PRE-K FOR ALL? UNDERSTANDING THE PERCEPTIONS OF EXPANDED PRE-K POLICY IN PENNSYLVANIA

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ABSTRACT

Expanding access to pre-kindergarten programs (pre-k) for all children is a national topic of interest as states like Oklahoma, Georgia, and New York adopt policies that make pre-k programs accessible to families, regardless of income and background. The National Association for the Education of Young Children (NAEYC) defines pre-k programs as, "A distinct group of programs designed specifically to make sure that preschoolers are ready for kindergarten and will be succeeding in school by third grade," and are "(1) governed by high program standards, (2) serve 4- year-olds or sometimes both 3- and 4- year–olds, and (3) focus on school readiness. " The pre-k time period is critical for three and four-year olds, particularly those most at-risk, for addressing challenges in social-emotional and language development. The Obama Administration recently increased federal funding to help states and communities make pre-k more accessible. In Pennsylvania (PA), a state that currently does not have universal access to pre-k, a group of organizations has formed a coalition called 'Pre-k for PA' with a vision that every three and four-year-old in the Commonwealth will have access to high-quality pre-k. This research explored the perceptions of pre-k professionals working in the field, i.e. advocates, center directors, and teachers regarding the implications of an expanded pre-k policy for PA. Findings suggest that while all stakeholders perceive pre-k expansion as beneficial for PA

children and families, there is a difference of opinion among stakeholders regarding what a policy should include and how to address the potential challenges and needs of various stakeholder groups. The findings indicate a need for a holistic approach to early childhood education and development. Such an approach will increase the likelihood of children's school readiness and better academic performance. Improved educational outcomes are a fundamental determinant of health. This is the public health significance of this work.

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PREFACE

I want to extend a very big thank you to all of those who supported me through the process of developing this thesis and over the last three years as I have worked towards completing my MSW/MPH. I am so grateful to have had the opportunity to learn from some of the best minds in the field of early childhood advocacy during the last nine months at PAEYC. Most importantly, I want to thank my committee, and especially Jeanette Trauth, for their high expectations and constant belief in my ability to succeed.

1.0   INTRODUCTION

All parents of young children in the United States do not have equal access to high quality child care and pre-kindergarten (pre-k) preparation. In the Healthy People 2020 document, the U.S. Department of Health and Human Services (2014) set a national goal of increasing the number of children across the United States who are prepared to start elementary school. School-readiness is a term used to describe adequate development in five domains of healthy development, which include physical development, social-emotional development, approaches to learning, language development, and cognitive development. The field of child development and early childhood research echoes this sentiment with an ever-growing body of literature that supports the benefits of high-quality, early-learning opportunities for all children, especially those from the most disadvantaged backgrounds.

The years between birth and age five are a critical period in a child's development. During these years, specific parts of the brain necessary for language, literacy, and social-emotional functioning are growing rapidly (National Institute on Deafness and Other Communication Disorders (NIDCD), 2010). It is imperative that children receive the necessary stimuli to foster the growth of these important areas (National Scientific Council on the Developing Child, 2007). This is one of the first points that children from low-resource households begin to lose ground compared with their more resourced peers. Children from "low-income" households are said to be exposed to less opportunities for learning in the home

environment, including as many as 30 million fewer words than high-income children (Hart & Risley, 2003; Magnuson, Meyers, Ruhm, & Waldfogel, 2004). Without any type of intervention, these children enter kindergarten without the necessary tools for success. Pre-k has been shown to close this gap (Goldstein, Warde, & Peluso, 2013).

Additionally, large-scale implementation of pre-k programs has been shown to work for everyone. In Oklahoma, where pre-k for four-year-olds has been made universal through the state's public education system, all children, including those from middle and high-income backgrounds have been shown to enter kindergarten more prepared for success (Gormley, Gayer, Phillips, & Dawson, 2005). Researchers have found that even children with special needs have shown increases in literacy development though participation in pre-k programs (Phillips & Meloy, 2012). A recent study looking at two early childhood programs in North Carolina showed that their pre-k program, More at Four, significantly reduced the number of children diagnosed with learning disabilities by third grade (Muschkin, Ladd, & Dodge, 2015). Among other benefits, this is a huge cost savings for school districts who don't have to invest in costly special education programs to remediate problems that can be addressed at earlier ages.

Recently, there has been a focus on improving access to high quality early learning. In December 2014, President Barack Obama convened a White House Summit on Early Education. Attendees included a coalition of businesses, foundations, elected officials, early childhood experts, and others. At the summit, the President announced the allocation of $750 million towards preschool development and Early Head Start-Child Care (EHSCC) Partnership awards to be implemented in communities across the U.S. The U.S. Department of Education has developed additional partnerships with businesses and foundations which aim to fuel expansion

from the private sector by leveraging funds from these sources to make the program more impactful (Office of the Press Secretary, 2014).

While many states across the country offer pre-k slots for those children deemed to be the most at-risk, a number of states have already taken steps to make pre-k accessible to all children who elect to participate. States such as Oklahoma, Georgia, and New York, are some of the early adopters of these type of pre-k expansion policies that have implemented universal pre-k (Barnett, Carolan, Fitzgerald, & Squires, 2012). As states adopt these or similar policies, those states who have not yet taken the steps to make pre-k accessible to more children are under an increasing amount of pressure to follow suit.

In Pennsylvania, a broad based coalition has formed that advocates for the expansion of access to high-quality pre-k for all three and four-year olds. With financial support from major philanthropic institutions from across the state, the Pre-K for PA coalition spent more than a year advocating for all three and four-year-olds to have access to high quality pre-k. In addition, as of November 2014, a new governor was elected in Pennsylvania who is committed to making pre-k more accessible to three and four-year-olds.

As the potential for changes to the early education system are on the horizon, it is important to also understand the context within which the current system has developed. The current structure of early education has developed slowly since the mid-twentieth century. What has emerged is a piecemeal system of private and public programs within states, as well as varying regulatory policies regarding the requirements for teachers, families, and children depending on socio-economic status (Gallagher, Clifford, & Maxwell, 2004). This includes variation in factors such as age of entry into school, quality of classroom interactions, as well as differing requirements for teacher training, certification, experience, and wages across settings

(Azzi-Lessing, 2009; Bogard, Traylor, & Takanishi, 2008; Pianta, Barnett, Burchinal, & Thornburg, 2009; Zhai, Raver, & Li-Grining, 2011).

Pennsylvania specifically relies on funding for early care and education from two primary sources. The first is the Pennsylvania Department of Human Services, formerly the Department of Public Welfare, which provides funding for Child Care Services and Child Care Assistance. These sources of funding include programs such as subsidies for low-income families to access child care and the Keystone STARS quality rating system. The second source of funding comes through the Pennsylvania Department of Education, Office of Child Development and Early Learning (OCDEL), which provides funds for Pre-K Counts, a program to increase access to high-quality half-day and full-day pre-k, and the Head Start Supplemental Assistance Program, which is allotted only to Head Start grantees serving low-income children and their families (Pennsylvania Keys, 2015a; Pittsburgh Association for the Education of Young Children, 2013). Within this, quality assessment and requirements vary among groups, including Head Start grantees and Pre-K Counts providers. Additionally, some groups may choose not to accept any subsidies and are therefore outside of the state's STARS system.

With such variation among early learning and pre-k organizations, it becomes difficult to envision what a high-quality early learning system might look like in Pennsylvania. To further complicate the matter, one must take into account provider organizations' capacity for change and ability to implement new policy that expands pre-k. Beyond those challenges navigating the regulatory structures of early learning in Pennsylvania, organizations face other challenges such as low wages, high teacher turnover, and barriers to improving quality. The purpose of this study is to explore the implications of expanded access to pre-k for three and four year olds in Pennsylvania from the perspective of stakeholders: coalition members who are working to shape

the new policy, leaders of provider organizations who will be tasked with implementing policy at the organizational level, and lastly teachers themselves, whose daily work will be impacted by this proposed policy change.

2.0   BACKGROUND

2.1   WHAT IS PRE-K?

Pre-kindergarten, or pre-k, can be defined in various ways. In the most literal sense of the word, pre-kindergarten or pre-school can refer to any educationally-related activity that occurs prior to entering the formal kindergarten through twelfth grade system. This can include child care, center-based or family child care home, Head Start, Early Head Start, state-funded pre-k and others. This paper refers to pre-k as developmentally focused care occurring in the two years prior to kindergarten, particularly for three- and four-year-olds (Pianta et al., 2009). The National Association for the Education of Young Children narrows this further, calling pre-k a "distinct group of programs," with three common guiding principles such of high-program standards, serving four year olds and sometimes three year olds, and focusing on school readiness (Colker, 2008). This type of pre-k may be delivered through private or public means such as private nonprofit and for-profit child care centers, Head Start, and programs provided by school districts (Pianta et al., 2009).

While pre-k may occur in child care centers, it is important to understand how pre-k differs from child care. Typically, child care is associated with parental employment as seen through workforce policies for low-income women such as child care subsidy. Globally, in Germany and Scandinavian countries, child care is provided for all children ages birth through

three in order to promote both maternal employment and increase fertility rates (Borck, 2014; Pianta et al., 2009). Child care in the United States is available for 10-12 hours per day throughout the entire year, though this may vary slightly by public and private centers and by community need. Conversely, state funded pre-k is focused on child development and school-readiness. State-funded programs consist of a mix of partial-day and full-day programs, but these services are typically only available during the normal school year, or approximately 180 days per year (Pianta et al., 2009). This means that many children in pre-k are being shuffled between multiple settings on a daily or weekly basis. Children may shift between pre-k, child care, and whatever other system parents rely on to meet their needs. Inconsistencies in child care subsidy, such as parents only receiving subsidy for short periods of time, called a spell, also leads to children having frequent changing in child care setting (Davis, Grobe, & Weber, 2012).

2.2   FUNDING FOR PRE-K IN PENNSYLVANIA

It is important to understand the relationship between Head Start and state-funded pre-k programs, both of which receive funds through the state, but in general have different missions. Head Start began in the 1960s during the Johnson Administration's War on Poverty. It has traditionally been directed at children in low-income families with a focus on child development, parental engagement, and in some cases community development (Duncan & Sojourner, 2013; Maynard & Perez-Johnson, 2007; Pennsylvania Head Start Association, n.d.; Pianta et al., 2009). Head Start is a Federal Program, and therefore has regulations set by the federal government that

are the same across the country. These programs are then implemented by individual states who participate in the program (Maynard & Perez-Johnson, 2007).

