee of parents and staff met at the end of November 1989 to discuss charter development. Meetings were held approximately every two weeks until the end of April when a final meeting was called to discuss the completed draft document. Each meeting was chaired by one or two people, decided at the previous meeting, who were responsible for preparing discussion material and drafting notes for the particular section of the charter to be discussed. The minutes from each meeting were displayed on a parent noticeboard. At a meeting in February a staff member reported on an in-service course she had attended on charter writing. She explained that a charter should have a set of objectives and management plan for each area and that a centre could not reword the Handbook principles and requirements to suit themselves. She mentioned some ideas for consultation, and the committee picked up on one idea and decided to hold a family tea. At the end of March a final meeting was held to discuss remaining issues. One parent took the chair because she had volunteered to draft the complete charter. Two weeks later she had the draft charter available for parents at a fish 'n chip family night. Parents' signatures were collected as evidence that they attended the consultation gathering. The supervisor was unhappy about some of the wording in the draft and she made some changes before passing it to the centre's Community Association.

Centre H

The owner of Centre H drew up a draft charter based on the Handbook guidelines and approached the Ministry in December 1989 to discuss it with them. She said that she was told that it did not matter what was in the charter because the Ministry would not discuss it until parents and staff had been consulted. She believed this was not necessary:

It seems like we have to pretend to consult when so much of the charter is laid down anyway.

But she organised a family pot-luck tea at which she explained to parents that the centre needed to have a charter that meet their approval. Volunteers for an "unofficial committee" to give feedback on the draft charter were asked for. The parent committee met twice, in February and March 1990 at a family's house. At the first meeting there were five parents and at the second meeting there were three parents. The centre director attended the second meeting and listened to parents' comments. Two staff meetings were held to read the draft charter and discuss parents' feedback (for example, parents wanted more communication from staff about their child). The centre director and chairman of the parents' committee reported back to the owner. In the last week of April a family pot-luck tea was held at the centre. The owner told parents that she had taken the committee's comments into account when writing the final draft. She thanked parents for their involvement and then circulated a piece of paper for parents to sign that they had attended the family tea as this was needed for evidence of consultation.

Centre I

The process of charter development started early at Centre I compared to the other centres. At the end of July 1989 the director called a meeting of parents and a charter subcommittee was formed. At two subsequent meetings the centre's community was defined and a survey questionnaire was prepared. The director analysed the results of the survey and placed the findings under relevant Handbook principle headings in a paper she distributed to parents prior to a meeting in the second week of October. At the October meeting the survey results were used as a basis of discussion to obtain more specific input from parents. After October, the director and supervisor consulted with staff on individual sections of the charter during staff meetings. Note that staff meetings included general business as well. Information about progress in charter writing was published in the centre's newsletter and regularly displayed on the parent noticeboard. Notices about meetings and progress in charter writing were placed in a publication of the institution which the centre operated in (the centre's community). The final draft charter was presented at a special meeting called for all parents. Staff personally informed parents about the meeting and about seventy-five percent of families were represented.

Charter Discussions and Understandings of Quality

Methods of Involvement in Consultation

One method of encouraging both staff and parent involvement across the centres was to talk about the possibility of not receiving funding from the Ministry if the charter was not satisfactorily completed by the due date. This was used as a scare tactic by committee presidents and staff, especially at the kindergartens. In the kindergartens the introduction of parent fees was feared as an outcome of not having a charter finished and approved. It was a fear within the playcentres also because of the need

to have money to complete building alterations and additions in order to be licensed. Within the childcare centres the fear was that parents might have to be charged higher fees or staff wages reduced.

At Centre I the director believed that staff enthusiasm for discussing and working on the charter was maintained because they never concentrated solely on this at staff meetings. It either preceded or proceeded general business and it was regarded as important for staff development and not as a task that had to be done only for the Ministry. In this way Centre I was unique from the other centres because at the other centres the immediate benefits of engaging in the process were not used as a rationale for participation and commitment to it. Only the long-term benefits of achieving the status of being a chartered service were mentioned at meetings and during discussions. Researchers have argued that the process of deciding on goals and defining quality is more important than the form that the programme actually takes (Balageur et al., 1991; Meade, 1991; Weikart et al., 1978).

Mostly the incentives to parents to be involved took the form of social and family occasions. Here are some examples. At Centre B a community meeting was organised at the local hotel with supper provided because ...

you've got to bribe people to make them come. At our initial meeting we only had three turn up (supervisor).

At Centre C a fish 'n chip evening for parents and children was organised to "throw the charter at them by surprise" (head teacher). Informal social gatherings such as a barbecue were organised at Centre D. At a research meeting, representatives showed interest in hearing how the director and staff of Centre I obtained a high questionnaire response rate. The director explained that staff ...

caught every parent as they came into the centre, gave them a questionnaire and asked them to please take ten minutes to do one. For two weeks prior to that we impressed on them that it was for the benefit of their children that we were doing this.

The charter committees at four centres devised a telephone tree to ensure that every family was contacted and knew about up-coming meetings and progress in charter development (Centres A, D, E and F). While this was found to be successful in reaching a larger number of families than would have otherwise been involved a representative from Centre A said that telephoning was time consuming because parents usually wanted to also talk about other things. Centre A was the only centre at which parents were openly encouraged to bring their children to meetings. At the other centres social occasions where all family members could attend reduced the problem for parents of finding and paying for a babysitter, and at Centre E parents were given a choice of meeting times so that they could attend when it was most convenient to them (morning, afternoon or evening).

Sharing and Accepting Each Other's Views

Parents and staff learnt more about their centre's philosophy and management practices. The charter development process resulted in enhanced communication between parents, staff, and

managers/committee members. Parents had opportunities to ask questions about practices and to make their needs known, some more than others depending upon the consultation process at their particular centre. Staff who had previously not had much if any involvement in organisational decisions became more knowledgeable about management matters and more vocal in conveying opinions and needs to their managers/committees. Staff, parents and managers/committee members also learnt more about each others' views and beliefs.

Across the centres, charter development provided staff with the opportunity to discuss their values and programme philosophy with each other and with parents. For example, playcentre representatives reported that consultation had made them realise that not all parents were as well informed or understood playcentre philosophy as they had believed.

Staff become more aware of parents perceptions and attitudes. For example, a parent at Centre F complained that it cost \$30.00 to have her washing machine repaired after becoming clogged up with sand and she wanted to know if a sandpit was necessary at the kindergarten. Another parent told staff that she was not happy with what her child was learning, the reason being that staff did not provide direct teaching and modelling of skills. The staff were astonished that some parents should think and say these things. But the parents' comments led to staff providing rationales about benefits for children's development and explaining theories of early education.

Receiving feedback from parents was sometimes aversive and difficult for staff to accept. For example one head kindergarten teacher said:

Its a good opportunity to have a bit of a gripe you know, and that's quite negative as far as the staff go. They thought we didn't talk to the fathers, only the mothers. And silly comments like we had no where to welcome them or nowhere for them to sit - well we've got a sofa. These are comments from parents who are ignorant of what we've obviously got (Centre C).

The president of Centre A suggested to representatives from Centre C at a research meeting that questions can be written in a way that parents only provide constructive comments. She added though, that this does not prevent negative comments from being made. The best way to deal with negative comments was to discuss them with parents rather than ignoring and continuing to feel hurt by them. In the weeks proceeding the research meeting Centre C staff and committee members attempted to change parents' perceptions of aspects of the programme and centre environment which they felt were not right. They did this using positive ways of friendly discussions with individual parents, posters on the noticeboards, and letters home to parents.

In some cases, major changes in procedures and practices emerged out of parent feedback. For example, at Centre E parents asked for a formal mat-time to be introduced at the end of the afternoon session for the younger children. The staff agreed to provide a story-time for children but negotiated that it was important that children had the choice as to whether they would participate in the story-time. Some parents did not want home-visiting to be continued because they did not like the practice

and believed that it was unnecessary. The staff negotiated to continue home-visiting but only if parents asked to be visited or if staff wanted to follow-up on a problem with a child. Parents asked if the Wednesday afternoon playgroup could have more input from the teachers. The teachers explained that Wednesday afternoons were their time to do book-work, planning and parent work. The playgroup was an optional extra, run by parents, and was not part of their job.

Parent feedback at Centres I and H indicated that more communication about children was wanted from staff. The owner of Centre H asked her staff to look into ways of establishing better communication with parents. The Director at Centre I introduced a home-report sheet for parents to fill out and bring with their child each morning, and during the day the staff completed a sheet about each child's activities including sleep patterns and eating for parents information.

According to the research literature, greater staff understanding of parents attitudes and beliefs should lead to higher quality educare for children (Kontos & Wells, 1986). Having been consulted and asked to participate in decision-making parents are likely to be more satisfied with their service and a closer partnership between parents and staff is likely to result (Cook, 1982; Farqua and Labenshon, 1986; Smith & Hubbard, 1988a).

Charter Content

Across the centres there was a general consensus that the principles and requirements specified in the Handbook were important and positive for promoting the overall quality of early educare. However, there were two major sections of the charter which prompted much debate and presented problems of implementation for centres. These two sections were "The Treaty of Waitangi" and "Special Needs". These sections generated most discussion and debate because it seemed that the government was devolving responsibility for equity issues on to centres when they lacked the resources to resolve them (Nash, 1989).

Treaty of Waitangi

Centres were required to demonstrate their acceptance of and draft a management plan for working towards the implementation of the principles of:

1. Every child in your centre has the right to learn and understand Maori language, values, customs, and practices.
2. The dual heritage embraces the idea of the equality of Maori and European cultural and historical backgrounds.

The reasons for difficulty in preparing this charter section were negative attitudes, lack of knowledge about taha Maori and debate on the specific relevance of Maori language and culture in the early childhood curriculum.

At Centre E the staff received an initially strong backlash from parents about a move towards biculturalism. The head staff member said that even their Maori parents were

... not wanting us to rush in and start teaching Maori and forcing Maori values on the children and families.

The parents did, however, accept staff assurances that Maori language would be gently incorporated into the programme over an extended period of time. The parents accepted and liked the idea of some Maori activities but, like many other parents across the centres, they believed that their children's education would be disadvantaged by the equal status of Maori language. Comments included concerns that their child had yet to learn their own language and that Maori was of little use in their child's future as compared to Japanese, French or Spanish. Many of the parents consulted across the centres preferred that taha Maori became an element within the programme rather than integrated across the total early childhood programme (Holmes, 1991). This, Royal-Tangaere (1991) suggests, would be disastrous for the partnership between Maori and Pakeha people:

We cannot go back to the days of just Maori songs, pois and crafts. To do this would be culturally oppressive. This form of action will not give rise to better cultural understanding and sharing (p.12).

During consultations, some parents resorted to an ideological rationale to block the integration of Maori language and values into the programme. The issue of children from other minority ethnic groups being disadvantaged was raised during consultations. For example, discussion on the Treaty principles at a Centre G committee meeting was summarised in the minutes as ..

should we express our attitudes as multicultural rather than bicultural? We must be sensitive to all cultures.

The head teacher at Centre C explained that ...

parents did not see how they could be fair to all cultures when Maori was taught in the programme.

The argument for multiculturalism seems to be an attempt to avoid the responsibilities and commitment that support of the Treaty would necessitate, amongst a predominantly European population whose dominant status was challenged by the requirement to become more bicultural. This is institutionalised racism (Walker, 1985).

For most staff the prospect of meeting the two Treaty principles was daunting. Royal-Tangaere (1991) believes that early childhood people are acknowledging Maori people as tangata whenua (the indigenous people) and are committed to working towards a bicultural New Zealand. If staff had negative attitudes, they tended not to disclose these. Instead, the concern raised by individual staff was that this was a new area of learning and they needed confidence, time, resources, training and assistance from advisers and Maori people. Some staff commented that they felt they were too old to be learning a new language. The staff at Centre I were already making a most conscious and determined effort to become more bicultural. They had a fluent Maori speaker on the staff and staff

attempted to reflect Maori values throughout the curriculum. However, at Centre I biculturalism was still felt to be an impossible task for all staff to achieve, particularly because the majority of staff and children were Pakeha.

That the principles of this section of the charter were controversial supports Metge's (1990) claim that most Pakeha are monocultural even though New Zealand as a nation is founded on the Treaty of Waitangi. Centre A president said that when she approached Maori parents to assist with the Treaty of Waitangi section they,

.. felt overwhelmed by being asked. They said we come from the North Island and we don't know very much about our culture.

This quote suggests a need for staff to develop sensitivity towards parents from cultures other than their own, and to approach parents in culturally appropriate ways so that parents do not feel they are being used to meet Pakeha liberal ideals. The Treaty of Waitangi section of the charter was definitely an area that more time was needed to engage in dialogue between parents, staff, managers/committee members and to seek more help from local Maori people.

Special Needs

There seemed to be no dispute at the centres that the presence of special needs children was a good idea for debunking myths and stereotypes at an early age by exposure to mainstreamed peers. The value of social interaction for children with physical disabilities and developmental delays in the educare setting was also recognised (Swadener, 1988). But when it came to their individual centre, the views of experts on mainstreaming were not wanted to be put into practise immediately.

Ballard (1993) suggests that the exclusion of children with special needs in many early childhood centres reflects a lack of understanding on the part of some staff regarding disability and the needs of families. The staff, more than the parents, in this study supported the principle of inclusion. But, staff were hesitant and even afraid of including a statement to this effect in their centre's charter. They knew that they lacked the necessary resources, skills and often confidence to work effectively with children who presented different special needs. Staff also experienced considerable parental pressure not to have children with special needs. Parents did not want their own children to miss out on staff attention and time. Parents did not want centre money to be absorbed into new equipment and facilities for special needs children when it could be spent on their own children's education and care.

Parent and staff concerns varied somewhat between the different types of centres. In the kindergartens the main concern of teachers and committee members was that they might get an influx of parents wanting to enrol their special needs child. They did not have the staffing ratios to cope, and the teachers agreed with a concern of many parents that non-special needs children would therefore receive less teacher time and input. At a local Kindergarten Association Meeting a representative asked the question of what would happen if teachers said "no" to a parent wanting to enrol their special needs child; would the kindergarten be in breach of the charter agreement? The ensuing discussion did not provide a clear answer apart from confirming that the principle of catering for

special needs children and their families had to be stated in charters. At Centre F the teachers and parents preferred their current partially separate "special needs group" to full mainstreaming. The teachers believed that they would not be able to cope with the individual requirements of the special needs children as they lacked the knowledge and skills of a special needs teacher. The head teacher said that mainstreaming would result in having to ...

cut back on the teaching programme in order to maximise the limited resources so that the greatest number of children can benefit.