In Pennsylvania, state-funded pre-k monies are delivered through a program called Pre-K Counts. Pre-K Counts may be administered by school districts, licensed nursery schools, Head Start Grantees, child care centers, and group child care homes. These organizations must designated at STAR 3 or STAR 4 in the Keystone STARS quality rating system. A third party entity may apply and act as the lead agency for organizations that fall under the categories listed above (Pennsylvania Keys, 2015c). There is some crossover between the services provided by Head Start grantees and pre-k providers. The state system, while based on quality standards, served only about 18% of Pennsylvania's three and four-year olds. This means that nearly 250,000 children across the state were not engaging in high-quality, publicly funded pre-k (Pennsylvania Partnerships for Children, 2014).

Pre-k may also be attained through private means with parents paying out of pocket for services. In these cases, parents are able to have their choice of programs, including those with NAEYC or state accreditation or those completely outside of the formal system. In Pennsylvania, these parents have incomes above 300% of the Federal Poverty Line, however this threshold varies across states. These parents often rely on preschools that are run out of churches, by parents, or are home-based and may be private or nonprofit centers. Because these are outside of the state and federal systems, it is more difficult to track concrete numbers of families and children enrolled in these programs (New America Foundation, 2014). For these families, early learning costs, including pre-k, may make up a significant portion of parents' income.

The US Department of Health and Human Services considers ten percent of family income to be the benchmark of affordability for child care; however, this is not often the actual

cost for many families. In 21 states and the District of Colombia, the cost of child care for a four-year-old in a two-parent household old exceeds 10% of state median income. The average cost of child care for a single mother with a four-year-old in the U.S. was 33% of state median income, but reached as high as 50% in some states. For families in the Northeast with two children, center-based care costs approximately $22,000 per year, exceeding all other family and household expenses including housing and college tuition. This is echoed in all other regions across the US except the West, where housing cost exceeds child care cost (Childcare Aware of America, 2013).

In Pennsylvania, 2012 numbers showed that the average cost of center-based care for one four-year-old was $8601 per year, and a family seeking infant care paid an average of $10,319 per year. When compared with the state median income, which was approximately $84,000 for a two parent family and $24,000 for a single, female headed household, it becomes clear that child care costs have the potential to make up a significant portion of Pennsylvania families' household expenses, especially those with multiple children (Childcare Aware of America, 2013). Additionally, this is all factored without any insight into how the cost of care is associated with the quality of care that is being provided for the amount being paid.

2.3   PROGRAM CONTENT OF PRE-K PROGRAMS

While there are infinite variations of what pre-k programs could include, experts in the field have developed clear standards as to what pre-k "should" include (in addition to those outlined at the federal level for Head Start and at the Pennsylvania state level through the Keystone STARS program). At the national level, two non-governmental organizations have

developed standards that are generally accepted in the early childhood field as being the "gold-standard" for high quality early childhood education.

2.3.1   National Organizations

The National Association for the Education of Young Children, or NAEYC, provides accreditation and standards for all kinds of early childhood serving organizations. NAEYC states that pre-k differs from other forms of early education, in that it is specifically for three and four year olds and is focused on being a high quality experience of preparing children to be school-ready (Colker, 2008). In addition to meeting other administrative criteria, NAEYC accredited organizations must meet ten overarching program standards, each of which includes more specific benchmarks that outline detailed conditions necessary for accreditation. The ten standards focus on relationships, curriculum, teaching, assessment of child progress, health, teachers, families, community relationships, physical environment and leadership and management (National Association for the Educaiton of Young Children, 2015).

The second organization, The National Institute for Early Education Research, or NIEER, has its own set of standards that are frequently cited by experts in the field, including NAEYC. NIEER points to the presence of these particular programmatic standards in high-quality programs. Differing from the NAEYC standards, each of NIEER's benchmarks is measurable and specific, and can be applied to individual programs or broader systems. They are as follows: (1) teacher has a bachelor's degree, (2) teacher has specialized training in early childhood, (3) assistant teacher has Child Development Association (CDA) certification or equivalent, (4) teachers have at least 15 hours of in-service training per year, (5) classroom follows early

learning standards, (6) classroom size is 20 or lower, (7) the teach to child ratio is 1:10 or better, (8) screening/referral is available, and (9) site visits occur (Barnett et al., 2012).

2.3.2   Pennsylvania's Quality Standards

Pennsylvania's quality rating system for early childhood centers is called Keystone STARS, an acronym that stands for standards, training/professional development, assistance, resources, and support. Child care centers, family child care homes, and group homes may all receive STARS ratings, which range from one to four stars. To be a four star center, directors and staff must meet specific career lattice criteria and participate in a specified amount of training and professional development each year, curricula must follow the Early Learning Standards and maintain and improve student performance, families and outside resources must be utilized to meet the needs of the child, formal plans regarding the financial and organizational sustainability must be in place, and staff must receive adequate lesson planning and break time and receive at least four employee benefits (Office of Child Development and Early Learning, 2014). For centers with lower STARS ratings, it requires a significant amount of resources and financial investment to reach this level and maintain accreditation.

2.3.3   Headstart

Head Start grantees also have their own set of regulations, though Head Start is generally more need-based. To become a Head Start Grantee, an organization must show both the proper qualifications of leadership and staff, but also community need for such a program. Head Start is focused primarily on the health and wellbeing of the child, with program performance standards

aimed at addressing the following: (1) early childhood development and health services including health and safety, nutrition, and mental health, (2) family and community partnerships, (3) program design and management, including specific procedures for management and human resources, and (4) implementation and enforcement, which addresses deficiencies, noncompliance, and quality improvement (Health and Human Services, 2015).

2.4   PRE-K PROGRAM UTLIZATION

More than half of the nation's children utilize some type of pre-primary education, which The National Center for Education Statistics (NCES) (2014) defines as, "Groups or classes that are organized to provide educational experiences for children and include kindergarten, preschool, and nursery school programs." Pre-k is one type of pre-primary education, as per our definition of pre-k as developmentally focused care occurring in the two years prior to kindergarten (Pianta et al., 2009). From 1990-2012 the number of three to five-year olds enrolled in early education rose from 59 to 64 percent, and those using full-day programs increased from 39 to 60 percent (National Center for Education Statistics, 2014). Further, the NCES's most recent data from 2005-2006 shows that a much larger proportion of children are cared for outside of the home, with 57 percent of four-year-olds in center-based care, including Head Start, and an additional 21 percent of children being cared for in non-parental home-based care. This means that in 2005-2006, only 20% of four-year-olds had no regular, non-parental child care arrangement (U.S. Department of Education National Center for Education Statistics, 2014-2015).

When broken down by individual age group, and taking out five-year-olds enrolled in kindergarten, we see that 40 percent of three-year-olds and 60 percent of four-year-olds are participating in early education. There are differences in pre-primary enrollment by parental level of education. Approximately 75 percent of children of parents with graduate or professional degrees participate in pre-primary education compared with 53 percent of children whose parents have less than a high school degree. We can speculate that this may be related to parental participation in the labor force and access to early education based on income. For instance, data from the NCES shows that the largest proportion of utilizers are employed mothers. Sixty-eight of employed mothers utilize preprimary programs, while 58 percent of unemployed mothers use pre-primary care, and similarly 58 percent of mothers not in the labor force utilized any type of pre-primary care (National Center for Education Statistics, 2013).

2.5 WHO BENEFITS FROM PRE-K?

While the literature varies in terms of the recommended ways to provide pre-k, it becomes clear that state-funded, high-quality pre-k does in fact benefit all children. The majority of the literature has focused on the benefits for children considered to be "high-risk," such as those from low-socioeconomic status households, certain minority populations, English language learners, children diagnosed with intellectual disabilities, and others (Fitzpatrick, 2008). For example, the The Community Services Preventative Task Force (2000) supports publicly funded, center-based, comprehensive early childhood development programs for low income children aged three to five years, particularly those mentioned above. Yet evidence from large scale implementation of high-quality programs for all children, like those in Oklahoma, show evidence

of benefits for other groups, including children from middle and high income families (Gormley et al., 2005). Systematic reviews of the literature, like that found in show positive impacts for all types of children in terms of social and cognitive abilities (Anderson et al., 2003).

From an economic standpoint, there is also some evidence that more affordable access to pre-k, and more broadly child care, has the potential to create financial benefits for families who now budget a significant amount of family income to cover the costs of care. In Childcare Aware of America (2013) report on the cost of child care, the cost to families for center-based, four-year-old care by percentage of household income was as much as 46.7 percent of median income for a single mother and 14.1 percent of median income for a married couple in Oregon, where child care costs are the highest per capita. Looking earlier in life, the cost of infant care for a single mother making the state median income can be as much as 61.6 percent of her income. Comparably, Pennsylvania ranks the 18th least affordable state for infant care and 17th for four-year old center based care. The cost of four-year center-based care in Pennsylvania is 36.4 percent of the median income for single mothers and 10.2 percent for two-parent households, which just barely meets the U.S. Department of Health and Human Services benchmark for affordability (Childcare Aware of America, 2013).

2.6   BEST PRACTICES

A handful of successful best practice examples make up much of the current available literature. These include the Chicago Parent-Child Centers which opened in 1967 and provide wrap around services to children and their families, the Perry Preschool Project, the Abecedarian Project, and Tulsa, Oklahoma's public school program (Azzi-Lessing, 2009; Burchinal,

Vandergrift, Pianta, & Mashburn, 2010; Phillips, Gormley, & Lowenstein, 2009; Pianta et al., 2009; Wein, 2011). Several themes emerge from these examples of best practices. First, the instructors in these programs are not only highly qualified with a minimum of a bachelor's degree, they often times have an educational focus in early childhood education. Second, they exist in resource rich environments. And third, they receive competitive salaries for their work (Pianta et al., 2009). The majority of pre-k programs do not have access to the resources required to match the results in the most successful examples (Azzi-Lessing, 2009; Barnett, 2007).

Policymakers, researchers, and accrediting institutions take note of two primary aspects of pre-k when evaluating quality and effectiveness. These are structure and process (Burchinal et al., 2010; Dowsett, Huston, Imes, & Gennetian, 2008; Howes, James, & Ritchie, 2003; Pianta et al., 2009; St.Clair-Christman, Buell, & Gamel-McCormick, 2011). While best practices in structure appear to be relatively static, including things such as teacher-child ratios, training, and licensure (Dowsett et al., 2008), a focus on classroom processes that achieve the greatest results emerges from the literature (Howes et al., 2008; Pianta et al., 2009). Process quality relates to the experiences children have directly with their teachers, including nurturing teacher-child relationships that include emotionally supportive engagement and active learning (Burchinal et al., 2010; Howes et al., 2008; Pianta et al., 2009; Zhai et al., 2011). An example of this would be a classroom setting in which teachers encourage children to learn in ways that are both supportive of their personal interests, such as nature, art, or music, and developmentally appropriate for their age group, like using play as a teaching tool.

Research seems to point to process quality, particularly as it relates to aspects of the teacher-child relationship, as having an impact on the quality of a program for a child. Some studies point to the teacher-child relationship as being a major predictor of kindergarten

readiness. Conversely, negative relationships between teachers and children, including dependence and conflict, may lead to diminished academic readiness for kindergarten.

A teacher's relationship with a child or his/her classroom may be moderated by such factors as teacher training, education, and support (Palermo, Hanish, Martin, Fabes, & Reiser, 2007). Challenges in teacher training and education include providing trainees with new content and challenging practicum related to changing U.S. demographics (Whitebook & Sakai, 2003). Once teachers are in the classroom; however, studies point to active professional learning opportunities with adequate supervisory support for implementing learned practices as being especially important to the teacher-child relationship (Driscoll, Wang, Mashburn, & Pianta, 2011).

2.7   CHALLENGES TO THE EXISTING PRE-K SYSTEM

2.7.1   Pre-k Access

Nationally, pre-k enrollment has steadily increased over the four decades; however, inequality continues to exist in terms of access to high-quality programs among income groups and across states (Magnuson et al., 2004). Each year the National Institute of Early Education Research (NIEER) releases a "State of Preschool" report, which outlines how each state is currently performing in providing preschool services to its citizens, including access and quality. The most recent report, published in 2014 outlines the 2012-2013 school year. This school year was the first where there were modest decreases in the number of children enrolled in pre-k programs, despite an increase in financial investment compared to years previous. Nationally, 40

states and Washington D.C. provided 53 state-funded preschool programs covering 28% of the nation's four-year-olds, and 3% of three-year-olds (Barnett et al., 2012).

According to NIEER's criteria, Pennsylvania ranks thirtieth among states for access to pre-k for four-year-olds and fourteenth for three-year-olds. When also looking at quality, Pennsylvania reaches only 5.6 out of 10 quality benchmarks for its programs. However, Pennsylvania Partnerships for Children reports that a larger proportion, 18.9% of three and four-year olds, or about one in six children, have access to high-quality, publicly funded pre-k (Pennsylvania Partnerships for Children, 2015).

2.7.2 Support for Providers

Talent is needed to support high quality programs. However, the state of compensation, in terms of both wages benefits, for the child care workforce risks the success of the entire system. Child care workers, teachers, and administrators continue to receive wages well below other industries and the workforce is becoming increasingly dominated by women of color from low socioeconomic backgrounds. These individuals also often lack the educational background of their peers in more resourced settings (Raver et al., 2008). This poses challenges when setting standards for high-quality programs that include education credentials that many individuals from these types of backgrounds may not be able to access when considering the resources required that are necessary to reach these credentials.

High stress environments and low wages also play a role in job satisfaction and willingness to stay in the field. Early childhood professionals cite such daily stressors as, "high work related demands, low control in daily activities and routines, low resources for and rewards from their work, and low confidence in managing children's behavior" (Zhai et al., 2011). One

suggestion for ameliorating many of these stressors is increased opportunity for education and professional development for those already in the field, but such opportunities often have little incentive in settings with low compensation and benefits and high stress and demand (Ackerman, 2006; Pianta et al., 2009). This is logical if when considering that the median wage for child care workers is $9.38 per hour or $19,510 per year, $13.04 per hour or $27,130 per year for preschool teachers, and $21.13 per hour or $43,950 per year for center directors (United States Bureau of Labor Statistics, 2014a, 2014c, 2014e).

Compared with other industries, early childhood professionals often have lower wages than other industries with comparable work (Raver, 2008). Additionally, the wages of individuals in early childhood education are often nearly half that of teachers in primary and secondary education (Barnett, 2007; Torquati, Raikes, & Huddleston-Casas, 2007). One researcher described it as a profession that earns less than what one could earn, "pumping gas, trimming trees, or serving food," (Ackerman, 2006).

Many workers in this field are considered working poor, living at well below 200 percent of the Federal Poverty Line, which is $31,460 for a family of two and $39,580 for a family of three (Asssitant Secretary for Planning and Evaluation, 2014). This leaves many professionals in the field reliant on additional public assistance, or additional jobs to make ends meet (Herzenberg, Price, & Bradley, 2005). From the mid-1980s to the late 1990s, wages for early childhood educators increased by only 43 cents per hour, while the wages for female college graduates increased by over $2 per hour. Moreover, only a third of early childhood educators have access to healthcare through their employer (Herzenberg et al., 2005). This failure to adapt wages and benefits over time has occurred at all levels of the early learning system, including across those with higher levels of education (St.Clair-Christman et al., 2011).

Pianta et al. (2009) points out that while the overall level of educational achievement is increasing as a whole in terms of higher education, the qualifications of the pre-K workforce are declining with fewer and fewer individuals with bachelor's degrees entering into and staying in the field. Early childhood educators with a bachelor's degree make 52-75 percent of the median salaries across other fields (St.Clair-Christman et al., 2011). Issues with recruiting and retaining highly qualified educators with bachelor's degrees while countering with low-wages is a difficult undertaking, especially when options for better paying jobs are available elsewhere (Torquati et al., 2007). Turnover in child care settings has been reported to be as much as 30-50 percent each year (Ackerman, 2006; Machado, 2008). To add insult to injury, less individuals with bachelor's degrees are entering into and staying in the field (Pianta et al., 2009). Teacher turnover impacts the quality of pre-K.

In certain instances, researchers have found that adequate compensation has been associated with higher quality care and education for children, including aspects such as literacy environment (Pianta et al., 2009; St.Clair-Christman et al., 2011). Further, research from Whitebook and Sakai (2003) showed that compensation and experience are associated with teacher commitment and quality of care in early childhood settings. St.Clair-Christman et al. (2011) found that every unit increase in hourly wage was associated with a .44 increase in quality in the preschool classroom. Compounding workers' issues with accessing adequate wages, Herzenberg et al. (2005) reported that only 1/3 of providers have access to health benefits.

2.8   GAPS IN THE LITERATURE

The literature is very thorough in assessing the current state of pre-k programs across the U.S. Studies have taken a look at the impact of pre-k for children in terms of the benefits received and barriers in achieving long-term outcomes. The research has also looked at teachers as a factor in impacting program quality, and analyzed where challenges might exist in the relationship between the structure of the early childhood workforce and a growing need for high-quality programs.

While some studies, such as Torquati et al. (2007), have also directly asked teachers about barriers in achieving quality or other aspects of the classroom setting, little focus in the research has been placed on teachers as they exist in the policy environment. As the discussion about pre-k and the broader topic of early childhood learning becomes a larger part of the public discourse, it is increasingly clear that teachers, administrators, and other stakeholders are deeply interconnected with the policies that shape this system. In states like New York, where universal pre-k is in the process of being implemented, the requirements for pre-k teachers and administrators have changed drastically as the policy has been developed. Little research has yet been done to see how this has changed the daily lives of these pre-k providers and their perceptions of how this has impacted their ability to provide pre-k. Further, we know little about the political climate that surrounded policy change in the states that have expanded pre-k, including how all interested parties came together to develop the policy and what the major influencing factor was for change. However, there is opportunity for this to occur in states like Pennsylvania, where the policy is still in its earliest stages, or New York, where pre-k has been expanded recently enough that providers and policymakers are still moving through the change process.

3.0   METHODS

3.1   STUDY DESIGN

The data for this exploratory analysis came from semi-structured interviews with seven selected stakeholders that represent the early childhood education and pre-k field. Those represented come from an array of settings including large private for-profit child care centers, small nonprofit child care centers, regional advocacy organizations, a statewide research and advocacy organization, and one individual involved in implementation of universal pre-k in the State of New York and New York City to provide a comparative perspective.

Types of stakeholders were identified from three levels of influence, which include (1) Coalition members, or representatives of organizations working to shape Pre-K policy (2) Provider organizations, including center directors and organization CEOs, and (3) Individual teachers tasked with daily implementation of current policies. These groupings of stakeholders were chosen based on a review of the literature that outlined the policy context of the early childhood system in which outline numerous stakeholders influencing and participating in the pre-k system. Additionally, looking to models such as the social ecological model, we gain further understanding of how individual actors might exist within the larger organizational and political context (National Cancer Institute, 2005).

Stakeholders from each level were interviewed in addition to the seventh comparative stakeholder. These particular early learning stakeholders were chosen to provide "expert" insight into the current state of early learning in Pennsylvania as well as to provide their perceptions of how expansion of the pre-k system to include all three and four year olds would impact the system.

3.2   PARTICIPANTS AND RECRUITMENT

The sample was assembled using both a convenience sample and snowball-sampling methods. As a Public Policy Associate at the Pittsburgh Association for the Education of Young Children (PAEYC), a local affiliate of the National Association for the Education for Young Children (NAEYC), I have access to staff members who work directly with early childhood providers, including center administrators and pre-k teachers. The executive director of PAEYC was the first to be interviewed and she provided recommendations for other coalition members to contact that advocate for pre-k expansion. The director of professional development activities at PAEYC also shared the contact information of several pre-k organizations and teachers who might also be willing to participate. Subsequent interviewees were also asked to identify other stakeholders to contact.