There seemed to be less concern about mainstreaming in the playcentres. One playcentre (Centre A) already had a child who was developmentally delayed. In terms of staffing both playcentres could cope because parents were asked to assist. The parents did not perceive that their child would somehow be disadvantaged if children with special needs were accepted. The supervisors though, were concerned about the lack of available back-up support from specialists and agencies. They were also concerned about the potential cost of making any necessary structural alterations or purchasing special play materials and resources. Childcare centre staff were perhaps the most enthusiastic group. They did not believe that mainstreaming would effect their programmes. However, they did not fully accept the principle of inclusion because they believed they did not have the necessary skills and sufficient knowledge to be able to cater for the range of special needs that children might have.

The concerns about not having sufficient staff, the need for more staff training, and the costs involved in providing for children with potentially very diverse individual needs are not surprising findings. The early childhood field is under-funded and caring for children and their families who do not have developmental delays or physical disabilities is stressful enough for staff (Gardiner, 1991; Whitebook et al., 1990). While people mostly agreed with the value of mainstreaming the practical realities were different. Sustained personal-professional support and in-service training is therefore vital for staff (Meade, 1991; Maier, 1979).

Limitations of the Charter Process

Issues in Carrying out Consultation

People were unsure and held fears about consultation. Parent and community consultation was something that they had not been formally required to do before but it was necessary in order to receive funding from the Ministry. Individual centres had little experience and information on which to design and carry out a programme of consultation. For example, as late as February 1990 a staff member at Centre G went to a local course on charter writing and brought back ideas on how to involve parents in the consultation process. But by that time the consultation process had to be, and was already established at Centre G.

Centre representatives asked each other many questions at the first research meeting, such as: "who do I consult with?", "how do we consult our community when we're in the city and parents come to us from all over?", "do we really want every Tom, Dick and Harry telling us how to run our kindergarten?", "do we say to the parents shall we put this in the charter or should we just go ahead and put it in the charter?". The president of Centre A was suspicious of consultation:

We wondered how we could hold a public meeting without anyone coming so we could get on with the charter. We could imagine some weirdo coming in off the street.

The director at Centre I had a different concern and this was that in consulting with the people in the institution her centre served this would be a form of publicity and she did not "... want to appear to be wanting children, extending the waiting list even more".

At the June research meeting representatives from the centres were asked about the groups they consulted with and how useful this had been. Parents were the main group consulted with at every centre, because as one childcare director said: "they are our immediate community". Table 20 shows their ratings of the usefulness of consultation with each group on a four-point scale ("4" most useful, "3" useful, "2" somewhat useful and "1" not useful).

TABLE 20.

Ratings of the Usefulness of Consultation with Groups

	Centres								
	<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>
Parents	3	3	3	4	4	4	2	3	4
General community	-	2	2	2	1	2	-	-	2
Maori people	-	3	2	3	3	4	-	-	3
Local schools	-	-	-	4	2	3	-	-	2

At every centre parents were one of the most or the most useful group to consult with. Few centres consulted with schools and only two-thirds consulted with Maori people and their neighbourhood community. This has implications for charter approval because "evidence of consultation with parents, staff and community needs to be sighted" by Ministry Officers (Ministry of Education, 1990a). Here there seems to be some tension between Ministry expectations and what was believed to be possible as well as useful at centre level (Instance & Love, 1991; Wilson, 1988). Should centres be expected to consult beyond their immediate community of parents, and if so then who should they consult when they are not located within a community suburb and families live in various areas? Furthermore, do people not involved with an early childhood centre actually want to be consulted and to contribute to its charter?

Perceived and Actual Limitations on Parent Involvement

The consultation undertaken in centres reflected the degree of parent involvement and the nature of home-centre relations before centres embarked on charter development. Take for example the contrast between Centre B and Centre H in the way parents were involved. At Centre B most parents were actively involved in all stages of the charter process and many collaborated in drafting charter sections. As a playcentre in a rural area the parents at Centre B were used to working together and viewed the playcentre as belonging to themselves and the community. The owner at Centre H first wrote a charter and then attempted to consult with parents because the Ministry said she had to. The owner said that when talking to new parents she tells them that she runs an autocratic centre with professional staff because she provides a centre for parents who want "hassle-free" childcare. The parents at a Centre H parents' meeting discussed a wish to have some say in the running of the centre but they accepted that they could not because it was a private business. It should be noted though that when the owner invited parents to form a committee, only a small number were interested.

It was not easy to get parents interested and involved in writing the charter. All centres experienced some difficulty and many staff and management committees lowered their expectations after initial low responses. Researchers Smith and Swain (1988), state that obtaining and supporting parent involvement usually requires hard work on the part of staff. It is important because parents need to be involved in deciding the nature and quality of their children's experiences in centre care (Lassbo, 1990b; Rosenthal, 1991). The Meade Committee (1988) wanted parent input into programme goals and processes to ensure a better fit between provision and parents needs. But, as the director of Centre H asked "how do you force parent involvement?"

Centre B's supervisor said that despite working hard to obtain the involvement of all parents there were some problems, namely parents' difficulty in finding time to meet regularly due to over-commitment, some personality conflicts between parents, and apathy on the part of a few parents. Kindergarten representatives expressed surprise and disappointment at their low return of questionnaires from parents. The head teacher at Centre D said, "continual jollying to get returns" was

an added responsibility on top of her normal work that she neither liked nor wanted. The director of Centre I said she had assumed that no comment from parents meant agreement or it would have taken forever to obtain the views of every parent.

Explanations for problems in obtaining parent involvement included:

We hear the comment of, my children won't be here when its in place so why should I be involved (Centre C).

Parents are busy, they work all day and they've got to go home to preschoolers and bath them, put them to bed, do the washing and ironing (Centre G).

People are equating our meetings with the Board of Trustees. They just don't want to put themselves in the position where they are involved to a large extent (Centre D).

Parents are quite cynical and think this is more government bullshit (Centre A).

In addition, Centre A president said that because parents already gave much of their time through attending parent council meetings and parent-helping in the programme, she did not like to be continually asking for parents' involvement with the charter.

The process of charter development was perceived as making large physical and emotional demands on people's time. For those who became involved this was true. The Handbook which had a purple cover was commonly and frequently referred to in angry and weary tones of voice as the "Purple People-Eater" and other such negative names (see Farquhar, 1991b).

Negotiability and Autonomy

Many people in the centres disliked the fact that major parts of the charter (as stated in the Handbook) were non-negotiable and had to be incorporated. Representatives felt that despite carrying out often extensive consultations and collaborative work in charter writing, their final draft charter document had to be acceptable to the Ministry. Thus, their sense of ownership of their charter was reduced. Their criticisms included:

The Ministry say that we have to meet the needs of our community and our individuality and all that. But they are also saying that we've got to conform to these specifications (vice-president, Centre B).

We were given so much information ... In the end I felt I was just involved in a bureaucratic exercise (committee member, Centre E).

We're probably all going to have quite similar wording such as: providing a warm and secure environment for children to be in (head teacher, Centre D).

It seems like we have to pretend to consult when so much of the charter is laid down anyway ... It's effectively imposing another set of minimum standards at the philosophical level (manager, Centre H).

The Ministry gave a new meaning to 'negotiate'. We have to negotiate. They don't have to (head teacher, Centre C).

What these quotes and the many more I collected at centre meetings, the research meetings and in my discussions with people suggest, is that centres did not feel that they owned their charter. Even the committee at Centre F which had tried very hard to individualise their charter were cautioned by a representative of the Dunedin Kindergarten Association who said that their charter only needed to state what the Ministry specified in the format that the Ministry wanted. People at the centres felt that there was little allowance to negotiate what they wanted in their charter. "Correctly worded" statements were wanted and any local changes to the Ministry's wording were discouraged. As a Ministry Officer later said "the critical factor of local ownership was lost. The document was no longer "our charter" but "the Ministry's charter" (Robertson, 1992, p. 11). The charter, originally regarded as a basis of partnership, came to signify the power and control of the state (Codd & Gordon, 1991; Nash, 1989).

How much local autonomy kindergartens and playcentres had was also an issue. Both the playcentre and kindergarten associations provided guidelines or a "charter framework" specifying what all playcentres or kindergartens should write in their charter. In January and early February when I visited the playcentres and kindergartens they were eager to receive this guidance and were waiting on it before fully starting their process of consultation and charter writing. Later, some concerns were raised by kindergarten people about various charter statements required by their Association. For example, there was discussion at a Centre D sub-committee meeting about being restricted by the Association's statement of philosophy as it did not reflect the goals, values and practices which made the kindergarten distinct from other kindergartens.

A major concern across the kindergartens was that they were expected to include the following statement in their charter: at present we are reliant, and therefore encourage parent help or suitable voluntary helpers to fulfil the third adult requirement in our 40/40 kindergartens. All kindergarten staff viewed this as potentially threatening of their professional status. At the kindergartens with a 40/40 roll the committees also disliked the statement because it would change the nature of parent-helping from voluntary to compulsory. At the playcentres, there were no negative reactions to their Association's charter guidelines. This might have been due to the playcentres having a strong national philosophy under which supervisors and parents were trained and playcentres operated. The guidelines were viewed as helpful because a lot of the work of drafting statements had been done for them. The only anxiety which playcentre representatives discussed at a research meeting was that a parent who held a view contrary to the way things were done in playcentre could try to demand to have their view included in the charter.

Chapter Summary

Within and between the kindergarten, playcentre and childcare groups there were some striking differences as to the type of consultation carried out and how approaches were structured. This was due to differences between the management/organisational styles of the early childhood groups and a lack of information and clear guidelines on what to do. People were afraid of the potential consequences of not producing a charter acceptable to the Ministry. During the 1990 year charter development increasingly came to be seen and treated as a bureaucratic exercise and not as one that was aimed at improving quality in early childhood centres.

An important outcome of the process was enhanced communication between parents, staff and managers/committees. Consultation led to improved understanding of values, beliefs and practices. Some staff reported that negative feedback from parents was difficult to accept, but it was still useful to know what parents were feeling and thinking. There were two sections of the charter which generated the most discussion and debate, the Treaty of Waitangi and the Special Needs sections. The debate was mostly due in both cases to a need to have more time to examine the issues involved and to generate resources and expertise. Parents questioned the relevance of Maori language for children and they were worried that staff resources would be stretched as a result of mainstreaming.

Problems were experienced in obtaining parent participation. Some ingenious techniques and incentives were used by centres to encourage participation. Among these, social occasions such as family teas were a popular method of consultation. But, the social occasions seemed to be just that, and not gatherings for consultation. However, the Ministry required evidence of consultation and if this was proving to be a successful way of obtaining parents' signatures and record of attendance then were the staff and managers/committee being devious or just practical?

The extent that consultation with people and groups in the wider community was relevant to the centres and useful for charter development needs to be questioned. Perhaps if greater effort had been put into community consultation then it might have been found to be more useful. This does not seem likely though because people in the wider community would probably have had even less of a commitment to contributing to charter development than parents.

The findings reported above suggest that research showing that government and administrative level efforts to alter schooling only leads to change if people feel they have autonomy in accepting and implementing bureaucratically made decisions also applies to early childhood centres (Instance & Love, 1991; Spidell-Rusher et al.; 1992). It was anticipated that charters would be a meeting point between national standards and parent/staff/management or committee values and goals (Meade, 1988). But, little individualisation of charters was allowed. Playcentre and kindergarten charters had not only to conform to the Ministry's requirements but also to the specifications of their Associations. Centres that tried to establish greater ownership of their charters by making them their own, for example Centres F and I, found that while this was useful for their own examination and understanding of quality practices, it was not necessary for charter approval.

Note that the work that people put into consultation and charter writing was not rewarded. Charters were kept at the Ministry and then given back to centres some seven months later with instructions to do a re-write and include the framework of "Desirable Objectives and Practices". The value of consultation and establishing consensus between parents, staff, and management/committee members on aspects of quality would have been difficult for the Ministry to check on. The charter approval process started approximately nine months (1 April 1991) after the first deadline (1 July 1991) and many of the parents and staff originally involved had since left their centre.

Chapter Seven

OVERALL SUMMARY AND DISCUSSION

Key Findings Related to the Research Questions

1. What Does "Quality" Mean to Parents and Staff?

The most important goals underpinning a good early childhood programme according to parents and staff were about supporting and promoting children's psycho-social, language and physical development. This finding is similar to that reported by other New Zealand researchers. For example, Podmore and Craig (1991) in their study of infant/toddler care in childcare centres found that a high percentage of parents wanted their children to be safe, secure and well cared for. Bell (1990) found in interviewing kindergarten and childcare staff that they were mostly interested in children's psycho-social development.

Both parents and staff focused on goals that reflected the strong tradition of child-centered care and education in New Zealand (Meade, 1985a) rather than on goals related to accelerating academic skills (David, 1992). Parents rated the goal of preparation for school higher in importance compared to staff but the size of the mean rating scores indicated that this was not a main goal for either group. Carr and Claxington's (1989) suggestion that because parents are now encouraged to have more of a say in their child's education child-centered curricula may be at risk is not likely to be the case, at least not at the centres in this study.

The importance parents and staff attached to various programme goals was reflected in how they defined a good-quality centre and rated the importance of criteria for good-quality. The parents' general descriptions of a good-quality centre focused on the importance of staff who show that they genuinely like or love children and an atmosphere which is happy, warm and friendly. Many parents also defined quality by whether their child was "happy" at the centre or showed "eagerness" to be there and this finding supports Swain and Swain's (1982) results. In describing a good-quality centre, staff frequently referred to the presence of a positive and warm atmosphere and that children's play equipment and activities should be developmentally appropriate. The descriptions of a good-quality centre tended to reflect the different self-interests and roles of parents and staff (Katz, 1980). Parents were more concerned for children's well-being while staff were more concerned with the environment and experiences provided for children.

Staff and parents rated a number of criteria as highly important indicators of quality, which suggested that their view of what constituted good-quality was much more complex than the research-based triangle view of quality (ie. group-size, trained staff and adult-child ratio). "Quality" from the staff and parent perspectives consisted of a cluster of interrelated criteria or features. The social dimensions of quality were of greater importance than the structural and organisational aspects, and more important than some of the traditional measures of quality in the research literature. The role of the adult or staff member in providing a good-quality environment for children was critical from both the parent and the staff perspectives. For example, both groups rated the criteria of "staff are responsive to children" as a most important indicator of good-quality.