3.3   DATA COLLECTION

Broadly, stakeholders were asked to define high quality pre-k and assess capacity for implementing high quality programs. Additionally, stakeholders were asked to address what they believed would be the immediate impacts of expanded pre-k. Three versions of interview questions were used to collect data. Each version was tailored to reflect stakeholder role (coalition member, provider organization, or individual teacher) but remained similar enough to allow for comparison and analysis. Interviews were conducted in person and over the phone. The following list is a summary of the information intended to be captured in each question, for a full list of questions asked, see Appendix A:

1. Defining high quality pre-k

2. Identifying best or promising practices

3. Discussing capacity to implement best practices

4. Identifying challenges, if any, to providing high quality pre-k

5. Exploring the impacts of expanded pre-k for teachers and organizations

6. Addressing "key components" to include in emerging policy

3.4   PARTICIPANT CHARACTERISTICS

A total of seven respondents representing the three identified stakeholder groups were interviewed: coalition, center director, and teachers. In addition, one comparative interview was completed with the executive director of a professional development, research, and advocacy organization who has been deeply involved in the implementation of universal pre-k for four

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year olds, both in New York City and New York State. In this case, the metropolitan district, given its size, served as a model for policy at the state level.

Each of the coalition members interviewed came from advocacy non-profits located in Pennsylvania representing both statewide and regional perspectives on the issue. The statewide organization has a research orientation while the regional organization is focused on the advancement of the early childhood field and workforce development. Both coalition interviewees serve as principle organizations in the Pre-K for PA campaign, a statewide advocacy campaign to make pre-k accessible to all three and four-year-olds in Pennsylvania.

Three child care center directors were interviewed. The size and classification of these organizations varied greatly. The first director serves as the chief executive officer of a for-profit child care organization where he is charged with overseeing 60 centers spread across Pennsylvania, Ohio, and New York. The second director is also employed with a large for-profit corporation of child care centers, but is the center director for one location in Allegheny County. The last director was from a small nonprofit child care center in Westmoreland County. All three directors represent organizations that are currently receiving state dollars to provide subsidized services.

The one teacher who was interviewed came from a nonprofit child care center in the city of Pittsburgh. She is charged with leading their pre-k counts program, and receives compensation through the local school district. The interviews took approximately 25-60 minutes to complete.

3.5   RESPONSES

All of the interview data was coded with either a "parent" or "child" code. Parent codes corresponded directly with each interview question, and child codes correspond with either question probes or novel topics or concepts that were brought up during the course of the interview. Parent codes were the most commonly applied. These codes were designed to correspond with each interview question, though in some instances, were applied as respondents answered questions that were not directed at that particular theme. One exception was the application of the developmentally-appropriate parent code, which did not correspond with any specific question, but was mentioned at least once by each non-comparative stakeholder group.

3.6   ANALYSIS

After all interviews were completed, they were analyzed to identify themes using the qualitative and mixed methods analysis software, Dedoose. Dedoose allows researchers to code and take excerpts directly within audio recordings. These excerpts were then transcribed to allow for closer analysis. Aspects that emerged that were unique to particular interviewees or that differed from the literature were also noted and coded. Codes were then analyzed using Dedoose to determine frequencies of the application of particular codes and also to identify where codes or themes might emerge that differ from the group or the literature. Further analysis was then done to determine whether any patterns arise in the type of information that is given based on individual stakeholders as well as their level of influence over the policy process or early childhood setting.

This study is limited in that it has a very small sample size and with limited resources to gather multiple interviews from individuals working in the same context. However, the analysis that has been done with the interviews conducted is intended to explore themes that emerge within the early childhood workforce and those who advocate on their behalf to gain deeper insight into their perceptions of emerging policy and how these perceptions might impact policy implementation.

4.0   RESULTS

4.1   PARENT CODES

The most commonly applied parent codes were general challenges, the definition of high quality, the immediate impacts of expanded pre-k, all of which had 10 or more applications. The specific 'components to include in policy' were also mentioned eight times, however, these responses primarily came from directors and the comparative interview. Similarly responses about preparation to implement best practices were mentioned six times, four of which came from the coalition interviewees.

4.2   CHILD CODES

Child codes were more detailed descriptions of the themes represented by parent codes. While some child codes came directly from question probes, others arose out of the interviews during analysis. Given that such a small number of interviews were conducted, any child code that was applied more than once by different interviewees or among different groups was noted. Child codes that occurred frequently were those that were specifically probed or were also common in the literature. For example, when looking at the code called specific elements of

high-quality pre-k, there were 10 total uses of that child code. Of these ten uses, ten different responses were collected that further described these specific elements.

Some child codes occurred more frequently, for example child codes that fell under the most commonly applied parent code, challenges.

Table 1. Challenges: Frequently occurring child codes

Challenge	Count
Teacher training and skills	7
Wages	6
Retaining staff	5
Administrative capacity	4
Policy Challenges	2
Recruitment	2

Challenge related child codes were applied 31 times. Those that occurred most frequently are listed in Table 1. Of note, "teacher training" and "skills" were mentioned in all but two interviews, and twice in one interview. Similarly, "retaining staff" was mentioned in all but two interviews, one of which was the teacher interview, which focused more on the difficulty of finding a secure job in the field. Additionally, as a current challenge, was mentioned in all but one interview.

Additional child codes were spread less evenly across interviewees and stakeholder groups. Figure 1 shows the complete cloud code generated by Dedoose that outlines the parent and child codes applied, with the largest and most centrally located codes corresponding to those applied most frequently.
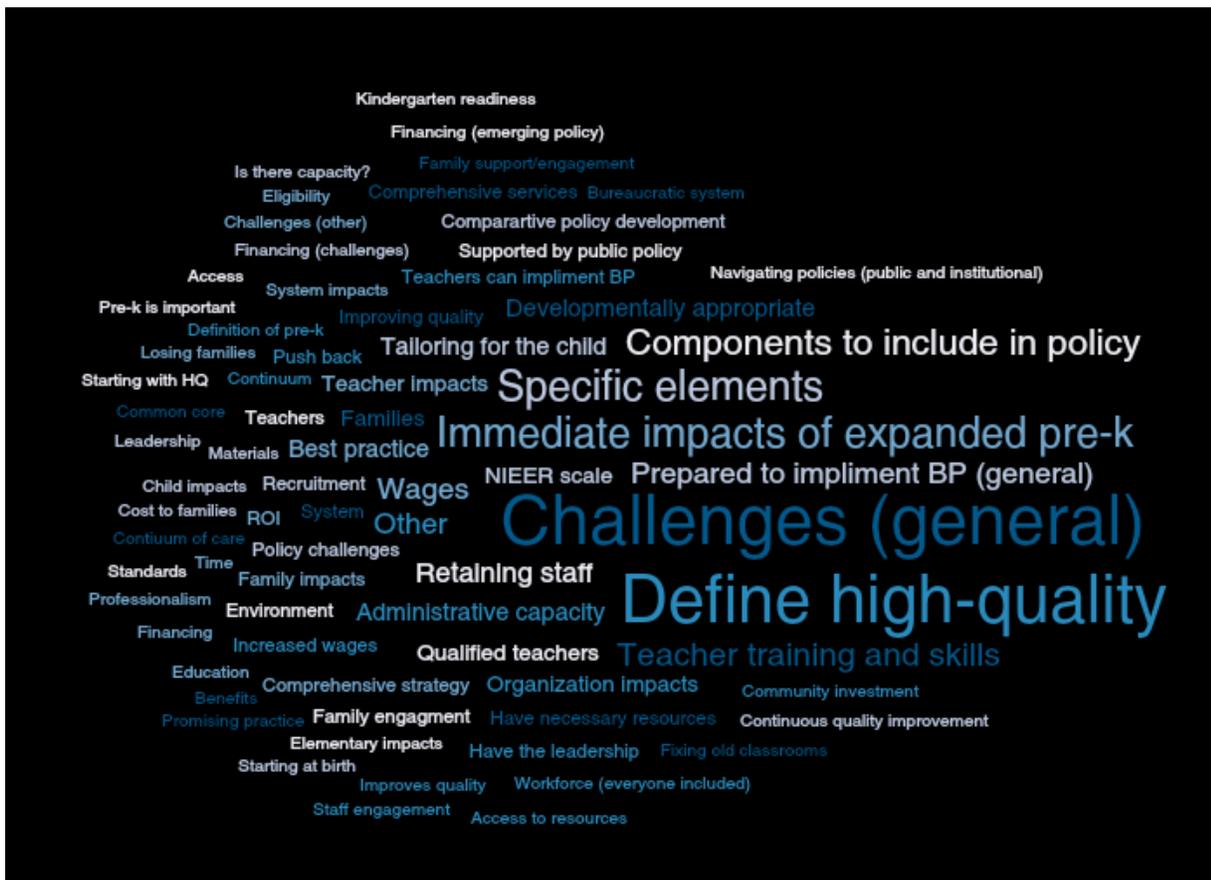
Figure 1. Parent and Child Theme Code Cloud

4.3 DEFINING PRE-K

A question that was not asked of stakeholders, but likely should have been, was how to define pre-k. From the literature, it seemed that pre-k would mean the same thing to every stakeholder, but for one particular stakeholder, this was not the case. The typical definition of pre-k refers to a set of programs aimed at getting three and four-year-olds ready for those first years of school by instilling them with the early literacy, problem solving, and social emotional

skills that are necessary for success in K-12 education (Colker, 2008; Pianta et al., 2009). One stakeholder disagreed with this definition, saying that:

> "Pre-k is one of those things that means different things to different people. I refer to pre-k as early learning, which is really birth through kindergarten, not just 3 and 4 year olds. I believe high quality pre-k is an integrative program for children, infants, toddlers, and three and four-year-olds, so that we're creating a continuum of learning at the most time sensitive area of development of a child." [Director, multistate serving, for-profit corporation]

While this stakeholder was the only person to define pre-k in this way, this theme of a continuum of learning is an important one, and one that seems to shape other themes and even cautions stakeholders about a policy that focuses solely on three and four-year-olds. In Pennsylvania, as well as at the federal level, the current movement in policy is primarily towards more universal access to pre-k, with the exception of long-standing programs such as Head Start and Early Head Start.

4.3.1   Stakeholder Groups

Much of the information elicited from interviews aligns with the literature. For example, the code called developmentally appropriate, which was used by all three major stakeholder groups refers to a core value of the National Association for the Education of Young Children (NAEYC). It is defined as, "An approach to teaching grounded in the research on how young children develop and learn and in what is known about effective early education." Furthermore, what this means for teachers is, "[It] involves teachers meeting young children where they are (by stage of development), both as individuals and as part of a group; and helping each child

meet challenging and achievable learning goals," (National Association for the Educaiton of Young Children, 2009). Similarly, the theme called "tailoring to the child," which likely finds its roots in the standard of developmentally-appropriate practice, was discussed in both the teacher interview and the comparative interview.

There were several similarities and differences among stakeholder groups that emerged that were expected based on their roles in early childhood education. Among the coalition and comparative interviewees, the interviewee who came from a more research-oriented institution, found it difficult to speak on behalf of the needs of providers with whom she interacted infrequently. By contrast, two other interviewees (one comparison and one coalition) represented organizations that worked in the policy arena, but also interacted with child care providers on a day-to-day basis. These individuals felt very comfortable talking about how these groups were faring in the current climate and how they might be impacted by policy change. From the director interviews, the two interviewees who represented large, for-profit corporations had much more insight about recruitment and retention of qualified employees. Further, the interviewees from smaller non-profit centers, particularly the teacher, seemed to have the least ability to disconnect public policy with their own school policies and the impact of policy change on themselves or other teachers in their center as opposed to K-12 teachers.

Across all groups, challenges in any number of contexts, were the most often sited points within our interviews. These challenges ranged from those that corresponded with designated probes developed from the literature, to others such as push back from child care providers regarding quality improvement and professionalism.

"I think there's a part of our field that doesn't see themselves as professional educators, and preschool, more than anywhere else in the early learning continuum, is about

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professional educators. It is not about just caring and nurturing for little kids...it's actually about teaching them. And we struggle with that in the birth to five world because it makes people a little nervous, but I think we have a part of our field that didn't join this field to be teachers." [Coalition, statewide research organization]

Here we can see that in some populations who might not view themselves as early childhood professionals, implementing high-quality pre-k could be a challenge.

4.4   THEMES

4.4.1   Defining High Quality

4.4.1.1 Best Practices that Work

When coding, "best practices" fell within the high-quality pre-k umbrella. Respondents seemed to make this connection naturally, and when they finished defining high quality, they had little more to say with regard to best practices. What this might say is that the tenants of high-quality care have become intertwined with providers' everyday practices in the classroom. This is likely the case for these particular interviewees, given that all of the individual providers interviewed worked in NAEYC accredited child care facilities and within Pennsylvania's Keystone STARS quality rating system. One of the coalition respondents also pointed out that the standards on which many of the quality rating systems are based stem from the National Institute of Early Education Research (NIEER) standards. These standards of high quality, she says, are widely accepted.

"I'd say [high quality pre-k programs] on the NIEER scale. I don't' think this is something that's up for debate. The National Institute for Early Education Research convened a panel of the nation's leading experts who have worked over 40 years in building high quality preschools. They did a meta-analysis of all the literature and the came up with the 10 point scale." [Coalition, statewide research organization]

Additional best practices that were mentioned also fall into or alongside this scale in some way, like comprehensive services and family engagement. In the Head Start model, the term comprehensive services refers to an array of programs available to the child and their family in addition to child care and child development services. These additional services include screenings and follow-up for health, behavior and development, health and safety, social and emotional health, nutrition, family goal-setting, social services, transition services, and services for children with disabilities (The Office of Head Start, 2015). Only one interviewee specifically cited the importance of comprehensive services, but made a case for them saying:

"So from a public health standpoint, from a public policy standpoint, Pennsylvania would be much smarter to say, 'We know we need a comprehensive strategy. And comprehensive across the ages, and comprehensive going deeper.' Just 5 or 6 hours of classroom time is not enough. What is your family support and engagement component? What is your community investment component? In other words, if you're running a great early childhood program, but there's no health clinic, no library, and no grocery store in your community, you don't change everything, you just change one little thing. It's not enough. You don't see the return." [Comparative, New York]

Another stakeholder also discussed the time spent in care, which he called dosage, as well as a similar concept with he calls a continuum of care as being essential to success.

"One [aspect of high quality] I think is dosage. The amount of time a child spends in a

program, both in the length of hours and the [amount of] time, of full year, and the

amount of years are critical." [Director, multistate serving, for-profit corporation]

Later, when discussing particular things to include in policy, he returned to this concept,

focusing more on the family.

"We have to make sure that the children maintain their eligibility. Head Start and UPK

[universal pre-k] programs typically do, but in the subsidized child care world, dosage is

so impacted by the child's family situation… We have to think about eligibility so that

children sustain for multiple years." [Director, multistate serving, for-profit corporation]

Not surprisingly, this was the stakeholder who also felt that all pre-k should refer to birth through

five years of age, rather than being limited to only three and four-year-olds, though as a for-profit

organization, he was less focused on the services available to the family or child outside of care.

4.4.1.2 Specific elements of high quality

When speaking about specific elements that make up high-quality pre-k, there seemed to

be agreement among stakeholders that certain aspects of care are exceptionally important. The

most commonly applied codes in terms of specific elements of high quality were "tailoring to the

child," which is defined as similar to "developmentally appropriate," having qualified teachers,

and the learning environment. Directors and coalition members spoke frequently about needing

qualified teachers to achieve the desired outcomes of pre-k. Correspondingly among the most

often cited challenge areas providing high quality pre-k were teacher training and skills.

However, when speaking about best practices, interviewees talked primarily about the quality

standard of having a bachelor's level teacher or someone similarly qualified in the classroom,

rather than specific skills related to that degree. One stakeholder asserted that a bachelor's level education was one of the most important tenants of high quality.

> "I think when you dive deeper into the analysis you find that some of the parameters are more important than others. I wouldn't diminish any of them, but it's hard for me to understand without the BA teacher how you really get to the return on investment that the literature really promises." [Coalition, statewide research organization]

The second coalition member further continued on this theme, focusing also on comprehensive services when talking about the importance of teacher qualifications in relation to other standards. She added that various components are needed for high quality as outlined in the NIEER standards.

> "[Referring to the NIEER standards] the big ones there that I talk about the most are teacher preparation, so that there's a classroom of three and four-year-olds who have a highly-qualified teacher, someone with a bachelor's degree, and someone with a teacher certification... That there is a curriculum in place and that there are early learning standards in place that align to that curriculum, and that class size is small, so one teacher for every ten children. It's really important in the research that there is family engagement to the program, that the program offers some snack or breakfast that is pretty healthy, and that there's some health-screening component as well. But to me, it's really about standards, curriculum, highly qualified teachers, assessment, and class size." [Coalition, regional provider organization].

The directors interviewed also spoke to the need for highly qualified individuals in their centers, including an engaged staff that can explain the importance of pre-k to its families.

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"Hiring passionate, compassionate, and educated teachers. That's first and foremost to make a good program. You can have all the resources in the world, you can have all the money in the world, you can have a beautiful facility, but if you don't have good people in you program, then you have nothing. Going from there you need to have the resources. You need to have a toolbox of information. You need to have all of the data and research in front of you and be able to put it into laymen's terms for families. Having strong family-engagement. Most programs are not going to be successful if families don't understand the importance of having their child in your program. As an administrator, you need to have high employee engagement." [Director, single site, large for-profit]

The literature, which talks extensively about quality standards and teacher-child relationships, rarely factors in this level of passion and compassion cited by this director in describing her own hiring practices.

4.4.2   Capacity to Implement High Quality

Questions about the field's ability or capacity to implement the best practices, quickly led to a conversation about the challenges they face in doing so. Of the major themes that the interview questions addressed, the parent code called "prepared to implement best practice" was applied the least of all others. Some responses showed though that in the right settings, with adequate resources, teachers could be very prepared to implement best practice.

"They [my teachers] are extremely prepared. We're a little bit different than most organizations that serve children birth to five years old. Since we are a large corporation we have a huge backing, we have a large education team... that's active with public policy. We have a huge curriculum team. We have inclusion services team that helps us

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…with children with special needs. And obviously working for a corporation, we have a huge financial and legal team. So it takes the stress of allocating that money and figuring out what we need to do with it once we get it out of our hands. It goes to our financial department." [Director, single site, large for-profit]

This also speaks to the administrative capacity required to easily implement these practices in the child care setting. This director comes from a well-resourced setting, representing just one center of a national chain of centers. From a less-resourced setting, administrative capacity appears to be more of an issue.

"There's a lot of challenges with the policies in place. I have a lot of different things that I have to follow for NAEYC, PAEYC, Keystone STARS, Pre-K Counts, PASS curriculum, creative curriculum. And then I do other things like ASSET, which is another curriculum. We did Digital Bridge curriculum, all at the same time. A lot of them go hand in hand. ...I find myself like, 'Aah, how do I keep all of these people happy?' But I think it is good that we have policies because I have learned the different things that they want me to do, and I've tried to meet them to the best of my personal ability." [Teacher, small non-profit center].

The coalition members found answering the question of whether the child care community was prepared to implement best practices a bit more difficult to answer. They cited lack of hard data that could say whether current policies were really working. The first coalition member began her answer with an aside, stating that she does not often work directly with providers, and could only speak anecdotally, but called upon the implementation of Pennsylvania's most recent pre-k policy.

"I don't think programs have adequate financing to implement these high quality standards and then therefore they don't have qualified staff. ...I think the money comes first personally. I think the only experiment we have in Pennsylvania is when we passed the pre-k law in 2007 and appropriated $75 million, and then the next year we upped it. We were able to spend that money reaching the standards to get to seven [out of ten] on the NIEER scale. And sure there were providers that couldn't do that, but we didn't have a challenge in building supplies when we made the money available. People could indeed train and hire the staff and programs could expand the availability of spaces that were maybe available to private pay kids to public subsidy kids. And programs just expanded their capacity in general. Now obviously that took technical assistance and support, but I think it's a money problem." [Coalition, statewide research organization]

The second coalition member further added to that conversation, talking about the current state of the policy enacted in 2007 as well as Head Start and how this has potentially enabled organizations to build capacity, but that there's an overall lack of research to truly speak to this issue.