2. Are there Differences between Parents and Staff in their Values about Quality?

Parent and staff values about good-quality educare differed in two fundamental respects: on the desired nature of parent-staff or home-centre relationships and on influence over children's cultural development.

Parents were less likely than staff to perceive that the early childhood centre was a place for parents and families as well as for children. Yet researchers have argued the critical importance of close parent-staff relationships for influencing positive parenting attitudes (Weikart, et al., 1978), enhancing parent satisfaction with their care arrangement (Farqua & Labensohn, 1986), and positively influencing the nature of children's interactions and experiences (Smith & Hubbard, 1988b). Parents were mostly against staff visiting the home, providing information and education on child-rearing, and providing for parents' needs at the centre. In contrast to staff their mean rating of a programme goal of staff-parent partnership was significantly lower. Parents' mean importance ratings of the quality criteria of parent participation in decision-making, informing parents about programme philosophy and practices, and taking family background needs into account in the programme were also significantly lower than the staff mean ratings. Renwick's (1989) research on parent-staff relations in New Zealand kindergartens similarly found that staff viewed parent education, parent support, and close parent-staff relations as more important than parents did.

Apart from parents at the kohanga reo, many parents believed that the influence of the early childhood programme on children's cultural development should be minimal. The parents' ratings of the importance of different "cultural" features of quality were consistent with the low value they placed on such goals. Parents' importance ratings of biculturalism, supporting family values and promoting awareness of other cultures for good-quality educare were low. Podmore and Craig's (1991) hypothesis that some parents of infants and toddlers at childcare centres do not see that their child has any cultural needs could explain this finding; or perhaps parents believed that attending to cultural needs was their responsibility and not that of the centres. Both explanations were supported in the parents' written comments. The significantly higher importance placed by staff on "cultural" criteria of good-quality suggests an awareness of changes in social policy towards equity and acknowledgment of the Treaty of Waitangi in education.

There was some evidence that training affects staff priorities for programme goals. For example, staff who did not hold an early childhood qualification placed more emphasis on the goals of keeping children entertained and promoting moral development than staff who were qualified. The research literature strongly supports the value of staff training because it is related to staff sensitivity and children's social skill development and cognitive performance (Howes, 1983; Howes & Phillips, 1990; Feeney & Chun, 1985). It seems that the processes of acquiring knowledge and pedagogical skills through training affects beliefs, which in turn results in staff behaviour that is more likely to foster positive outcomes in children. There was only a small number of untrained staff in the study sample and so it is problematic to draw conclusions about the relationship between training and staff values. This is a research problem that requires further investigation.

Previous research has pointed to social class differences between parents regarding behavioural expectations of children (Powell, 1989). It follows that social class differences may also affect parent values about early educate. The parent sample was divided into a high household income group (\$30,000 or more) and a low household income group (less than \$30,000 in the past year) for statistical comparison of responses. The low income group rated the programme goals of parent education, fostering children's compliance with rules and social expectations, and keeping children entertained as more important. The high income group placed greater emphasis on the goals of promotion of motor skill development and awareness of other cultures. In rating the importance of different quality criteria the low income group in comparison to the high income group rated staff parenthood experience as more important and they rated qualified staff as less important.

It seems that parents who had greater dependence on their early childhood service for study or employment reasons entrusted greater responsibility for their children's development to the centre and hence defined quality at higher levels in many areas. These areas included the children's education, structural and physical conditions such as adult-child ratio, and parent support criteria such as provisions to care for sick children. Parents who tended to stay at home or parent-helped at their centre gave higher ratings of importance to the children being entertained and being taught to comply with group norms for behaviour. These findings suggest that parents' values are influenced by their needs for child care.

Ethnicity was related to differences in the importance parents attached to quality criteria but not to their ratings of the goals of an early childhood programme. Qualified staff and not excessively punishing children were more important criteria of quality for parents with Pakeha children. Parents with children from ethnic groups other than Pakeha rated biculturalism, non-sexism, provisions for parents needs, parent involvement in decision-making and outings and excursions as more important. These findings underscore the argument that how quality is defined is affected by cultural beliefs and child-rearing practices (Coleman, 1977; Farquhar, 1990).

3. Do Parent and Staff Values about "Quality" Converge with the Philosophy of their Early Childhood Group?

A major difference was noted in how quality was viewed at the Te Kohanga Reo in comparison with the other early childhood groups. Kohanga reo people saw their service as culturally unique and based on a philosophy of early language and cultural teaching for children within a whanau (extended family) environment. Kindergarten, playcentre and childcare people saw their particular service as philosophically unique. For example, in the kindergarten group emphasis was placed on trained staff because it was believed that only qualified professional people should work with young children in an educational capacity, whereas in playcentre the parents were considered to be staff (not assistants to the staff) when they parent-helped.

Each early childhood group provided quality in distinctive ways according to their traditions, practices and extent of public support and funding. Diversity in early childhood practices and values about quality was strongly cherished by each group. This became especially clear when representatives from the centres discussed potential threats to their group's values arising from the new national standards and reforms in the education system.

The values and expectations of parents at any one centre more closely matched their type of early childhood service than any of the other early childhood groups. Te Kohanga Reo parents, for example, had a significantly lower mean rating for the importance of staff who are qualified than the childcare and kindergarten parents. The philosophy of the Te Kohanga Reo movement is that staff who are fluent in te reo Maori are more important than staff who have an early childhood qualification. Kindergarten staff and parents had mean ratings of importance for home-visiting that were significantly higher than the mean ratings of childcare staff and parents. This matches with the traditional practice of home-visiting in the kindergarten service but not in the other early childhood groups.

When compared with the other early childhood groups the following values seemed to characterise the unique quality of Te Kohanga Reo: biculturalism, support of family values and customs, a higher acceptance of punishment for negative behaviour, an emphasis on staff competency in te reo Maori rather than formal early childhood qualifications, and staff taking less of a leadership role.

Parents who used childcare valued some of the practices which representatives from the childcare centres believed characterised the special quality of the service: a stable peer-group for children to get to know each other well, outings and excursions, and meeting children's physical needs throughout the day.

Kindergarten representatives maintained that professional staff were a key ingredient of the quality of their service. However, there was no significant difference between kindergarten staff mean importance rating of staff professionalism and the mean ratings of the other staff groups. Kindergarten parents valued the criterion of professionalism and awarded a significantly higher importance rating to this than playcentre and kohanga parents. Staff joining children in their play was rated as considerably

less important by kindergarten staff compared to other staff groups. Perhaps the emphasis on being professional teachers influenced how staff perceive they should interact with children. The problem of low staff-child ratios in kindergarten may also affect the degree of involvement that staff can realistically have in children's play and the value they can thus attach to this.

Playcentre's parent cooperative playgroup approach was reflected in the lower value that was placed on practices associated with programme planning and programme structure as compared to the other early childhood groups. Meeting children's physical needs and promoting good hygiene habits was rated as less important by playcentre staff compared to other groups of staff, perhaps because this was believed to be more the parents' responsibility than the centres. Playcentre staff ratings of the importance of staff working together as a team, staff meeting to plan the programme and provisions for staff were lower compared to other staff groups. These differences are understandable given that unlike the other centres the playcentres had only a single staff member (a supervisor) working at any one time and they did not have a staffing structure.

4. How do the Views of New Zealand "Experts" Compare with those of Parents and Staff on the Criteria which are Important for Ensuring Good-Quality Educare?

There were more differences between the views of parents and staff than between the views of staff and experts. This is an interesting finding because it suggests that due to staff role or training, staff are similar to experts in their perspectives on quality.

The findings on differences between parents' and experts' views reinforced other data showing that parents placed low priority on the importance of parent-staff relationships and children's cultural/bicultural development. In addition, parents' ratings of provisions for special needs children, a balance of indoor and outdoor activities and programme evaluation were significantly lower than experts' ratings. This suggests that the national value-base for early education articulated in the Meade Report (1988) did not have the parents full support.

Staff differed from experts and parents in their ratings of some quality criteria. An explanation is that staff are likely to experience greater work-place stress than experts and parents because of certain conditions (Jorde-Bloom, 1986; Whitebook & Ginsburg, 1983). Staff valued the conditions of a stable group of children, opportunities to take children on outings and excursions, and clear pathways between activity areas much more than either experts or parents.

The experts' ratings of the importance of a home-like atmosphere, a clean environment and teaching children personal hygiene were significantly lower than the parent and staff ratings. This suggests that views of quality are influenced by whether a person is directly involved in a setting and is able to be affected by how pleasant the setting is in terms of hygiene and inter-personal behaviours and communications.

5. What are Parent and Staff Perceptions of the Quality of their Centre's Environment and Practices?

Parents and staff had definite opinions about what they liked and didn't like about their particular centre. It was interesting that while every parent expressed one or more things they liked, not every parent mentioned something they disliked. This suggests that parents had higher levels of satisfaction than dissatisfaction with their centre's quality (Swain & Swain, 1982). It may also suggest that either parents did not want to personally admit to any problems in the centre they chose for their child (Pence & Goelman, 1987), or they accepted the quality of their centre knowing that it was their only or best option (Lamb & Sternberg, 1992).

References to the programme being a good one or to the presence of lots of interesting activities were often made by parents. Also receiving considerable praise from parents was staff competency in providing quality care, how happy their child was in being at the centre and the good work of staff. Staff in their statements about what they liked focussed mainly on the atmosphere at their centre, the kind of programme provided for children and social relationships. Relating well with colleagues, forming relationships with children and a supportive hard-working committee or management were important to staff.

Of the forty-eight percent of parents who expressed something they disliked, this was most often to do with a particular policy at their centre such as not being allowed to take siblings when they assisted staff at the centre or on excursions, the standard of physical care provided for their child, or the social dynamics of the setting (eg. staff inconsistency in child behaviour management and bullying of their child by other children). There was noticeable agreement amongst parents at one kindergarten in their dissatisfaction with the personality and performance of a teacher. Of the eighty-seven percent of staff who were critical of some aspect of their centre, their concerns were mainly about an inadequate budget to provide a quality service, insufficient staffing, a lack of equipment or appropriate play materials, and difficulties experienced in supervising children because of their centre's building size or design. Some childcare staff were particularly concerned about the attitudes and low level of education of some of their colleagues who were untrained.

When asked to rate how well their centre performed on different criteria of quality, both parents and staff awarded very low ratings for a written programme schedule, provisions for sick children, recognition of individual differences amongst children in the programme, biculturalism and community involvement. Practices relating to parent-staff communication and home-centre relationships also received very low performance ratings from parents and staff. For example, centres were perceived not to be doing well in providing parents with information about children's activities and they were not adequately providing for parents' needs in the physical environment.

6. How are Definitions of Quality Reflected in Early Childhood Centre Practice?

Organisational and philosophical characteristics of the early childhood groups affected how well centres were able to meet the various criteria of quality in practice. Observational data and discussions

with staff about the observations suggested that individual centres had difficulty in fulfilling staff and researcher expectations for quality due to problems that included lack of relevant centre policy on certain matters (eg. the care of sick children), staff skills and confidence levels (eg. in working towards biculturalism), staff awareness of the implications of some of their practises (eg. behaviour management), physical resources, centre finances and staff time. Centres were observed to be lowest in quality on criteria pertaining to equity issues and highest on criteria related to the social climate and care of children.

Parents who rated the following criteria as more important had their children enrolled at centres which met the criteria to a higher level on the QRC measure: staff care about children, a sensitive settling-in process, a written programme schedule, qualified staff, staff are parents themselves and home-visiting. Staff health and hygiene was observed to be lower in quality at the centres where parents placed more importance on this. There was some evidence of the influence of staff beliefs on centre quality. Staff who rated the importance of home-visiting, a pleasant atmosphere and informing parents about any infections that children might catch from one another worked in centres which met these criteria to a higher level.

Figures 1 to 6 showing parent and staff mean scores of the importance of individual quality criteria placed alongside the corresponding mean observation scores for centre practices illustrated some sizeable differences between importance and practice scores. Observed practices tended to be better than how important parents and staff believed the practices to be on the criteria of community involvement, use of outside specialists, staff experience as parents, staff work experience with young children, clear pathways between activity areas, parents being encouraged to have contact with the staff and centre, and a stable peer-group. Observed practices were well below the importance for quality that parents and staff expected on the criteria of: group-size, promoting awareness of other cultures, biculturalism, staff responsiveness to children, staff involvement in children's play, a balance of indoor and outdoor play, staff health and hygiene, teaching children good personal hygiene, and meeting children's physical care needs.

7. What Form did Charter Development Take in Centres and how did Discussions Contribute to Constructing and Understanding Quality

The process of charter development varied somewhat across and between the kindergartens, childcare centres and playcentres. There were differences in the methods of consultation used and the extent to which staff and managers/committee members tried to seek the views of others. Approaches to drafting the charter and the extent to which staff and parents were involved in writing their charter also varied. These differences were influenced by the kind of management or committee structure a centre had, how parents were already involved in decision-making, the value managers/committee members perceived in involving others (there were particular differences between the childcare centres on this), and a lack of clear consistent guidelines on how to go about the process.

Difficulties in obtaining parents' participation were experienced, resulting in the use of some ingenious techniques and incentives to encourage participation. Social occasions were a useful and common method of carrying out consultation because a higher turnout of parents resulted in contrast to formal meetings which attracted fewer parents. However, substantive discussion about issues of quality was in all cases limited by the social aspect of occasions such as family-teas and pizza-making sessions.

Across the centres there was some degree of consensus that the principles and requirements as specified in the Management Handbook were important and positive for promoting the quality of educare. But there were two main areas of contention about the content of charters: the Treaty of Waitangi and Special Needs. These two areas were definitely ones that staff and parents needed more time to work on, and more time to consult with parents with special needs children, special education specialists, and members of the local Tangata Whenua. A main concern was not having the staffing and resources to implement these two areas at the levels stated in the charter guidelines. In addition, many staff felt that they did not have the confidence to introduce Maori language and were also unsure about how they could cope with caring for children who ranged in the type of special need they had. The staff experienced parent pressure during consultation discussions to not include a charter statement of acceptance of children with special needs. Many parents feared that acceptance of special needs children would result in their own child missing out on staff attention. Some parents were also resistant to incorporating te reo Maori because they felt that it was important for their child to learn to speak English properly first and that if their child was to learn another language then an international language would be more useful.