"All I can speak to is the current Pre-k Counts program and the current Head Start programs. So there's a lot of state and federal dollars going into those programs, Head Start more than Pre-K Counts. And while there's technical assistance for those programs and there's professional development …I'm not sure that anyone has done enough research to see if it's working. So I'm sort of hesitant to say that they're supported by policy..... I think on paper the policies look good that there's a PA Keys System and regional technical assistance ...but I don't know if those things are working on the ground, and I don't know that we're studying that. So I would hope that the [we are] championing

that, but sometimes I feel like we're not doing enough work around that because we're so consumed about raising the revenues just so more children can get served. There's this struggle between quantity and quality and [we] are pretty loud that you need both. You can't serve more kids without the quality, which then would assume that the mentoring, and coaching and professional development are all wrapped around that. But sometimes I feel like more of our work gets focused on raising revenue to serve more kids and quality is coming later. I don't think that we have capacity to do both all the time." [Coalition, Regional provider organization]

4.4.3   Challenges in providing high-quality pre-k

As becomes apparent, much of the conversation around high-quality pre-k leads to concerns about the aspects of the system that currently fall short in meeting standards. In part, this could be attributed to the more recent emergence of pre-k as an area of policy discussion. Even those states that have moved to providing universal pre-k, like Georgia and Oklahoma, have done so in recent decades, or in the case of New York in recent years. Until the voting public fully embraces the value of investing in early childhood and are willing to support their governments, local, state and federal, in providing the funds to make early childhood a priority, there will be challenges in providing high-quality pre-k. Additionally, just because the funds are available, doesn't ensure quality. There is a much need for continuous quality improvement to ensure that programs are meeting the needs of children and their families to the best of their ability.

4.4.3.1 Staffing Challenges

Many of the challenges discussed during interviews revolved around staff and capacity. Of those codes applied to multiple stakeholders, five out of six addressed these issues of finding and retaining qualified teachers and leaders as well as paying them a sufficient wage for their qualifications as well as effort. Directors in particular voiced their concerns about the training that new teachers were receiving in two-year and four-year programs. The director who served as CEO of a sixty-site child care organization serving three states was able to speak to this issue from a large-scale perspective. He made sure to discuss credentials as being very separate from having the skills and the emotional maturity to be able to effectively manage an early childhood classroom. He cites practicum experiences as an opportunity to address this issue.

"I think there's a significant lack of skills, and again I'll separate credentials versus skills. I don't think we're doing a good job of preparing teachers from a skills perspective, classroom management, or practicum, so that when they actually head to the workforce they have definite life experience. In the associates or bachelors program, we need to put teachers into a real classroom environment for two reasons. One, we want to make sure that they like it. You have to like children, so by putting them in during their education, they can make that choice should they not like it. And then, to [know whether you are] able to be a lead teacher and able to manage a classroom...those skills are absolutely critical." [Director, multi-state serving, for-profit corporation]

The director representing a single site saw many of the same issues. She recalled instances where teacher candidates did not know what to expect, or made assumptions that they would be going into a public school setting as opposed to a private center.

"[I face challenges] finding qualified teachers that understand a child care setting. Most teachers that are coming out of these college programs, whether it's a two-year or four-year school, don't understand what it is to work in early childhood. They think that they're going to get a job in a school [district].... I feel like [center-based] pre-k has a lot more challenges than you would have in a school district, even though class sizes are smaller and you might have more teachers in the room. I feel like it's hard to find teachers who truly understand the development of a four and five-year-olds. ...When you have those factors and your teachers may not be as trained as you hoped they were, it's an emotionally taxing job. And that is something that I don't think schools will ever be able to teach, that is how emotional it is and how mentally draining it is working with small children. And really understanding them and their needs, they don't have the words to tell you what they may need. They may have a meltdown, and some teachers don't expect it to happen in a pre-k classroom. [Director, single site, for-profit corporation]

Additionally, the teacher echoes these sentiments, speaking to her own experience entering the work force feeling unprepared for working with at-risk children.

"When I first got out of college, I thought that I was very prepared. I had a ton of experience with early childhood, elementary, the whole shebang. I was prepared for a job. I worked hard. When I came here it was kind of a different story. When I started here, I had harder children than I did in [more resourced communities]. My challenges here were my children. I was not ready. I've been punched in the face, kicked in the face, screamed at, spit on, bit, sworn at, hit on, by a four year old. I remember my first week I had a table thrown at me... I was completely unprepared for the children at this center

when I started. Yes and no, yes prepared for something more like what I was used to, but

no, I was not prepared for at-risk children." [Teacher, small nonprofit center]

4.4.3.2 Wages

Teacher wages are one of the most discussed challenges within the literature. Given that

early childhood teachers are often paid less than twice the minimum wage even with a bachelor's

degree and corresponding certificate in early childhood, there are concerns in the literature that

this might be a factor in teachers leaving the field or choosing other professions altogether.

While asking about wages was one of my probes given its presence in the literature, the

responses I received reflected true concern with the state of wages in the field. Respondents often

talk about wages in the private sector, both for-profit and nonprofit, as compared with the wages

of teachers working within the public schools. In future research, this group should be

represented in stakeholder groups.

Speaking not only for her own center, but for others as well, the director from a small,

nonprofit child care center noted the difficulty she had in retaining her teachers without

providing them with adequate compensation worthy of their skills.

"I would say one challenge not just for ours but probably for other facilities [as well] is to

pay for the teachers. Once we receive the teachers that have the education that's required,

typically they move on. So by being able to pay them truly what they are worth might be

able to maintain them and not have turnover. [Director, small nonprofit center]

The director of the large, for-profit child care organization also mentioned this during his

interview, noting that he preferred not to hire teachers with master's degrees, as he found that

their turnover was one of the highest, which he cited as going against the best practice of

providing consistent relationships for children. The coalition member from a regional provider

organization further discusses both the challenge in competing with wages in the public school setting as well as the wages of assistant teachers and teachers' aides, which can be even close to minimum wage.

> "Wages are huge. As I think specifically about pre-k, this is not in child care and I'm going to say that, at least in pre-k counts as we know it now, there are some wage requirements. A teacher is going to make $30,000 per year. However, that is still not enough to be able to compete against a school district where that teacher is going to make more or even in another sector. Additionally, there are not those same resources for the teacher's aide that is just as critical for this to be success and that no one is talking about.... We are not talking about the assistant teacher when we are talking about implementing pre-k strategies. That person needs to have almost as much training as the lead teacher in my opinion, having done this work. We're not paying that person well at all, and that person is moving around a lot and that's going to impact the experience of the child and the family. So wages, retention, benefits. Many teachers working in pre-k classrooms still do not get medical benefits. We just have to address this as a field.
>
> "[Coalition, Regional provider organization]

The teacher then talks about this from her own personal experience in entering into the early childhood field, initially thinking that she would be an elementary school teacher, and her time spent in several different jobs before finding a position as a Pre-k Counts teacher like that described by the coalition stakeholder.

> "I actually was originally going to be an elementary teacher and I got the early childhood certificate just because it was one more semester. …I didn't realize the amount of money that you make as an elementary teacher compared to in a day care. ...I remember being

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offered...minimum wage. I'm like, "I have a degree!" This [job] here, because I am in the Pre-k Counts program, is a lot better. I get paid through Pre-k counts, I don't really get paid through here. The center pays me during the summer and Pre-k Counts pays me during the year. I get paid a lot better than I was when I was just working for [for-profit center]." [Teacher, small nonprofit center]

As a system, it is not as simple as raising wages. The CEO talks further about the business model of child care centers and the competition between their pre-k programs and those offered in the public schools.

"The challenge is the benefits, in the public school system those teachers get full healthcare and full pension, whereas if you're not in the public school system, most providers can't offer that scope of service. So that I think is a real issue when we think about wages. ...It's one of the dynamics of this business model...the two most important things that you manage in a business is your price and your labor cost. In this industry, you don't manage your price, you're a price taker, and because of ratio regulations your labor cost is pretty fixed. So in any case of inflation, cost of living increase, or you want to pay your teachers more, your reimbursement model is typically fixed. …In those environments, if you want a wage increase, it means you're taking money away from something else." [Director, multi-state serving, for-profit corporation]

One way to address this is through increased public dollars entering into the system which are tied to regulations around wages for teachers, however, the CEO points out that in New York this has created a "buyers' market" of sorts where qualified teachers have much more control over the type of setting in which they teach and what they are compensated for their work, rather than improving quality of programs across the board as the literature might indicate.

4.4.4   Perceptions of Pre-k Expansion

As stakeholders discussed their perceptions of how a policy that expanded pre-k to more children, or potentially all children, would impact the field as well as their organizations or personal careers, answers were mixed regarding how they would be affected. Some talked about the opportunity for the field as a whole, while others discussed benefits for children and their families. Those who had less understanding of the type of policy that advocates are promoting, which includes expansion of the current Pre-k Counts system and exists in a variety of child care settings rather than a more school-based model, feared how this might impact the number of families enrolled in their program. One coalition member, who is also a principle member of the Pre-k for PA campaign saw an unprecedented opportunity for both providers and consumers.

> "I think it's an unprecedented opportunity for early learning providers. So if we could win the kind of investments that we're talking about over the next 4-6 years, I think that we would dramatically impact early learning providers to deliver high-quality services to children." [Coalition, statewide research organization]

The small center director takes this further, talking both about the opportunity to provide more pre-k slots to parents who can't afford it otherwise and the potential to serve more children in rural settings, like those in the areas surrounding her program.

> "I think first of all the entire state would benefit from that. Our facility already has a pre-k counts program and two other private pay programs that are currently full at this time. If we were to expand, we do currently have a waiting list that I know other families would benefits from. There are other "schools" we'll call them, out there that maybe don't maintain the quality standards for a Pre-k Counts Program. I definitely think there's a need and definite growth that would come from expanding the program and reaching out

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to families in more rural families even that need the program, need the pre-k, for their children ages 3-5 who need them." [Director, small nonprofit center]

She also discussed the impact on her own teachers, though in this case focusing more on the satisfaction that comes in helping children to develop and teaching them hard skills that are transferable to the classroom. She asserted that there is an immense amount of job satisfaction that this brings to teachers as they track child outcomes together with the schools. In another interview, the single site center director discussed the point at which children come into her program describing difficulty with skills such as holding a marker or crayon, using scissors, or even interacting with other children. The small center director then spoke to outcomes, using an anecdote about kindergarten teachers calling her center thanking them for teaching children to open a milk carton. "A milk carton?" she says. "I don't remember our teachers teaching them that skill directly." This helps to understand the reality of where children are coming from and the growth that is to be had in these years spent in pre-k.