Charter development led to improved communication between parents, staff and managers/committee members on centre practices and policies, as well as on views about quality. This was particularly the case at one childcare centre where discussion about individual sections of the charter was on the agenda of fortnightly staff meetings and it was regarded as being beneficial for staff development. Many people, though, disliked the fact that there were major parts of the charter which were non-negotiable and had to be incorporated. As the process of charter development continued in centres people realised that discussions would, in the end, have little influence on the content of their charter.

Pen Portraits of Quality for the Different Groups

Te Kohanga Reo

Te Kohanga Reo is different from playcentre, kindergarten and childcare in being associated with cultural rather than solely social and educational purposes. Many of the research-based indicators of good-quality were considered important by staff (kaiako) and parents, but excellence was defined more strongly in terms of people and whanau commitment to the operation of kohanga, and the teaching and reinforcement of cultural traditions, beliefs and language. People, rather than programmes, policies and equipment, were regarded as the key contributor to quality in the kohanga.

The two kohanga reo were very different in location (rural - city), building (marae hall - urban house), stability of staff (one kohanga had just had a change in kaiako), the needs and characteristics of their families (employed workers and students - a mixture of unemployed and rural life-stylers), financial support (one was well-supported by its institution the second was running on a shoe string budget), and administrative and academic support (eg. one kohanga was able to easily draw upon the expertise of staff at the University and College of Education). Yet members of both kohanga reo defined quality from a cultural perspective. Educational and care considerations, parent needs and social goals were encompassed by and secondary to defining quality in terms of cultural aspirations for whanau development, increasing the number of young Maori language speakers, and affirmation of the cultural identity of children and whanau members.

Quality in the kohanga settings included values of: communicating and teaching te reo Maori, staff ability to speak te reo Maori, parents as learners and parent involvement at both programme and administration levels, and a whanau system of working together for children, families, staff, and kaumatua (elders). Parents' mean rating of the importance of non-excessive punishment was lower than other groups of parents and significantly lower than the mean rating of childcare parents, which suggests greater acceptance or tolerance of punishment in the kohanga setting.

There were some elements of quality that were particularly important from the parents' perspective. These were the type of education provided with a focus on children being taught te reo Maori and nga tikanga Maori, the relaxed home-like atmosphere which provided a "sense of belonging" and "caring", and that the kohanga provided an extended family which was particularly important for families who felt culturally and socially isolated. Note that Otago has only a small Maori population of approximately four percent.

The style of teaching (including child behaviour management), programme structure, and the appropriateness of educational activities and staff expectations received criticism from some parents. Their concerns seemed to be linked to the practice of employing staff on the criteria of fluency in te reo instead of on whether staff were trained in providing early education and care.

Parent and staff comments suggested that greater parent commitment and involvement was needed and wanted. Like many of the other early childhood centres in the study, the kohanga were no exception in having a hard core of involved and committed parents. The Government Review Team (1988) suggests that whanau development through the Kohanga Reo movement is threatened unless a large number of parents and others actively participate and share the responsibility. In the kohanga there was an implicit obligation to be involved either through whanau committee meetings, assisting in the programme (eg. washing dishes and talking with parents and children) or at weekend working bees.

One way of achieving greater whanau involvement could be through techniques to increase parents enjoyment and motivation for learning alongside their children. For example, a parent stated that

instead of "lessons" she would prefer relaxed Maori conversation among the whanau. However, a reality (which applied to all parents across the early childhood groups) was that some parents simply did not have the time to give or for various reasons did not wish to have much involvement. One parent stated in her questionnaire that she wished the whanau could be more supportive of parents who "have problems" and were not able to participate.

Playcentre

The playcentre group strongly valued its autonomy as an early childhood service. For example, playcentre representatives indicated that it was vital for their beliefs and style of self-management to hold on to at all costs through the charter development and negotiation processes. Playcentre representatives were more upset and angry than the representatives from the other groups because they believed that they did not need government officials to help them to write their charter. Not surprisingly, playcentre had the least trouble out of the early childhood groups in articulating its philosophy during charter preparations.

A quote from one of the representatives sums up playcentres' most important determinant of quality: "playcentre is only as good as its parents". Representatives maintained that parents who were familiar with and understood playcentre philosophy, as communicated and taught by the local playcentre association and National Federation, were the foundation of a good-quality playcentre.

In the playcentres there was a high degree of parent involvement and emphasis on parent learning through being part of the programme. This had parallels to the kohanga reo, making kohanga and playcentre probably more similar to each other than to any of the other early childhood groups. But whereas the emphasis in the kohanga was on parent participation to learn te reo to support children's learning, in the playcentre it was on supporting parents in their child rearing. Playcentre was more of a parent-centered than a child-centered service. The educational programme provided for children was child-centered, as in the other early childhood groups, but the service itself was aimed at parents.

The two playcentres were diverse in a number of ways. One playcentre had a trained kindergarten teacher as the supervisor which was unusual because usually supervisors are playcentre trained. The population served by the playcentres differed because of their different locations (urban and rural). However, differences between the playcentres were not apparent in definitions and agreements about quality. Observed differences in the quality of the two playcentres were mainly due to physical and building conditions which affected the social atmosphere, organisation of space and materials, ability to provide a separate space for a sick child and for parents to have some where to sit and talk.

Parent involvement in constructing the quality of their particular playcentre was noticeable in the way that almost all parents were involved and made some kind of contribution to charter development. It was also clearly evident in the very high response rate of parents to the questionnaire as part of the study. The rural playcentre went to greater lengths than any other centre in the study to involve its community through holding a meeting at a local pub and providing supper.

The parent-centered approach of playcentre was further evidenced in the programme goals parents and staff rated as significantly more important or less important in comparison with the other early childhood groups. Parent education was a more highly valued goal from the perspective of playcentre parents. Playcentre staff gave a much lower rating of importance to the goal of encouraging children's independence from parents which supports playcentre philosophy of providing for both parents and children.

Significant differences between playcentre respondents' mean importance ratings of quality criteria and respondents' ratings from the other early childhood groups suggests that in playcentre less value was placed on the structuring of children's play by adults. The criterion of a written programme was less important to staff and parents for good-quality. Staff meetings for programme planning, a balance of indoor and outdoor activities and activities designed for different numbers of children were also less important for quality according to staff.

Some differences between early childhood groups in respondents' ratings of quality criteria reflected the parent cooperative nature of playcentre. The criteria of provisions for staff needs and team-work amongst staff received lower ratings of importance by playcentre respondents probably because a staffing structure did not exist at the playcentres as it did at the other types of centres.

Staff and parents at the playcentres placed less importance on criteria of quality related to staff assuming some of the parents' primary care responsibilities. For playcentre staff and parents as compared to the childcare and kindergarten groups meeting children's physical care needs was less essential for ensuring good-quality. Moreover, teaching children good health and hygiene received a significantly lower mean rating of importance from playcentre staff as compared to all three other groups of staff.

Childcare

The care dimension was strongest in the childcare centres. This finding was not surprising given the political herstory of childcare and society's perception of it as a custodial rather than an educational service (May-Cook, 1985). The historical purpose of meeting parents' needs for childcare was reflected in the higher value childcare parents placed on two programme goals: to provide warm loving care and for children to learn to relate with other adults. The childcare parents' mean importance ratings of particular quality criteria further pointed to their reliance on the provision of care and family-type experiences from the centre. For example, the importance of children's physical needs being met was rated significantly higher by childcare parents as compared to parents using the part-day playcentre and kindergarten services. Childcare parents placed higher value than kindergarten parents on the importance of a stable peer-group and children being taken on outings and excursions.

Diversity in staff training and personal background was an important distinguishing characteristic of the quality of childcare according to the childcare representatives. The childcare centre sample had fewer

trained staff, a greater range of qualifications amongst its trained staff, more variation in the level of staff school leaving qualifications, and a wider age-range and greater ethnic diversity amongst its staff, in contrast with the other early childhood groups. Diversity in staff training and background may have been claimed to be a distinguishing characteristic of quality because the representatives believed that a fully qualified staff at every centre was not possible to achieve, and they therefore focussed on the positive rather than the negative aspects of this. Poorer working conditions were experienced by childcare staff in comparison with the kindergarten staff. There was a clear shortage of trained people available and willing to work in childcare. For example, the community childcare centre advertised for three weeks in the newspaper and received only a handful of replies, none of which were from suitably qualified applicants.

Differences in staff training, the number of trained staff and staff backgrounds were possibly one reason why there was greater observed variation in quality between the childcare centres than among the other groups. The degree to which management, head staff and staff worked together and everyone participated in decision-making may also provide an explanation for the observed wide variation in the quality of the childcare centres. The childcare centre which was observed to be high in quality (Centre I) had a head staff member who worked collaboratively with her deputy and staff in discussing and drafting the content of their charter during fortnightly staff meetings. In contrast the childcare centre which was lowest in observed quality (Centre H) had comparatively little staff involvement in decision-making.

There were large differences between the childcare centres in parent involvement in charter development and how staff/management approached consultation. The differences were linked to staff and management beliefs about the extent parents should be involved in management decisions and consulted about the programme. Differences were also linked to parents' expectations of the degree of input they should have. At the community based centre (Centre G) many parents attended the first few charter meetings. As time went by fewer attended because they were disillusioned with the charter development process or for other reasons, but not because they didn't feel some obligation as users of the service. At the public institution centre (Centre I) parents participated in consultation mainly because of direct approaches by staff. At the private centre (Centre H) parents were reluctant to be involved and the manager explained and justified this in saying that parents' chose the service because they knew they could leave their child and have no involvement.

Representatives from all three centres stated that parent involvement was difficult, if not often impossible, to get. Many parents were working and had commitments or stresses that precluded their involvement during the day and attendance at night/weekend meetings. Representatives believed that parents selected childcare rather than kindergarten or playcentre because of childcare's flexibility to cater for parent needs. The childcare centres were much more consumer-oriented whereas the other early childhood groups were driven more by principles or philosophies of education, cultural renaissance, good parenting and parent empowerment.

Kindergarten

Constructions of quality in the kindergartens reflected the traditions and public funding of the kindergarten movement. Charter discussions led to individual kindergartens looking inwardly at themselves to articulate the beliefs that underpinned their programmes and what they valued as quality practice. However, it was probably because of the national framework and policies of the kindergarten organisation that discussions about quality continually came back to the issues of inadequate staff-child ratios, and to staff beliefs about programme content, parent-staff relationships and how best to promote children's learning.

At each of the kindergartens sub-committees of parents and staff carried out consultation and prepared their charter. It was a collaborative approach, although the staff and a hard-core of committee members made different kinds of contributions. The staff took on the job of writing descriptions of the programme and making daily contact with parents to remind them about meetings or questionnaires. The committee members took responsibility for planning and implementing the consultation processes and for drafting non-programme sections of the charter such as centre description and management. At kindergartens where more two-way communication about what staff did in the programme was supported (particularly in Centre E) the staff still had the final say on programme practices and what was best for children.

Parent and staff ratings of the importance of home-visiting were significantly higher than one or more of the other early childhood groups, reflecting that this was a known kindergarten practice. The parents' mean importance rating was still very low but the size of the staff mean rating suggested that they viewed home-visiting to be desirable. Parents' written comments suggested that they felt threatened by someone who they viewed as a professional visiting them in their home. Renwick's (1989) study of kindergarten parent and staff relations also identified this concern amongst parents. Parents' and staff perception of staff as professionals seems to be a barrier to achieving closer and more reciprocal parent-staff relationships.

Staff professionalism, primarily due to staff all having the same high level of pre-service teacher education, was stated by kindergarten representatives to be a main defining characteristic of kindergarten quality. This feature of quality was focused on in many charter discussions at kindergartens because teachers and parents were angry and upset that this might change with the new national requirements for at least one staff member to every fifteen children. Staff felt threatened because they did not want it to appear that their work could be done by a parent. Parents were upset because a possibility was the introduction of fees to pay for more staff, or that they would be required to regularly act as staff when they valued the benefits of the educational training of staff for their children.

Segregation of children into two groups of younger and older children attending different sessions was another characteristic of kindergarten quality according to representatives. Their reasons included that children learnt best when they were with the same age peers and that staff were more able to focus on children's learning needs when there was not a wide range in ages. Parents and staff were not questioned on the importance of age-segregation in their questionnaires, but this probably was not necessary in any case because no one included this feature of quality in their descriptions of a good-quality centre. Age group segregation could have helped to ensure better quality because of the low staff-child ratios, but it was not an indicator of good-quality.

The importance of staff joining children in their play was rated significantly lower by kindergarten staff in comparison with other staff groups, which suggests that probably staff believed that this was very difficult to do due to low staffing ratios. Observed practices of quality tended to be lower for the kindergartens in areas that were affected by staffing.

Chapter Summary

This chapter has provided a synopsis of the study's findings relevant to each of the research questions. In addition, the data pertinent to explaining and understanding the general quality of each of the four early childhood groups has been outlined. The next chapter provides some concluding comments.

Chapter Eight

C O N C L U S I O N

Contributions to Understanding Quality

Methodological

This study differs from traditional research studies published in early childhood and child psychology journals. It could have been another study of "quality" defined by a handful of features shown empirically to have benefits for child outcomes. The alternative taken in the study was to ask people who were directly involved in educare what their views and beliefs were and to observe centre practices. The methodology of the study has made it possible to generate information about constructions of quality from different people's perspectives and early childhood groups. Because the findings are grounded in the natural setting of the early childhood centre much of the contextual detail and information about values is specific to New Zealand and particularly to the centres involved in the study at that point of time.

The thesis represents an attempt to bring the main empirical concerns of defining quality and quality assurance together. Usually researchers focus on trying to isolate and measure the effects of variations in certain centre variables on children or they use global measures of quality to compare how well centres are performing. In this study data on definitions of quality were examined separately as well as related to centre practices, policies and philosophies, and to the charter development process.

As argued in the review of the literature at the beginning of the thesis little attention has been given to how quality is defined within centres. This means that empirical research has had a narrow focus. Takanishi (1981) and Belsky et al. (1982) among many other advocates for a more ecological and qualitative approach have argued that the research to date generally fails to recognise the realities of early childhood centres and does little to foster positive relationships between practitioners and researchers.