> "Having [teachers] and giving them the opportunity to teach. Our classroom sizes ranges from the one to ten ratio, so we have two smaller groups and then we have two larger groups. The teachers have definitely noticed significant changes in children from 3-5 here from social emotional schools to developmental growth as far as like self-help skills that they have. And those children that have been participating in our program, and we've worked with the transition teams in the school districts, when they go for screening, we ask for some type of scoring or recognition that they can tell which students came from our facility, and those who have come from no facility. And there are significant changes, and those teachers in the school district have noticed... that the self-help skills, the social-emotional skills, the focus is more developed. And the teachers themselves benefit

because they get excited when they see that there's more growth and children are interested... The teachers themselves feel more valued." [Director, small nonprofit center]

The CEO of the multi-state serving corporation sees the potential for growth in the proposed changes, but also cautioned that we should be looking to the entire early learning system rather than just programs for three and four-year-olds when thinking about improving quality.

"I do believe that it improves quality…There's a recognition that quality costs money, so as we increase the number of children served, we are receiving more guaranteed money for us to make investments in quality. …We spend a lot of money in this state on subsidized child care, 80% of that funding is low quality. We don't see any return on our investment... I think we need to spend more effort on taking that money and making the same expectation of pre-k counts, so that way we get a better return on money spent. [Director, multi-state serving corporation]

This issue is one that there is currently not much chatter about, and it certainly does not appear much in the literature, yet it is a theme that appeared unexpectedly, and one that stakeholders cautioned providers against by focusing solely on pre-k.

4.4.5   Key components to include in policy

Similar to assessing the perceived impacts of expanded pre-k, stakeholders showed no clear consensus in exactly what they believed policy should include. In fact, their comments included almost every aspect of the early childhood field. The likelihood that the early education system would see that type of broad, sweeping change of a system is unlikely. Responses ranged from those around making access easier for children and families to cutting out unnecessary

bureaucratic processes for centers. The regional coalition member described one major concern that she has regarding the path on which policy seems to be taking.

> "I think one of the policy challenges that's really playing out, that we really have to think about, is that pre-k, the way we're defining it, looks much more like a school year, 180 days, 9 months out of the year, 9-3. That's not how most parents are choosing pre-k because most parents are still probably choosing pre-k because they need to go to work. So the child care policies and pre-k policies aren't always aligned with each other. We hear a lot of stories about children who are in a pre-k program for 180 days...but summer comes and they still need care but there's no subsidy check for them, so that family goes on a waiting list and that parent still needs to go to work. So I think we really need to think about aligning pre-k policies to child care policies to really make it work. ... I think transportation is an issue, so policies for pre-k really aren't addressing transportation for families.... Except at Head Start, people aren't required to provide transportation, and if they do provide transportation, they have to use specialized school buses. So again, I think we're building this policy that we can have more kids access pre-k but we don't have any way for families to get them there. Providers will say, we have slots but people aren't able to get to us. [Coalition, Regional provider organization]

In this case we are thinking about how access impacts families' ability to utilize the system if it were to be expanded. Additional responses included details about the necessary regulations to ensure that all kids are receiving the same standards of care, while others spoke to the integration of the concept of comprehensive programs, serving the needs of families in a holistic way, while also slowly and deliberately implementing change to receive the best outcomes.

"In New York, because we implemented so quickly, we are going to have quality problems. And what we advised Pennsylvania is to slow down. We gave Pennsylvania two very key pieces of advice, slow down and do not think about this as a four year old strategy. The other problem in terms of when you're analyzing what's going on, is the science tells us that in order to have a return on investment for early childhood, you have to start at birth, you can't start at four. This idea of investing in pre-k, one could suggest is a big policy mistake. And this has happened throughout history...the idea where you get an idea and you quick implement it without being sure, because it's just sexy, because it's a good sound bite. ...So from a public health standpoint, from a public policy standpoint, Pennsylvania would be much smarter to say, we know we need a comprehensive strategy, and comprehensive across the ages, and comprehensive going deeper. In other words, just 5 or 6 hours of classroom time is not enough. What is your family support and engagement component? What is your community investment component? In other words, if you're running a great early childhood program, but there's no health clinic, no library, no grocery store in your community, you don't change everything, you just change one little thing. It's not enough. You don't see the return."[Comparative, New York]

Most importantly, stakeholders pressed for the necessary resources to be able to achieve these things.

"Money. Really, it comes down to money. We have a pretty high quality program structure. …What we need to do to get Pre-K Counts to a 9 or 10 is not statutorily- based, it's mostly in practice. The only real omission is the hot meals, but [what we need is] to have meaningful family support and referral for HHS. It doesn't exist in Pre-k Counts. It's

not there. It's part of all the literature studies that have comprehensive supports more like Head Start, more like child care. So, I think we have to be serious about how we're going to build that capacity. And that capacity is not built within the early learning system, it's built by partnering with other child-serving institutions. I think the big piece is money. We need $700 million. We know what this is, we know how to get it there, and we need to finance it." [Coalition, statewide research organization]

4.4.5.1 Aligning with the Child Care Agenda

Interestingly much of the conversations with stakeholders focused on how the pre-k agenda and the early learning agenda need to be aligned, contrary to anything that was found in the literature. Nearly every stakeholder seemed to return to this need for alignment among systems, and in some instances, unintentionally mixing the two. From one perspective, this makes a lot of sense for child care centers who are primarily serving children ages birth to five, but also happen to provide pre-k.

"I would like to see no more waiting lists for families to receive subsidy. I would like to see a less disjointed subsidy system. I'd like to see it more universal across the whole state of Pennsylvania. …I'd like to see it helping with raising teacher wages. I'd like to see the return on investment. If they're going to invest all this money into universal pre-k, we need to see exactly what we are all going to get as a community, as a state, as individuals, what exactly are we all going to get back from that." [Director, single site, large for-profit].

Along a similar vein, the CEO expressed the same concerns with the subsidy system and supporting what he calls the continuum of care.

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"We have to make sure that the children maintain their eligibility. Head start and universal pre-k programs typically do, but in the subsidized child care world, dosage is so impacted by the child's family situation… We have to think about eligibility to that children sustain for multi-years." [Director, multi-state serving for-profit]

Calling upon her ongoing experiences in New York, our comparative stakeholder was able to provide a number of important policy recommendations for Pennsylvania as it poises itself for changes to the pre-k system in coming years.

We've been arguing that if we're going to start new pre-k classrooms, let's just start right. Let's not fix pre-k classrooms, let's just start right. ...If we're going to start new pre-k classrooms, we have a better opportunity than if we're going to fix old classrooms to become good pre-k classrooms. And that's an important distinction. It's likely that in most cities, like Pittsburgh, we would do both. And that's what we've done in NY, we are fixing old classrooms, for lack of a better word, and we are building new classrooms. And what we're trying to do is say, as we building the new classrooms, we have to build it right from the start. We don't want to get a mediocre thing going and then start fixing it, because we just know that it takes far more resources of many different kinds, it's money, it's time, it's effort, it's a lot of stuff. [Comparative, New York]

She noted that everything comes down to the needs of families and communities. Pre-k is designed not only to help develop children, but also to serve parents who may be working and in need of child care. Therefore, better alignment of these two systems is a logical policy recommendation.

"Again all of these policies go together, what do the families need? A family needs access in their community. One parent might want their child to go to pre-k where they

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went to child care from the time they were born, another parent might have older children already at school and might say, if I could make one stop and all of my kids could be in the same place, I want the school-based option. So the first policy is making this supportive of families in every possible way. The second is to look at the service delivery systems and how do they work together. So, child care and pre-k. The other piece of that second policy discussion is that we want to make absolutely sure that new resources to pre-k don't hurt the delivery of child care. So if you take four year olds out of the child care system, the system is likely to fold. ...Four year olds cost a program much less money than infants and toddlers. ...Third policy lever, ...how are we going to support a workforce that gets their degrees, how are we going to support their compensation, and just because they're getting paid well and have their degrees does not mean they're going to be any good. ...The degree is the bottom, it's the foundation of the workforce, it's not the top, the top is where do you rank as a great teacher? So we want all those pieces, we want compensation and we want ongoing professional development, supervision, and other supports for the workforce. So we want a continuous loop for the workforce."

[Comparative, New York]

She also made sure to include the workforce, pointing out that without a supported workforce to support change. This is a challenge that New York has seen from the very inception of its pre-k expansion policy, but as we've seen, without a supported workforce, the task of meeting quality standards is much more challenging.

5.0   DISCUSSION

The initial purpose of this study was to capture how social policy, specifically universal pre-k, is perceived and understood by those tasked with implementing it. A wealth of research was available regarding the importance of high-quality pre-k to the growth and development of a child, especially those most at-risk for adverse life outcomes over the long run. This research has shed light on a long list of challenges that teachers and administrators face every day, and most importantly, that pre-k does not exist in a vacuum. Pre-k is just one of many early childhood initiatives aimed at giving children the very best possible start in life. But without family, community, health, and a supportive policy climate, this means very little. The data presented here is limited to s a scope of only seven stakeholders primarily representing a small geographic area, nevertheless, there are very subtle, but valuable differences in how different stakeholders understand the policy climate and how it affects them.

The clear themes that emerge from this work is that there are a number of challenges that stakeholders in the early childhood stakeholders face in providing pre-k and more broadly early learning as a whole. In many ways, these two pieces, pre-k and care in the years prior to pre-school are much more closely related than current initiatives might lead one to believe. In reality, the needs of these two parts of early learning are nearly impossible to separate out. Particularly when considering that without three- and four-year olds continuing to be housed in the larger

child care system, it would be difficult for the rest of early childhood centers to maintain financial stability.