A more pluralistic research approach was taken in the study to attempt to provide a broad understanding of the quality of early childhood centres. The research questions demonstrated concern for understanding the context within which quality educare is provided and children's development is influenced. In addition to examining the nature of children's, staff, and parents' experiences, other issues were also considered in the study. These included: the cultural and philosophical differences between early childhood groups, health and safety policies, staff

relationships, parents' needs, centre resources and funding and the impact of new educational policy on centres.

Certain features of the methodology proved to be particularly good for researching the questions of the study; namely, the multimethod approach, triangulation of different types of data, the Delphi technique and participant-observation. The use of some feminist principles of research and a commitment to try to achieve ecological validity have all helped to provide meaningful, descriptive and explanatory results.

A multimethod approach was taken to collect multiple sets of data (Brewer & Hunter, 1989). Gathering data from a variety of sources has helped to strengthen the conclusions of the study. The data generated from each method has enriched and complemented the data collected using other methods. Contradictions or differences between sets of data were identified through the triangulation of data.

The traditional Delphi approach using a series of anonymous questionnaires was modified for the study to enable participants to be actively engaged in discussion and reflection on their own and others' points of view. The Delphi method was useful for obtaining qualitative data on differences between early childhood groups and charter development. Participating in the study was a significant time commitment for centres but the research meetings facilitated involvement because they provided an opportunity for people from different centres to share experiences and knowledge.

I tried to demonstrate a commitment to understanding the meanings and everyday experiences of centre people through using the methods of organising meetings for centre representatives, participant-observation at charter meetings, and participant-observation for examining the quality of centre practices and environments. These research approaches were valuable in helping to foster a positive relationship between myself and the study participants (Lather, 1988; Takanishi, 1981). As Oakley (1981) among many other writers about feminist methods of research have argued, if the researcher wants to find out about people's experiences and values then it is important to have a friendly, supportive, and non-hierarchical relationship with them. Meacham (1980) has characterised this kind of researcher-participant relationship as a dialogue or a conversation as compared to a monologue or an interrogation where the researcher remains detached, objective and value-free.

There are few studies on views of quality which involve Te Kohanga Reo. Within Maoridom research is looked upon with some suspicion because of a history of what Lather (1988) calls "rape research" whereby "the ones doing the looking are giving themselves the power to define and describe" (Mita, 1989, p. 30). I knew it would be difficult to carry out research on Te Kohanga Reo given Maori people's distrust of research (Bishop & Glynn, 1992; Smith, L. 1991b).

Feminist methodological principles of reflexivity, reciprocity, a non-hierarchical relationship between myself and the participants, and a commitment to sharing the findings were conducive to the whanau agreeing to participate. Through dialogue between Karina (Maori co-researcher), myself, and the

local branch of the Te Kohanga Reo Trust the methodology used in studying the other early childhood groups was changed and modified for the kohanga reo. For example, some of the key words in questionnaires were written in Maori and observation of centre quality was not carried out because it seemed to be inappropriate and could have negatively affected the chances of future research being allowed in Te Kohanga Reo.

A particular effort was made in the study to be sensitive to a Maori perspective on doing research. Few methodological guidelines were, however, available at the time I was making decisions on the methodology. Since then I have read Bishop and Glynn's (1992) article on conducting and evaluating educational research. Criteria for research on Maori people and settings as outlined by the authors were discussed in the methodology chapter. In the light of the Bishop and Glynn article, my own experiences and feedback from Karina, the District Trust, and kohanga reo whanau there would be some changes to the study if it was done again.

I would not work on a time-line and I would allow as much time as needed to carry out consultations with kohanga reo whanau, administrators and elders. During this time my concern would be to discuss and reach agreement on research questions of particular interest to Maori. The methodology would be developed for researching the kohanga settings rather than modified to include the settings. I would not attempt to use questionnaires because of the very low response rate in the study, even though Karina was available to read the questions and to fill in responses for parents. Interviews using an open-ended question format and unobtrusive observation of discussions at whanau committee meetings might have been more fruitful.

I have learnt the need for and importance of having a Maori co-researcher. Working together in partnership enhanced my sensitivity and challenged my cross-cultural competence as a researcher. A paper prepared by Karina and myself was warmly welcomed by the kohanga whanau. The paper has since been used as a basis for identifying ways of further improving the kohanga and for adding to the (written) knowledge base about kohanga reo. One kohanga has accepted and supported other students (Maori students) from the University in their research projects.

Theoretical

Evidence from the study supports the argument that "quality" needs to be defined with respect to the values and needs of people in specific societies and subcultures rather than in terms of universal dimensions (Coleman, 1977; Lamb & Sternberg, 1992). The study has shown how "quality" can be defined in ways other than positive outcomes for children. For example, "quality" may be defined in terms of benefits for families, staff and the survival of a culture. The study has highlighted the importance of adult dimensions of quality (for example, staff conditions of work), cultural dimensions including differences between Maori and Pakeha samples, and variations between the practices and philosophies of four early childhood groups. Other perspectives can enrich the science of child-development view of quality by providing further insights into the complexity of identifying what constitutes good-quality practices and environments in centres.

The study shows the relativity of definitions of quality. People make value judgements in appraising the quality of educare and their values are affected by previous experiences, the characteristics of their early childhood group, and cultural, social and educational beliefs. For staff, values are also affected by the conditions they work in, the characteristics and attitudes/beliefs of their colleagues, and their education and training experiences. The study fully supports Smith's (1992) argument that researchers should be concerned with people's values and preferences as well as the effects of the socio-political context on the quality of educare as experienced by children and families.

International and Empirical

The study contributes to the international literature because it is grounded in New Zealand educational practices and social-cultural beliefs. The majority of research has been produced in North America and Britain and it is this research that has mainly shaped our knowledge and had a major impact on our understanding of what constitutes quality. In New Zealand we need research that is appropriate and directly relevant to our early childhood settings.

The focus on meanings and constructions of quality in the study was clearly different to the usual research emphasis on features of the early childhood setting that are observable, measurable and can be shown to be predictive of child outcomes. How the parents, staff and early childhood groups viewed quality was different in many respects to the empirical views of quality explained in numerous publications (for example, Phillips & Howes, 1987; Ruopp et al., 1979). This conclusion supports Takanishi's (1981) statement that researchers need to pay more attention to the kinds of questions and issues of most interest to those involved in early childhood centres.

As mentioned in the introduction to the thesis a values-based approach to researching educare quality is a recent one. There is little research that attempts to look at social, educational and cultural constructions of quality. In the results chapters comparisons with international research findings were mentioned where appropriate. Here, I'd like to draw your attention to contrasts between the study's

findings and the research studies by Tobin et al. (1989), David (1992) and Langsted (1992) which have each been concerned with people's perspectives and values.

Tobin et al's (1989) study of preschools in three countries was a mammoth cross-cultural undertaking. One pertinent finding is that in Japan a large group size was believed to be better for orienting children towards their peer group and reducing their dependence on preschool staff. The Otago kindergarten staff in this study would disagree because they were dissatisfied with the large number of children they had to daily cope with. Across the centres, staff and parents valued a smaller group size and a larger number of staff to children because they saw this as linked to children receiving more attention from staff and better care and education.

David (1992) examined why British and Belgian parents wanted their children to attend an early childhood centre. British parents emphasised the need to ensure children's success at school and they wanted the help of early childhood staff to achieve this. Belgian parents mainly wanted children to learn independence, social skills and to develop naturally according to their inner drives. The views of the Belgian parents are closest to those of the Otago parents. The goal of preparation for school was rated by the parents in this study as being of little importance, although their mean rating was higher than the staff mean rating. Parents and staff both placed high importance on quality criteria specific to the promotion of children's social development and providing a child-centered approach to learning. On a few occasions when parents at charter consultation meetings asked for more directed teaching experiences for children or for certain types of play to be withdrawn (eg. sand play because sand got into children's clothes) staff were able to convince parents that this was not appropriate or they came to some agreement to partly meet parents' requests. The data suggests that New Zealand educational reforms will not necessarily present a risk to the child-centered curriculum approach (Meade, 1985a). In contrast, David (1992) believes that British education reforms have led to a more instrumental system where reading and writing at an early age is given more importance than playing and socialising with peers.

The aspects of five-year-old Swedish boys' early childhood centre experience that they valued and remembered most clearly (Langsted, 1992) were reflected in parents' definitions of quality educare in this study. According to the boys' interviewed by Langsted (1992) the primary quality of their early childhood centre experience was having other children to play with. The second most important dimension of quality was having fun and this included play activities and going for walks and excursions. The boys mainly remembered staff in terms of the warmth of their interactions and interventions to resolve conflicts. The parents in this study valued the importance of children being happy, having other children to play with, a range of interesting play activities and staff who cared about them. When parents expressed concerns about staff these were mostly about staff personality, warmth, and supervision skills or ability to ensure that all children were always supervised.

Some Practical Implications

The findings support Carr and Claxington's (1989) call for early childhood staff to develop arguments for what they believe to be important, particularly in the areas of parent involvement and parent-staff relations, biculturalism, integration of children with special needs, and children's development of cultural identity and awareness of other cultures.

Staff need to reassure parents that their own child will not miss out on staff attention or be disadvantaged in any way by the enrolment of children with special needs. In a similar fashion, parents may need to be convinced of the value of biculturalism. Parents who argued for multiculturalism and against biculturalism need to be convinced of the importance of resolving the relationship between Maori people as the *tangata whenua* (indigenous people) and Pakeha people as the other partner to the Treaty of Waitangi (Government Review Team on Te Kohanga Reo, 1988).

Can staff encourage or even force parents to be more involved? Staff could look more to parents for cues as to how best to promote positive and reciprocal relationships. For example, many parents expressed a wish for improved communication about their child or they indicated how much they valued staff communication. The staff at Centre I responded to parent feedback on this issue by introducing a checklist for staff to complete at the centre and for parents to complete at home so that comprehensive information about a child's care and well-being could be quickly and regularly shared.

Staff need to explore appropriate and acceptable methods for parent involvement, rather than giving up and making excuses that parents are not interested or that they do not have the time. Staff could experiment more boldly in changing the boundaries and barriers that exist between them as professionals and parents. There is an obvious need to explore ways of providing parent education that fit into the busy lifestyle of parents and that also recognise issues such as the cost of a babysitter which may limit parent involvement.

Suggestions for Further Research

Having completed this research study some questions and issues arise which suggest possibilities for further research. It was inevitable that questions which were not envisaged during the design of the study should arise as an outcome of it.

In hindsight I regret not exploring children's views of the quality of their centre. There has been little research on this. Recently at a European Conference on Developmental Psychology I met researchers involved in exploratory work on what children think about their early childhood centre experience, for example Langsted (1992). However, the kind of research carried out for this thesis has been a useful direction for future research.

There is a possibility that staff ratings of the importance of biculturalism, supporting children's own culture and promotion of cultural awareness reflected the government's social policy emphasis on goals of equity. Staff commitment to "cultural" criteria in their practise was shown to be weak on the QRC observation ratings at the kindergartens, playcentres and childcare centres. Because references to the Treaty of Waitangi and equity issues are now optional in charters it would be interesting to ask early childhood staff again about how important they rate such criteria in terms of providing a quality programme. It would also be interesting to examine whether practices are now stronger or weaker in centres as a consequence of time and changes in government commitment to issues of equity in education.

Future research could help to clarify the consumer behaviour of New Zealand parents, how they go about choosing their centre, what resources they have got to base their decision on, and in what circumstances they choose to change their centre or to discontinue using centre-based care. More information is needed on the extent to which parents select an early childhood group which matches their needs and values or whether they come to hold the values of their centre after exposure to these.

Another major area for research is the management perspective on "quality". For example, there are questions of what characteristics are looked for when selecting new staff, how management decides on spending priorities and whether this differs between early childhood groups. There are also questions of how management views its relationship with staff, how it supports staff work with parents, and to what degree management views influence staff behaviours and efforts to provide a quality programme.

Limitations

The findings of this study relate to the eleven early childhood centres, the parents and staff who participated in the study and the experts who contributed their views. The findings are not intended to be nationally representative. The region of Otago, the characteristics of its population and range of early childhood services, differs from other regions. For example, some North Island regions have larger Maori and Polynesian populations than Otago. This study has only looked at four types of early childhood programmes and there are other services which could have been studied, for example, family-daycare and language nests for different Pacific Island groups.

It should be noted that the data on differences in ratings of goals and quality criteria within the parent and staff groups are exploratory only. The groups were not selected to examine the relationship between variables such as parents' household income level or staff qualification and respondents' values.

The data on quality in Te Kohanga Reo is limited in contrast with the information obtained from the other early childhood groups. Unfortunately it was beyond the scope of the study (my resources and time) to develop a more appropriate methodology for the study of kohanga reo. The changes made

to the methodology were, however, praised and commented on by the District Kohanga Reo Trust. Communication with the kohanga reo whanau after the study was completed suggested that they were pleased with the outcomes of the research and were disappointed that whanau members had not participated in it more fully.

This study has shown the importance of values for a variety of different people concerned about the quality of early childhood centres. Such perspectives have not previously been emphasised but I believe that they widen and enrich the early childhood literature. I hope the study encourages people at all levels (in centres, policy-making, administration, staff training and academia) to look at quality as a values-based concept and to closely examine the implications of the findings from the perspective of their involvement or interest in educare.

Appendix A

Appendix A(i) Parents' Questionnaire

Dear Parents

I am trying to find out what things are crucial to quality in early childhood education and care. The views of parents are of central importance. It would help me greatly in my investigation if you would take the time to complete this questionnaire. This information will also be very useful for your centre.

Please do not be put off by the length of this questionnaire. You should find that it will be quite quick to complete because most questions only ask you to choose from among the responses provided.

This questionnaire has been designed to find out what families need and believe to be important for children. A summary of this information will be given to the teachers and committee members, and this should help in preparing the new charter for the centre. Your answers will also help me to identify what quality is from the parents' perspective and the results will be reported to the Ministry of Education who are supporting this investigation. Please be assured that your name and individual answers will be kept confidential in all verbal and written reports of the results (within the centre and beyond).

Please complete and return the questionnaire by **Thursday 22nd February** to your centre. If there are any further comments you would like to add about this questionnaire or your centre please write these on the back of the last page. An envelope is attached to place the completed questionnaire in to ensure confidentiality.

If you have any queries or require assistance please call me ph 798-619 (Education Department, University). Or leave a message if I am not in the office. Thank you in anticipation for the time and effort you will spend on the questionnaire.

Sincerely

Sarah Farquhar

(Ph.D. Student)

P.S. If you do not have room to complete the questions in the spaces provided, please use the back of the pages.

SECTION A

1. How did you first hear about this centre?

2. Did you look at any other early childhood centres or inquire into any other forms of care before deciding on this centre? YES / NO, Why?

3. Are you currently using any other form of pre-school/child care arrangement? YES/NO What? and Why?

4. What is your involvement in the centre? (*for example, parent-helping, attending meetings, etc.*)

5. What features of the centre are you most happy with?

6. What features of the centre are you least happy with?

7. Please define and describe what a **good -quality** early childhood centre is from your point of view:

SECTION B

The statements below describe goals and principles of early childhood centres which are important to different people. What is your view on the importance of these goals? Please **circle the number** on the rating scale that best reflects **how important** you feel each goal to be.

Importance
4 = very important
3 = important
2 = moderately important
1 = not important

- | | |
|--|---------|
| 1. Teach pre-school skills (e.g. alphabet) | 4 3 2 1 |
| 2. Provide warm loving care for children | 4 3 2 1 |
| 3. Parent education (e.g. information on child-rearing) | 4 3 2 1 |
| 4. Help children to develop self-confidence | 4 3 2 1 |
| 5. Encourage children's independence | 4 3 2 1 |
| 6. Encourage social relationships with other children | 4 3 2 1 |
| 7. Encourage children to learn to relate with other adults | 4 3 2 1 |
| 8. Promote children's spiritual development | 4 3 2 1 |
| 9. Foster children's compliance with social/group expectations/rules | 4 3 2 1 |
| 10. Meet children's individual physical needs | 4 3 2 1 |
| 11. Provide a safe and secure environment for children | 4 3 2 1 |
| 12. Assist children to develop their language skills | 4 3 2 1 |
| 13. Promote children's aesthetic development (e.g. drawing) | 4 3 2 1 |
| 14. Keep children entertained | 4 3 2 1 |
| 15. Promote intellectual development/conceptual understanding | 4 3 2 1 |
| 16. Provide opportunities to practice and develop physical skills | 4 3 2 1 |
| 17. Partnership with parents in providing early education/care | 4 3 2 1 |
| 18. Supports children's individual learning characteristics/style | 4 3 2 1 |
| 19. Promote language and values of children's own culture | 4 3 2 1 |
| 20. Promote language and values of other culture(s) | 4 3 2 1 |
| 21. Promote children's moral development | 4 3 2 1 |
| 22. Provide support and friendship to parents | 4 3 2 1 |

Any other important or very important goals?

SECTION C

This section seeks information about:

(A) How important you believe each of the features listed below are for quality early education and care, and

(B) How you feel your own centre rates on these features.

For each of the features below, please draw a **circle** around the number on each of the two rating scales which best reflects your views.

Importance	Rating
4 = very important	3 = met
3 = important	2 = partially met
2 = moderately important	1 = not met
1 = not important	

Children's Happiness

	Importance	Rating
Staff show a caring attitude towards the children	4 3 2 1	3 2 1
Staff are responsive to children (e.g. listen and reply)	4 3 2 1	3 2 1
Staff help new children to settle in	4 3 2 1	3 2 1
Children are with familiar children (i.e. stable peer group)	4 3 2 1	3 2 1
Staff visit children and families at home (i.e. home-visiting)	4 3 2 1	3 2 1
Parent contact with centre is encouraged	4 3 2 1	3 2 1
Children's physical needs are met (e.g. food, rest)	4 3 2 1	3 2 1
Excessive punishment is not used	4 3 2 1	3 2 1
The atmosphere at the centre is pleasant (eg. happy noises)	4 3 2 1	3 2 1

Any other important or very important factors for ensuring children's happiness?

Safety, health and hygiene

	Importance	Rating
There are clear pathways between activity areas (i.e. little clutter and activities not disrupted by people moving around)	4 3 2 1	3 2 1
Toys and equipment are kept in good repair and are safe	4 3 2 1	3 2 1
Children are under staff supervision at all times	4 3 2 1	3 2 1
Centre appears clean (e.g. floors are regularly swept, toys and bathroom washing facilities regularly cleaned)	4 3 2 1	3 2 1
Personal hygiene is taught to the children and consistently reinforced in the programme	4 3 2 1	3 2 1
The staff appear healthy and model good personal hygiene	4 3 2 1	3 2 1
Provisions for sick children, (e.g. a comfortable area to rest)	4 3 2 1	3 2 1
All parents are informed if a child has an infection or contagious disease	4 3 2 1	3 2 1

Any other important or very important features for health, hygiene and safety?

Programme

	Importance	Centre
There is a written daily programme schedule	4 3 2 1	3 2 1
There are interesting activities to keep children stimulated	4 3 2 1	3 2 1
Programme aims developed from child and family needs	4 3 2 1	3 2 1
A variety of play equipment/resources in sufficient quantity	4 3 2 1	3 2 1
Activities are appropriate to children's age and ability	4 3 2 1	3 2 1
A balance of child initiated and staff initiated activities	4 3 2 1	3 2 1
There is a balance of indoor and outdoor activities	4 3 2 1	3 2 1
A variety of small group and large group activities, and activities for children to do on their own	4 3 2 1	3 2 1
Changes/modifications are made for special needs children	4 3 2 1	3 2 1
Cultural awareness is promoted in the programme	4 3 2 1	3 2 1
Non-sexist behaviour, language, and activities	4 3 2 1	3 2 1
Programme supports family values and customs	4 3 2 1	3 2 1
Programme is bicultural	4 3 2 1	3 2 1
Staff join children in their play	4 3 2 1	3 2 1
Children are taken on regular outings and excursions	4 3 2 1	3 2 1
Staff carry out assessments of the programme and activities and use this information in programme planning	4 3 2 1	3 2 1

Any other important or very important programme features?

Staffing

	Importance	Rating
Staff have formal qualifications in early childhood	4 3 2 1	3 2 1
Staff are parents' themselves	4 3 2 1	3 2 1
Staff are experienced in working with young children	4 3 2 1	3 2 1
Staff are warm, caring people (i.e. personality)	4 3 2 1	3 2 1
Staff work together as a team	4 3 2 1	3 2 1
Staff meet regularly to plan the programme	4 3 2 1	3 2 1
The head staff member provides good leadership	4 3 2 1	3 2 1
Staff attend refresher training courses	4 3 2 1	3 2 1
Staff turnover is low (i.e. in centre for a number of years)	4 3 2 1	3 2 1
Staff are professionals	4 3 2 1	3 2 1
Provisions are made for staff needs in the environment (e.g. separate staff room, adult toilet)	4 3 2 1	3 2 1
Group size (total number of children) is not too big	4 3 2 1	3 2 1
There is a high ratio of adults to children	4 3 2 1	3 2 1

What do you think the group size (total number of children at the centre) should be? _

If you recommend that group-size should be different according to the age of the children, please specify: _____

What do you think the adult/child ratio should be? ____ adult to ____ children

If you recommend that the adult/child ratio should be different for different age-groups of children, please specify: _____

Any other important or very important staffing features?

Parent, Family and Community Involvement

	Importance	Rating
Parents and families are made to always feel welcome	4 3 2 1	3 2 1
Community involvement is encouraged	4 3 2 1	3 2 1
Professionals/organisations are used for advice/assistance	4 3 2 1	3 2 1
Parents are provided with information about staff practices and programme philosophies	4 3 2 1	3 2 1
Parent education opportunities are provided	4 3 2 1	3 2 1
Staff consider parents to be joint partners in their child's care and education	4 3 2 1	3 2 1
Parents participate in decision-making at the centre	4 3 2 1	3 2 1
Staff show friendship and support of parents (e.g. when they are stressed or have problems)	4 3 2 1	3 2 1
Reports on children's activities/progress are given to parents	4 3 2 1	3 2 1
There are provisions for parents at the centre (e.g. magazines to read, tea and coffee)	4 3 2 1	3 2 1

Any other important or very important features for supporting parent, family and community involvement?

SECTION D

The following questions are asked for statistical purposes.

1. For each of your children currently attending this centre please state:

	1st Child	2nd Child	3rd Child
(a) their age(s)			
(b) how long they have been enrolled			
(c) how many sessions a week they attend			
(d) the weekly cost in fees or donations			
(e) any special needs your children may have?			
(f) what ethnic group your child(ren) belong to			

2. What is your relationship to the child(ren) who attend this kindergarten? (*e.g. mother, father, partner to the child's parent*)

3. Is there anyone else who has major responsibility for your child(ren)? _____

4. What do you mostly do during the time that your child attends the centre? (please tick)

_____ Full-time paid employment _____ Part-time paid employment

_____ Leisure/sports activity _____ Household work

_____ Stay with child(ren) _____ Involved in centre activities

_____ Other, please describe: _____

5. If you ticked part or full-time paid employment please specify your occupation: ____

6. Please indicate what you estimate your gross family income was in 1989:

___ 0 - \$10,000 ___ \$10,000 + - \$20,000

___ \$20,000+ - \$30,000 ___ \$30,000+ - \$40,000

___ \$40,000+ - \$50,000 ___ \$50,000+

7. What was your highest school leaving qualification? _____

8. What (if any) qualifications have you obtained since leaving school? _____

THANK YOU

Appendix A(ii) Staff Questionnaire

(Sections A and C that are not in common with the parents' questionnaire).

YOUR POSITION: _____

CENTRE NAME: _____

SECTION A

1. For what reason(s) are you working in the early childhood field?

2. Have you on any occasions discussed the conditions of your work with other staff, union representatives, or other people? YES/NO. If yes what were your concerns and who did you discuss them with?

3. What kinds of decisions do you make or contribute to? (i.e. your main responsibilities)

4. What features of the centre are you *most* happy with?

5. What features of the centre are you *least* happy with?

6. Please define and describe what a *good quality* early childhood centre is from your point of view:

SECTION D

The following questions are asked for statistical purposes.

1. How many years have you been working at this centre? _____ years
2. How many hours each week do you work at this centre? _____ hours
3. What is your average **weekly** pay (*before tax and deductions*)? \$_____
4. What (if any) recognised early childhood qualifications do you have?
(*please give full name of Certificate or Diploma and year of award*)

-
5. What qualifications or courses are you currently completing (if any)?
-

6. What was your highest school leaving qualification?
-

7. What prior experience (if any) in working with children and families have you had? (*please describe type of work and number of years and months*)
-
-

8. Please indicate your age (place a tick in the appropriate box)

15 - 20	21 - 25	26 - 30	31 - 35	36 - 40	41 - 45	45+

9. What ethnic group do you consider you belong to? (please tick)

Maori Pakeha/New Zealander
 Pacific Islander Other, please describe: _____

10. If you have children of your own please state how many and their ages:

_____ (number of children) _____ (age) _____ (age) _____ (age)

Appendix A(iii) Expert's Questionnaire

(Questions on experts' background that were asked in addition to Section B of the parent and staff questionnaire which asked respondents to rate the importance of different quality criteria).

1. What is your current work position? _____

2. Which early childhood groups are you associated with or have work/professional contacts with?
_____ Kindergarten
_____ Kohanga Reo
_____ Playcentre
_____ Childcare
_____ Pacific Island Centres
_____ Other, please specify:
_____ Not applicable, or no contact with any early childhood groups

3. Briefly outline the nature (type and extent) of your role and involvement within the early childhood field:

4. How long (years/months) have you been involved or associated with the early childhood field:

5. What (if any) formal qualifications/training in early education and care do you have?

6. What (if any) is your highest tertiary education diploma or degree? _____

7. Are you are parent?
_____ Yes
_____ No

8. What is your sex?
_____ Female
_____ Male

9. To what ethnic group do you describe yourself as belonging to?
_____ N Z European
_____ Maori
_____ Pacific Islander
_____ Other, please specify:

THANK YOU.

Appendix B

Quality Review Checklist

Please do not copy or quote without permission from the researcher.

Purpose

The QUALITY REVIEW CHECKLIST (QRC) has been drafted for the research study on Quality in Early Childhood Centres. The first part of the study looked at what participants believed quality was. This part of the study is an attempt to turn goals and values into something which can be observed.

Data has been collected on parents' and staff values about the importance of the each rating criterion in the QRC. The QRC will be used to observe children's and adults experiences and activities, as well as the quality of their centre environment. Observation of centre quality will enable the relationship between parents' and staff values about what is important to ensure good-quality early education and care and the actual practices of staff and centres to be examined in the study.

Individual centres are not expected to meet each criteria as centres vary on what components of a good-quality programme are valued.

The QRC is designed to be used only in centres that are licensed (i.e. they meet government's minimum standards). In its present form it is appropriate for kindergartens, playcentres, and childcare centres but not for Te Kohanga Reo or other language nests.

Methodology

The methodology is based upon the work done by the National Association for the Education of Young Children and their Centre Accreditation Project. The QRC is designed for staff to be involved in its implementation. Head staff members complete the QRC (with other staff if possible), they receive feedback from the researcher and have the opportunity to discuss and compare observations and centre ratings.

Description of the QRC

The QRC is designed to give an overall picture of the quality of a centre, including dynamic aspects such as social interactions, static aspects such as furnishings, and regulatory aspects such as staff training. The current situation is rated (based on observation and knowledge of what is known to happen but is not observed due to factors such as the weather) rather than stated intentions or planned changes.

It is divided into five sections:

Section A	Children's Happiness
Section B	Safety, Health, Hygiene
Section C	Programme
Section D	Staffing
Section E	Links with Parents, Families and Community

Most criterion include descriptions of what should be considered in making a rating. Centres should be given a **"one"** if the criteria is not met or if the practice described is not carried out, **"two"** if is partially met, **"three"** if it is mostly met, and **"four"** if it is fully met.

The QRC is divided into three steps:

1. Researcher (and co-observer) observes at each centre, interviews at least five parents and the head staff member (and other staff if possible).
2. The head staff member (along with other staff if possible) also completes the QRC by rating the extent to which their centre meets the criteria.
3. The researcher (and co-observer) meets with each head staff member to compare and discuss each others ratings. A summary sheet will be used to write down each set of ratings and to make brief notes on discussion.

CHILDREN'S HAPPINESS

A.1 Staff communicate to children that they care about them

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Show affection by smiling, touching, holding, and talking softly to children.
- Demonstrate a caring attitude by stepping in to help children when needed.
- Show an interest in children's talk about themselves, their experiences, feelings, etc.
- Talk with children on a one-to-one basis during routines (arrival, eating, etc).