We also see similarities when looking solely at the needs of children as compared to the needs of the early childhood system. Children, especially those coming from more challenging backgrounds, need a range of services extending beyond simply receiving a high-quality early education. Several interviewees cited the need for a comprehensive and holistic early childhood system that carries children from birth into school and beyond. This includes making sure that children exist in communities where they can be healthy and thrive, have access to transportation to get them to these services, and be surrounded by supportive individuals who can help them to develop and grow.

I have not found that this is necessarily reflective of the early childhood education literature, though it echoes the theory of the social determinants of health often cited in the field of public health. Healthy People 2020 (U.S. Department of Health and Human Services, 2014) defines the social determinants of health as involving economic stability, the neighborhood and the built environment, health and healthcare, the social and community context, and education. Particular aspects of the social determinants of health relative to the needs of children include the availability of resources to meet basic needs, public safety, social support, and others that encompass the need of the whole person. With the resources to pursue further research, it would be beneficial to look deeper into the child development literature. It is likely that this is a theoretical framework for looking at the child that also exists there.

The challenges discussed by interviewees are also reflective of that discussed in the literature, though they extend this to a deeper level of understanding by connecting this to various stakeholder perspectives. An understanding of these challenges is helpful when thinking

about how policy that addresses the expansion of pre-k should be approached. Key in this policy should include pieces that directly reflect the need for highly-skilled teachers in the classroom. This can only be addressed through collaborations with training programs that are educating new teachers and participating in the professional development of existing teachers. For training programs in particular, this requires that students are given a clear set of expectations for what their career track might look like in early education, with particular focus on care outside of the public school system. Additional investments should be made into providing students with practicum opportunities in a variety of high-quality early learning settings. This requires two-way relationships between early childhood organizations and the colleges and universities training new teachers.

Building upon this, there is great need for further collaboration and investment with entities that do not traditionally consider themselves to be early childhood providers, including local governments and other resource delivering agencies and organizations. It's often said that it takes a village to raise a child, and that is precisely the way that this should be approached from birth and onward, making sure that particular levers, like pre-k and K-12 education are supported in ways that help to achieve the desired result.

5.1   LIMITATIONS

This study was extremely limited in scope and therefore many of these findings and conclusions cannot be generalizable to the larger population. Given that this work was primarily exploratory in nature and meant to identify themes and perceptions among different stakeholders,

future research should aim to capture more depth from particular themes that were brought up by stakeholders, or attempt to capture similar ideas but from a larger population. Interesting case studies could be performed on Pennsylvania and New York as the pre-k policy landscape continues to change and develop in these two states. Additional looks at the

5.2   PUBILC HEALTH IMPLICATIONS

Pre-k is beneficial to children when they are engaged in high-quality programs. Research shows that the experiences in the first several years of a child's life are critical to brain development-- especially those most at-risk for experiencing adverse events. Not only does pre-k prepare children for school, but it has been associated with long term benefits minimizes the chance that children will require more costly health and social interventions later in life. Additionally, the field of early childhood relies on teachers to provide high-quality pre-k. Yet, the early childhood system lacks the ability to provide stable and supportive work environments to its teachers. A lack of investment in the system means that teachers and other staff typically make at or below a 'living wage.' This is not conducive to a healthful lifestyle when we think about access to resources such as food, transportation, and healthcare. The social determinants of health play a major role when considering both of these populations.

6.0   CONCLUSION

Generally, there were little differences shown in the perceptions of pre-k policy across various stakeholder groups. Stakeholders, as a whole, agreed upon quality and challenges within the field. Surprisingly, there also seemed to be some consensus about the need for alignment between pre-k policy and child care policy. If taken from a larger population that included public school based providers, it is possible that we would have seen different perspectives on this matter.

Pre-k, and early childhood as a whole, is an important subject for public health professionals to be thinking about from multiple lenses. First and foremost are the benefits to the children when they are engaged in high-quality programs. We know these first years of life to be extremely important for building the brains of children, especially those most at-risk, reducing diagnosis of developmental disabilities and reducing the likelihood that they will require services later. Second, from a workforce perspective, the early childhood system is lacking in its ability to provide a stable and supportive work environment to its providers. The early childhood workforce typically makes at or below a living wage and is increasingly made up of low-income women. This is not conducive to a healthful lifestyle when we think about access to resources such as food, transportation, and healthcare. While workforce policies are typically not discussed in the public health field, they are a major contributing factor to the health and wellness of the people we serve every day. To improve the health of the population over all, we must look past

our current lens to a more comprehensive system of policies and structures that individuals interact with every day.

APPENDIX A

STAKEHOLDER INTERVIEW QUESTIONS

A.1   QUESTION FOR ALL INTERVIEWEES

*** Can you state your name, title, and the organization that you represent?

(If not answered above) What role do you/your organization play in providing access to Pre-K?

A.2   QUESTIONS FOR COALITION MEMBERS

1. High do you define high quality pre-K?

   PROBE: what are the specific elements of high quality pre-K?

2. What are "best practices" or "promising practices" in providing high quality Pre-K that work?

3. To what extent are provider organizations in PA implementing these types of practices?

   PROBE: To what degree do you think are provider organizations prepared to implement these

   practices? (i.e. supported by policy, have the necessary resources, leadership, teachers etc.)

4. What challenges do individual organizations that provide pre-k face in Pennsylvania?

PROBE: In terms of wages, recruitment of qualified teachers (training and certifications), retaining staff.

PROBE: Are there any other types of challenges?

5. If universal pre-k becomes a reality in Pennsylvania, what will be the immediate impacts for Pre-K organizations?

PROBE: For individual teachers? (i.e. expectations, wages, qualifications, certifications)

6. What would you like to see as key components of the policy/emerging policy that expands access to Pre-K? Why?

7. Is there anyone that you would recommend that I speak with about this subject?

8. Is there any other information on this subject that you'd like to add?

A.3   PRE-K ORGANIZATIONS

1. High do you define high quality pre-k?

PROBE: what are the specific elements of high quality pre-K?

2. What are "best practices" or "promising practices" in providing high quality Pre-K that work?

3. To what degree do you think organizations like yours are prepared to implement these practices? (i.e. supported by policy, have the necessary resources, leadership, teachers etc.)

4. What challenges does your organization face in providing high quality pre-k?

PROBE: In terms of wages, recruitment of qualified teachers (training and certifications), retaining staff.

PROBE: Are there any other types of challenges?

5. If universal pre-k becomes a reality in Pennsylvania, what will be the immediate impacts for your organization?

   PROBE: For individual teachers? (i.e. expectations, wages, qualifications, certifications)

6. What would you like to see as key components of the policy/emerging policy that expands access to Pre-K? Why?

7. Is there anyone that you would recommend that I speak with about this subject?

8. Is there any other information on this subject that you'd like to add?

A.4   INDIVIDUAL LEVEL QUESTIONS

1. High do you define high quality pre-k?

   PROBE: what are the specific elements of high quality pre-K?

2. What are "best practices" or "promising practices" in providing high quality Pre-K that work?

3. To what degree do you think you are able to implement these practices? (i.e. supported by policy, have the necessary resources in your workplace, leadership)

4. What challenges do you face in providing high quality pre-k?

   PROBE: In terms of job support, benefits and compensation, training and PD

   PROBE: Are there any other types of challenges?

5. If universal pre-k becomes a reality in Pennsylvania, what will be the immediate impacts for you? (i.e. expectations, wages, qualifications, certifications)

6. What would you like to see as key components a policy that expands access to Pre-K? Why?

7. Is there anyone that you would recommend that I speak with about this subject?

8. Is there any other information on this subject that you'd like to add?

APPENDIX B

CODE APPLICATION BY STAKEHOLDER GROUP

Code	Teacher	Director	Comparative	Coalition	Totals
Challenges (general)	**4**	**9**		**7**	**20**
Access				1	1
Administrative capacity	1			3	4
Time	1				1
Benefits				1	1
Challenges (other)				1	1
Cost to families		1			1
Financing (challenges)				1	1
Policy challenges	1			1	2
Continuum of care				1	1
Navigating policies (public and institutional)	1				1
Professionalism				1	1
Push back				2	2
Recruitment		1		1	2
Retaining staff		3		2	5
Teacher training and skills	1	4		2	7
Leadership		1			1
Wages	1	3		2	6
Components to include in policy	**1**	**3**	**3**	**1**	**8**
Comprehensive strategy			2		2
Community investment			1		1
Family support/engagement			1		1
Families		2	1		3
Financing (emerging policy)				1	1
Improving quality			2		2

Continuous quality improvement			1		1
Fixing old classrooms			1		1
Starting with HQ			1		1
Standards	1				1
Starting at birth			1		1
System		1		1	2
Bureaucratic system				1	1
Eligibility		1			1
Teachers		1	1		2
Education			1		1
Increased wages		1	1		2
Define high-quality	**3**	**6**	**5**	**5**	**19**
Best practice		1	2	1	4
Comprehensive services			2		2
Family engagement		1	1		2
Staff engagement		1			1
Promising practice		1			1
Specific elements	2	3	3	2	10
Common core		1			1
Continuous quality improvement2					
Continuum of care/programs		1			1
Dosage					
Environment (classroom)	1		1		2
Financing					
Materials	1				1
Qualified teachers		1	2		3
Tailoring to each child	2		2		4
Workforce (everyone included)			1		1
Developmentally appropriate	**1**	**1**		**2**	**4**
Immediate impacts of expanded pre-k	**3**	**5**		**2**	**10**
Child impacts		1			1
Elementary impacts		1			1
Family impacts	1	1			2
Improves quality		1			1
Is there capacity?				1	1
Organization impacts	1	2			3
Access to resources	1				1
Losing families		1			1
System impacts				1	1
Teacher impacts	1	2			3
Other	1	1	2	2	6

Comparative policy development			2		2
Challenges					
Definition of pre-k		1			1
NIEER scale				3	3
Pre-k is important	1				1
Kindergarten readiness	1				1
Return on investment		1		1	2
Prepared to implement BP (general)	**1**	**1**		**4**	**6**
Have necessary resources		1		1	2
Financing				1	1
Have the leadership		1		1	2
Prepared to implement BP (other)					
Supported by public policy	1			1	2
Teachers can implement BP		1		1	2
Totals	34	69	40	59	

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