Staff / Researcher Comments

A.2 Staff are responsive to children

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Respond quickly and appropriately to children's efforts to initiate interaction, verbal and non-verbal (e.g. return a wave, reply with an open ended question).
- Listen attentively and patiently to children
- Praise children for their achievements
- Are always available to the children - to show an interest in them and their activities

Staff / Researcher Comments

A.3. There is a sensitive settling-in process for children

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Some method for familiarising new children and parents (e.g. short visits).
- Parents are encouraged to stay as long as it takes for children to settle.
- Infants/toddlers (and older children who are not settling well) are allowed an attachment *object* from home (e.g. teddy, rag or blanket).
- New children are told when their parent is leaving and when they *are expected to return*.
- Parents are invited to phone the centre to check on their children, or staff call them.

Staff / Researcher Comments

A.4. Peer group stability

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- No more than 25 percent of the children attend infrequently or for less than half of the available sessions.
- Parents are encouraged to use the centre on a frequent and regular basis (e.g. staff point out the benefits of children attending even when parents do not need to use the centre).

Staff / Researcher Comments

A.5. Home-visiting

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- All families are home visited prior to or after enrolling.
- Staff and parents use home visits to exchange information on home life and the centre, and to foster close relationships.

Staff / Researcher Comments

A.6. Parent contact encouraged

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Parents are encouraged to enter the centre when dropping off or picking up their children.
- Parents are given details about who to contact regarding matters related either to their child or to the centre (e.g. centre telephone number and after hours contact).
- Parents are kept up-to-date with what is happening in the centre (e.g. newsletters, notices).
- Parents are encouraged to stay and to participate in the programme as they feel comfortable.
- Parents are invited to join their children for meals/snacks, special activities, and excursions.

Staff / Researcher Comments

A.7. Children's physical needs are met

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Drink (e.g. water, milk, juice) is available to the children at all times.
- Children have sufficient food and drink at meal and snack times.
- Meal and snack times are not more than 3 hours apart.
- Children do not get too hot or too cold (e.g. spare jackets or sun-shades are available for children, room temperature is regulated).
- Infants' and toddlers' nappies/pants are regularly checked and changed if needed.
- Children have easy access to toilet and potty facilities.

Staff / Researcher Comments

A.8. Excessive punishment is not used

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Behaviour management techniques are appropriate to the age and developmental understanding of children (e.g. with a four-year-old alternative solutions may be discussed whereas a toddler may be redirected to a new activity).
- Negative methods of discipline are not used (e.g. no smacking, shouting, threatening).
- Positive techniques and methods are used (e.g. redirection, listening, reinforcement)
- Staff do not use more reprimands or negative statements than positive statements/smiles etc.
- Staff accept children's feelings and provide acceptable outlets for children to express them.
- Parents are asked about how they manage their children's behaviour so that no methods used in the centre are excessive in the individual child's experience. Note that parents' methods where these are negative should not be adopted by staff.

Staff / Researcher Comments

A.9. Pleasant atmosphere

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Adults' voices do not dominate and there is laughter/smiling amongst children and staff
- Children appear happy in their play and other activities
- The atmosphere is generally calm and staff and children are relaxed but busy.

Staff / Researcher Comments

SAFETY, HEALTH AND HYGIENE

B.1. Clear pathways between activity areas

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Children and adults are able to move from one area to another without disturbing activities.
- Toys, materials, and equipment are not blocking or impeding movement.
- Activity areas are well defined through clear divisions of space.

Staff / Researcher Comments

B.2. Safety of environment

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Infant/toddler toys are large enough not to be swallowed
- Large pieces of equipment (e.g. swings) and furniture (e.g. wall shelf units) are fixed securely.
- There are no sharp edges, protruding nails, wood splinters, broken pieces or missing pieces .
- Equipment is appropriate to children's age and developmental status (e.g. for toddlers the highest place on their climbing equipment is no further from the ground than their height).
- There are no safety problems in the use of equipment (e.g. no toy-box with a heavy lid).

Staff / Researcher Comments

B.3. Supervision

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- A staff member (or adult) is located in all rooms and areas where children are (except for toilet and wash room, but an adult should be within hearing distance)
- Staff attention to children's movements and activities is high, (e.g. not engrossed in conversation with other adults whilst children play).
- Infants and toddlers are not left unattended. Over-three-year-olds may be supervised by sight and sound (e.g. staff supervising the playground area need only be within hearing distance of children playing behind bushes).

Staff / Researcher Comments

B.4. Clean building, facilities, equipment and toys

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Tables/highchairs are wiped and floors are swept after meals and snacks.
- Toys are picked up / tidied when no longer needed or in use.
- Areas are kept tidy and rubbish removed from activity areas during the programme.
- The bathroom, all table surfaces (including floor if there are crawlers) and all toys that are mouthed are washed daily and disinfected at least weekly.
- Caregiving equipment is kept clean (e.g. cover of changing table is disinfected or changed after use).
- Areas and equipment are free from contamination (e.g. insect or rodent contamination, sand-pit is kept covered when not in use).

Staff / Researcher Comments

B.5. Children's personal hygiene

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- There are scheduled times for practicing personal hygiene (e.g. hand-washing before meals).
- Personal hygiene standards are reinforced as part of the educational programme (e.g. children have separate combs, they are taught and reminded about the importance of placing their hand over their mouth when they sneeze).
- Children are encouraged to develop independence in practicing personal hygiene (e.g. supervise and praise them in washing their own hands rather than doing it for them).

Staff / Researcher Comments

B.6. Staff model good health/hygiene practices

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Do not work or visit the centre if they are sick or have an infection which could be passed on.
- Wash their hands with soap and water before feeding infants/toddlers, preparing and serving food, after changing children's nappies and pants, and after nose wiping or cleaning up vomit.
- Model good health habits to children and parents.(e.g. they do not smoke at work, and they maintain good standards of personal grooming such as clean hair and nails)
- Discourage children and other adults from taking food into children's play and toilet areas.

Staff / Researcher Comments

B.7. Provision for sick children

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- The centre has a stated policy for coping with child sickness ,(e.g. parents are notified, well-children are protected, a staff member cares for the sick child). Parents and staff know the policy.
- There is a comfortable, quiet area set aside and always available for any sick children.
- Parents are informed and reminded to keep children at home if they have a contagious disease.

Staff / Researcher Comments

B.8. Parents are notified of any contagious disease/infection

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- All parents are informed (e.g. verbally, or a notice on the door) if any child or adult at the centre has a disease or infection that could have been passed on.
- Some literature for parents on common childhood infections and diseases is kept at the centre for staff to use in discussions with parents .
- Staff know relevant health professionals to refer parents to.

Staff / Researcher Comments

PROGRAMME

C.1. Written schedule of routines and activities

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- There is a written schedule and it includes a list of the main activities and planned variations on these, as well specifying the approximate times for different routines.
- It is displayed in a conspicuous place for staff, parents, and visitors to see.

Staff / Researcher Comments

C.2. Interesting /stimulating activities

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- There is a variety of equipment and materials suitable for promoting children's motor-skill, psycho-social, language and intellectual development.
- The location of some activities and equipment is changed daily/weekly .
- New materials are added and slight changes are made to regular activities from time to time to maintain and stimulate children's interest.
- Not all play materials are available all of the time but some are periodically set up or introduced as special activities (e.g. a group card game, gardening tools, a cooking activity).
- Equipment and materials are colourful and attractive to the children's age-group (e.g. mobiles for babies to reach out to, paper gliders for four-year-olds to try to fly)

Staff / Researcher Comments

C.3. Programme based on consideration of child and family needs

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Staff talk informally with parents about how they can provide an early childhood programme that fulfils their needs.
- There are some more formal channels of communication about child and family needs (e.g. staff-parent meetings, home questionnaires, home visits).
- Staff do written observations of children's skill levels, their behaviour and activities, discuss their observational notes with children's parents, and use this information for programming.

Staff / Researcher Comments

C.4. Sufficient toys, equipment and resources for children

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- For infants and toddlers there is a sufficient quantity of toys and equipment to avoid problems of waiting, competing and fighting for scarce resources.
- For older children there is sufficient toys, equipment, and materials to avoid the above problems whilst encouraging some co-operative play to occur.

Staff / Researcher Comments

C.5. Developmentally appropriate activities

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Activities are appropriate to the age of the children (see N.A.E.Y.C. guidelines on developmentally appropriate practices for children).
- Activities are individually appropriate: suit children's developing abilities, cater for their personal interests, and are challenging for them.
- For children who tend to involve themselves mainly in activities that are not challenging the staff introduce and guide them towards appropriately challenging and rewarding activities.

Staff / Researcher Comments

C.6. Balance of child and staff initiated activities

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- There are some adult-directed activities and some activities that are initiated by the children which staff follow up on (e.g. by providing further ideas or materials)
- Most activities are available for children to self-select and participate in.
- After adult-directed activities children are left or given the opportunity to continue the particular activity in their own way, and to repeat and practice if they wish.
- Children are not left to engage mostly in aimless behaviour and non-constructive activities during free-play periods, but rather they are encouraged to participate in constructive activities.

Staff / Researcher Comments

C.7. Balance of indoor and outdoor activities

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Children have access to both indoor and outdoor play areas as weather permits
- The environment is designed to encourage access, e.g. some sheltered outdoor areas, sheltered veranda, centre doors are opened and hooked back on warm days).
- In cases where the weather limits access, some typically outdoor activities are brought inside or indoor activities may be altered to foster play that occurs outside, and some typically inside activities are taken outside (on warm/hot days when children tend to congregate outside).
- There is some daily interchange of indoor and outdoor activities to encourage children to sample a wider range of activities.

Staff / Researcher Comments

C.8. Activities for different group-sizes

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- There are activity areas, both indoors and outdoors, where children can play alone or with a peer (e.g. book corner, small two-seat activity tables, playhouses, swings).
- Children are free to come and go from large-group (five or more children) activities as they choose.

Staff / Researcher Comments

C.9. Provisions for special needs children

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- If no children with special needs are enrolled the management has a commitment towards providing for any child regardless of their special needs (i.e. management has a stated policy on accepting any special needs child, and will ensure that any necessary modifications to the equipment and facilities are made to ensure a special needs child enjoys full access).
- Indoor and outdoor areas are accessible to all children (e.g. for wheel chair children or children on crutches there are ramps, hand rails and wide doors).
- Equipment and materials are modified as needed or special equipment and materials are added to meet children's special needs.

Staff / Researcher Comments

C.10. Promotion of cultural awareness

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Cultural awareness is promoted through materials and activities (e.g. multi-racial toys, materials, books and wall posters, chopsticks and various types of different eating instruments in the family play area, etc).
- Adult-initiated multi-cultural activities are sometimes included, either as a special weekly theme or as part of the on-going daily programme (e.g. stories are read about cultures in other countries, parents are invited to share food, crafts, etc., from their culture)

Staff / Researcher Comments

C.11. Bicultural Programme

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- The majority of staff speak some basic Maori words.
- Maori language is incorporated into the programme (e.g. Maori songs, and activities).
- Staff speak some Maori in their interactions with children, and particularly to welcome Maori parents.
- There is a balance of books, posters, toys, materials (e.g. natural and manufactured) and equipment that reflect European and Maori cultures.
- Practices which are offensive to Maori cultural values are avoided (e.g. using macaroni, food, to make necklaces) and practices that reflect Maori culture are practiced (e.g. sharing of food with visitors).

Staff / Researcher Comments

C.12. Support of family values and customs

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Staff show an interest in the values and customs of each family (e.g. by asking if there are any aspects of the programme that they do not wish their child to be included in; and if there are any ways they can support their values such as in providing appropriate food).
- Staff respect differences in the cultural and family values (e.g. by allowing Sikh boys to wear their turbans and allowing and encourage children to continue using their first language).

Staff / Researcher Comments

C.13. Non-sexist

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Sexist language is discouraged in the centre.
- Sexist resource material is avoided and non-sexist material is included (e.g. books depicting boys performing both masculine and feminine tasks).
- Staff provide both boys and girls with equal opportunities to take part in every activity.
- Staff provide androgynous role models (e.g. demonstrate that they can hammer in a nail, do the dishes, etc).

Staff / Researcher Comments

C.14. Staff join children in their play

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- They participate in children's play: they join in and follow children's leads and suggestions rather than directing their play.
- Talk with children about ideas relevant and related to their play.
- Provide children with new or additional materials and resources as needed or when appropriate.

Staff / Researcher Comments

C.15. Outings and excursions

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Outings occur as part of the everyday programme (e.g. a small group may be taken to the dairy to buy some bread, or to the park nearby to look at the autumn trees).
- Every child is encouraged to participate in at least some outings.
- All children have the opportunity to go on a major excursion (e.g. museum, city/farm, airport) at least once every six months.

Staff / Researcher Comments

C. 16. Assessment/evaluation

Not met	Partially met	Mostly met	Fully met
1	2	3	4

Periodic assessments of what is happening in the programme are made (e.g. girls and boys participation rates in different activities may be observed and recorded or the nature and frequency of staff-parent interactions).

This information is made available to all staff (and parents where applicable).

Assessment data is evaluated (e.g. through discussion, and reference to past practices and planned future practices). This should lead to decisions on the continuation or strengthening of practices and promote improvements and new ideas.

Staff / Researcher Comments

STAFFING

D.1. Qualified staff

Not met	Partially met	Mostly met	Fully met
1	2	3	4

All staff, who are counted in the minimum requirements for staff-child ratio hold a qualification recognised by the Ministry of Education for work in an early childhood centre. Note that unqualified staff may also be employed but they should be in addition to rather than part of the minimum staff-child ratio.

Staff / Researcher Comments

D.2. Staff have parenthood experience

Not met	Partially met	Mostly met	Fully met
1	2	3	4

All staff have their own child(ren) (i.e. staff who comprise the minimum adult-child ratio)

Staff / Researcher Comments

D.3. Staff are experienced with young children

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- All staff have had previous practical experience working with children under-five years of age (equivalent to six or more months of full-time work in any field related to young children or at their present centre). Note that this only applies to staff who comprise the minimum adult-child ratio.

Staff / Researcher Comments

D.4. Staff are warm caring people

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- They make children and parents feel accepted, and liked.
 They speak with all children, parents and other family members in a friendly manner (e.g. chatty, good listening skills, address on first-name basis).

Staff / Researcher Comments

D.5. Staff work together as a team

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- When one staff member is unable to complete a task or having difficulty, other staff will step in to assist.
 Staff are aware of each others strengths and weaknesses and work effectively together.
 There is good communication between staff about the children, programme, and organisation matters (e.g. staff pass on messages from parents).

Staff / Researcher Comments

D.6. Staff regularly meet for programme planning

Not met	Partially met	Mostly met	Fully met
1	2	3	4

All staff meet on a regular basis to discuss or consult on programme planning.

Staff / Researcher Comments

D.7. Head staff member provides good leadership

Not met	Partially met	Mostly met	Fully met
1	2	3	4

Ensures that new staff know and understand centre policies, procedures, and philosophy.

Provides support, guidance and advice to staff where appropriate.

Provides staff with feedback on their work in a non-threatening affirming way.

Is easily approachable about matters relating both to the programme and to their conditions of work.

Helps to make staff feel that their work is valued.

Facilitates good relationships amongst staff (e.g. undercurrents are identified, discussed, and there is a commitment to resolving disagreements)

Staff / Researcher Comments

D.8. Refresher training

Not met	Partially met	Mostly met	Fully met
1	2	3	4

Staff regularly take part in refresher training and in-service courses (e.g. personal development courses, visits to other centres, in-service courses organised by ECDU or other relevant groups, further academic studies and course work).

Records of staff qualifications and courses attended are kept at the centre for reference when planning programmes of staff development.

Staff / Researcher Comments

D.9. Staff stability

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Staff turnover is low (i.e. no more than 1/4 staff each year leave for reasons other than low enrolment).
- All staff, who are counted in the minimum staff-child ratio, are employed on a permanent basis.
- The centre has a good retention rate for staff (i.e. the majority of staff tend to stay for at least two years).

Staff / Researcher Comments

D.10. Professionalism

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- A collection of relevant and recent research articles and professional literature is maintained
- The centre and/or staff belong to a professional organisation or representative group (e.g. Combined Early Childhood Union, Playcentre Federation).
- Staff carry out peer evaluations and encourage constructive comments and criticism.
- Staff understand the importance of their work and are able to articulate this (describing the goals and objectives of their programme to others).
- * Staff may also publicly advocate for quality early childhood services, professional recognition, and for the rights of children and families.

Staff / Researcher Comments

D.11. Provisions for staff in the centre

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- A separate room or area (not used for children's activities) for staff use when taking their breaks, staff socials, staff meetings, etc.
- An adult-sized toilet and washing facilities for staff use.
- Comfy chairs for staff to use.
- Some secure cupboard space for personal belongings.

Staff / Researcher Comments

D.12. Group size

Not met	Partially met	Mostly met	Fully met
1	2	3	4

To rate a "4" a centre (or each classroom within a centre complex) should have no more than:

- 30 three to five year-old
- 15 two to three year old
- 10 or fewer under-two-year old

Or

- 25 children between two to five or six years old
- 15 children between birth to five or six years old (where infants/toddlers make up at least half of the total number of children).

Staff / Researcher Comments

D.13. Staff-child ratio

Not met	Partially met	Mostly met	Fully met
1	2	3	4

To rate a "4" a ratio is needed of at least:

- 1 adult to 3 infants (birth to 1 year)
- 1 adult to 4 toddlers (1 year + to 2 years)
- 1 adult to 5 two and three-and-a-half year olds
- 1 adult to 8 children over three years six months

Note that the average age of the children attending should be calculated to determine the adult-child ratio. The ratio of 1:3 for infants must, however, be maintained.

A contact list of relievers is kept so staff can be quickly replaced if needed to maintain the ratio.

There is an attempt to maintain a high adult-child ratio at all times, depending upon the situation and during times when staff take their breaks (e.g. more staff may be needed to cope with lunch-time routines, or to assist with excursions).

Staff / Researcher Comments

LINKS WITH PARENTS, FAMILY AND COMMUNITY

E.1. Parents and family members feel welcome at all time

Not met	Partially met	Mostly met	Fully met
1	2	3	4

Every parent, family member, and child is greeted on arrival and acknowledged when they leave (e.g. a staff member may be assigned or takes responsibility for ensuring this).

Staff know parents by name and other family members who regularly visit the centre.

Parents feel free to enter the centre any time.

Staff actively encourage other family members to visit the centre (e.g. "fathers' night")

Staff / Researcher Comments

E.2. Members of the community are involved

Not met	Partially met	Mostly met	Fully met
1	2	3	4

People from different community organisations, groups, and occupations are invited to the centre (e.g. gardener, traffic officer, netball player).

Community members are encouraged to participate (e.g. school children on work experience).

Staff / Researcher Comments

E.3. Outside professionals/organisations are used

Not met	Partially met	Mostly met	Fully met
1	2	3	4

A record is kept or the head staff member knows local specialists/agencies that can be called upon for assistance(e.g. for advising on staff in-service training, answering queries about a child's health or physical condition).

Where appropriate staff consult with and seek the help of outside agencies and professionals (e.g. if child abuse is suspected, or staff for example may refer parents to a specialist if they suspect that their child has a language development delay problem).

Staff / Researcher Comments

E.4. Parents informed about programme philosophy and practices

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- A brief written description of the centre's philosophy is available for parents to read.
- A copy of the charter is available for parents to read and/or take home.
- There is frequent communication about any changes in the centre, what is happening in the programme generally through methods such as regular newsletters, notice-boards and frequent notes.

Staff / Researcher Comments

E.5. Parent education

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Parent education opportunities are provided and staff view parent education as part of their role (e.g. relevant literature for parents to read and/or take home, parent-workshops or seminars, various professionals from relevant fields are invited to speak to parents, etc).

Staff / Researcher Comments

E.6. Staff consider parents to be joint partners

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Staff seek to foster two-way communication with parents about home and centre practices.
- Staff do not criticise parents child-rearing practices but where appropriate provide support (e.g. resources, gentle guidance, affirming comments)
- Parents opinions and suggestions are listened to and respected by staff.
- Staff recognise that they can form attachments with children without competing with parents.

Staff / Researcher Comments

E.7. Parents contribute to decision-making

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Formal opportunities are available for parents to participate in decision-making (e.g. parent representation at association or management level).
- Parents are encouraged to make suggestions and pass on ideas to staff about matters relating to the programme and administration. Their input is, as much as possible, taken into consideration.

Staff / Researcher Comments

E.8. Staff support parents

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- Staff observe strict confidentiality regarding children and families, and parents know this.
- Staff work cooperatively (where appropriate) with other professionals who are involved in helping families.
- Where appropriate and wanted by families, extra assistance is provided (e.g. staff might offer to make/buy children's lunch to save parents time, staff might make arrangements for child care after hours).

Staff / Researcher Comments

E.9. Reports on children's activities and progress

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- There are verbal and written systems for sharing with parents what their children did during the day (e.g. sleep charts, list of child's main activities, description of child's achievements and pleasures in learning new skills).
- Changes in a children's physical (e.g. child is off-colour) and emotional states (e.g. child may be particularly excited after a visit by a clown) are reported to parents.

Staff / Researcher Comments

E.10. Provisions for parents in the environment

Not met	Partially met	Mostly met	Fully met
1	2	3	4

- A special space is set aside for parents to meet, rest, or wait. This space should have comfy chairs and be separate or separated off from the children's areas.
- Off-street parking for parents, or more-or-less guaranteed car-parking space on the road immediately outside the centre, is available.
- There are established places (which parents are informed about) for leaving children's belongings, notes to the staff, payment of fees/donations.

Staff / Researcher Comments

Staff Interview Questions

CENTRE: _____

DATE: _____

Question No. on the QRC

A.3. How are new children and parents introduced and settled into the programme?

- in what ways are they each helped to become more familiar with it?
- when a new child starts how is the separation process made easier?

Prompts:

Ways are available for new parents to check on how their child is?

Centre's policy on children, particularly new children bringing a toy, cuddly or such like from home?

Children are told that their parents are leaving?

Children are told when to expect their parents to return?

A.4. How many children can attend at any one time? and what is the total number of children on your roll?

A.5. Do staff visit children and families at their homes?

- if no, would you and your staff like to and why, or why not?
- if yes, when are they visited (e.g. before starting at the centre)?
- are all families visited or only some? If only some, why?
- what is the main purpose of home visits?

A.8. What methods of discipline/punishment/behaviour management are used here?

- are children disciplined differently or are they disciplined the same depending upon the nature of their misbehaviour?
- are parents asked about what methods they use?
- is behaviour management at the centre discussed with parents?

B.6. On occasions when you or other staff are sick , have an infection or a disease would you still come to work? Do you feel obliged to? Why?

B.7. Is there any policy on children attending when they are sick?

- if yes, are parents made aware of this policy?
- what procedures do the staff follow when a child is sick?

B.8. If a child at the centre had lice (for example) or some kind of infection that could be passed on to other children what happens about informing parents and other parents?

- do you suggest names of health professionals and medical people to parents?

B.9. Do you have any children with any special health needs e.g. asthmatic, skin allergy? In what ways are their special health needs taken into account in the activities provided?

C.3. How do you know what the needs of the children are?

- how do you know what ways the programme/centre could meet family needs?

C.5. Do activities differ for younger and older children?

- in what ways? and why?

C.7. Are inside activities ever taken outside? Are outside activities ever taken inside?

C.9. Do you have any children with special needs?

- if yes, have any modifications to the building and environment been carried out?
- if no, would such children be accepted and would it be likely that modifications would be made?

C.10. In the last two months have there been any activities to help children learn and understand about other cultures, or about life-styles in other countries?

- if yes, what?

C.12. Are ethnic differences and differences in families values recognised in any way in the programme, or in staff practices?

- are there any ways that parents are asked in what ways the programme can support their family values?

C.13. Do you feel it is important to have any emphasis on non-sexist language and behaviour in the programme? In what ways?

C.15. In the last six months have the children been taken on an excursion? and are excursions for all children or just some of them? Are outings included as part of the programme (e.g. to the dairy?)

- if yes, how frequently?
- and do all children go on outings or only some?

C.16. Is the programme assessed , evaluated or reviewed by yourself or anyone else in the centre

- if yes, for what purpose? when? who sees this information?

- what happens with the information?

D.6. To what extent is each member of staff involved in planning or deciding what should happen in the programme?

- do staff plan the programme together, and how often?

D.7. As director/head teacher/supervisor what is your leadership role in regard to the staff? (e.g. the nature of your relationship with them, your responsibilities for ensuring their good work)

D.8. Are any records of staff qualifications and any refresher training they do, kept?

- if yes, for what purpose?

D.9. Have any staff left in the last 12 months?

- how many? and, have they have been replaced?

- are staff employed on a temporary or a permanent basis?

D.10. Is it important for staff to be professional? (e.g. keep up to date with the research, belong to a professional association, be concerned about the quality of their practice, etc).

- does the centre or staff belong to any professional/representative organisation?

- do staff make evaluative comments on each others work?

- and, are staff generally accepting of comments from each other?

- do staff ever articulate the goals and objectives of the programme to others? or, do you believe that they know and understand these enough to be able to tell others?

- are any staff involved in advocating for recognition as professionals and for the better status off early childhood education in society?

E.2. In the last two months have any people from the community been invited or involved in the programme?

E.3. Has outside professional assistance been made use of recently (e.g. have you sought advice on how to help a child with a motor-skill development delay?)

- is there any record or list keep of local agencies (e.g. ECDU) and professionals (e.g. psychologists) whom you could consult with if needed?

E.5. Is any form of parent education provided (i.e. do staff help parents to learn and understand more about child-rearing?)

- if no, should it be the role of the staff and the centre to do so?

- if yes, in what ways? and how effective are each of these ways? (e.g. participation rate)

E.7. What formal opportunities (if any) are there for parents to participate in decision-making? Are parents encouraged to make suggestions and pass on ideas to the staff about the programme or about administration? and, what usually happens to these ideas and suggestions?

E.8. Are there any ways that support can be given to parents who are having problems, or is this not part of the centre's function ? Are parents problems discussed or mentioned to other parents or people in the community?

Staffing

	Staff 1	Staff 2	Staff 3	Staff 4	Staff 5	Staff 6
First name						
Position						
D.3. Length of time at centre						
D.3. Previous early childhood work experience						
D.2. Parent	yes/no	yes/no	yes/no	yes/no	yes/no	yes/no
D.1. Early childhood training						
Completed and awarded	yes/no	yes/no	yes/no	yes/no	yes/no	yes/no
D.8. Continuing education						
ECE tertiary level study	yes/no	yes/no	yes/no	yes/no	yes/no	yes/no
Recent in-service course	yes/no	yes/no	yes/no	yes/no	yes/no	yes/no

Parent and Primary Caregiver Interview Questions

CENTRE: _____

CHILD'S AGE: _____

HOW LONG SINCE CHILD STARTED: _____ yrs _____ mths

**Question No.
on the QRC**

A.4. Are you encouraged by the staff or by the policies of this centre (e.g. absence fee in childcare centres) to take your child every day that it is open?

A.5. Has someone on the staff visited you and your child at home? If yes, for what purpose?

B.7. What is the centre's policy (if any) on children attending when they are sick?

C.3. What ways are there for passing on information about your child's needs and the needs of your family to the staff?

- do staff talk with you about your child's needs?
- do staff talk with you about your family needs?
- in what ways (if any) do you feel that your child's needs are taken into account?

C.12. Do you feel that the staff are sensitive to your cultural values and customs?

- do staff show respect for your values?

D.4. What words best sum up the personal characteristics of the staff in relation to their work and interactions with the children and with you?

E.1. Do you feel welcome in the centre?

- are you greeted by the staff? are you acknowledged when you leave? by your first name?
- are you encouraged to participate in the programme? in what ways?
- are parents invited to join in on special activities such as birthday parties or excursions?
- have you found that other family members (e.g. grandparents and siblings) are also welcome?

E.5. Have you ever been provided with any information or assistance to help in learning and understanding more about child-rearing? If yes, what?

E.6. Do the staff support two-way discussion of home and centre beliefs and practices?

- have you found that staff can be critical of your child-rearing practices
- are your opinions and suggestions regarding your child listened to and respected by staff?

E.9. Do you receive regular reports or information about your child?

- your child's activities, behaviour, and progress?
- are they verbal or written reports?

How adequate do you feel the communication is?

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