THE DIRECTOR'S MENTORING PROJECT: AN ANALYSIS OF THE

EXPERIENCES OF MENTORS AND PROTÉGÉS

AND THE IMPACT OF MENTORING ON SELECTED CHILD CARE

CENTERS

IN SAN ANTONIO, TEXAS

A Dissertation

by

CATHLEEN F. CASTILLO

Submitted to the Office of Graduate Studies of
Texas A&M University
in partial fulfillment of the requirements
for the degree of

DOCTOR OF PHILOSOPHY

May 2004

Major Subject: Educational Human Resource Development

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Approved as to style and content by:

_____
Don F. Seaman
(Co-Chair of Committee)

_____
M. Carolyn Clark
(Co-Chair of Committee)

_____
Barbara Kay Erwin
(Member)

_____
Kim Dooley
(Member)

_____
Yvonna S. Lincoln
(Head of Department)

May 2004

Major Subject: Educational Human Resource Development

ABSTRACT

The Director's Mentoring Project:

An Analysis of the Experiences of Mentors and Protégés and the Impact of Mentoring

on Selected Child Care Centers in San Antonio, Texas. (May 2004)

Cathleen F. Castillo, B.A., Drake University;

M.A., The University of Texas at San Antonio

Co-Chairs of Advisory Committee: Dr. M. Carolyn Clark
                                      Dr. Don F. Seaman

The researcher examined the experiences of three directors of child care centers that had been accredited by the National Association for the Education of Young Children (NAEYC) and six directors of child care centers that had not yet reached accreditation status. The nature and meaning of these experiences was explored through interviews with each of the directors individually, and then with each mentor and her two protégés. The purpose of this study was to understand how a mentoring program promotes change in child care programs and how that change impacts the quality of care, if, in fact, it does. Using the constant comparative method, three major findings emerged.

The first finding was the critical issue of identifying, screening, and selecting protégés to participate in the Director's Mentoring Project (DMP). Factors that result in protégés remaining in the program include self-selection, having previously met or heard of the mentors themselves, awareness of accreditation standards and procedures, and knowledge of and concern about quality care for young children.

The second and third findings were intertwined. They had to do with the models of mentoring used and the nature of the relationship between the mentors and protégés.

The mentors and the protégés utilized a model of mentoring that was based on their understanding that the primary goal of the DMP was to either gain NAEYC-accreditation status for the center itself *or* to provide professional and personal support to the protégé directors. While all the mentors began the program with accreditation as their primary goal, those who developed a close and empathic relationship with their protégés came to believe that support of the directors was primary. The former utilized a more goal-oriented model of mentoring; the latter utilized a more affective model of mentoring.

The nature of the mentor-protégé relationship formed a continuum from instrumental to personal and developmental. Where the mentors and protégées fell on the continuum paralleled their understanding of the purpose of the project and the model of mentoring that was adopted.

DEDICATION

To my mother, Margaret Elizabeth Quigley McAuliffe, whose life was ended far too early by Alzheimer's disease. Mom started her bachelor's degree at the University of Minnesota before she was twenty, finished it at George Washington University while in her forties, and then earned a master's degree from the University of Chicago while in her fifties. She was a teacher in a one-room school house in rural Minnesota, an elementary school teacher in Virginia and Michigan, a Head Start teacher and director, a high school teacher, and a community college instructor. I guess it would be an understatement to call her a "positive role model!" I will always cherish our travels throughout Europe and the United States. I miss her daily.

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CHAPTER I

INTRODUCTION

Quality child care is a national issue. During most of the 20th century, the traditional definition of family prevailed; a family consisted of a mother, a father, and children. One parent would go off to work and one parent would stay home to take care of the children. As a society, we have fairly successfully adjusted our definition of "family" to include single parents, same-sex partners, and even grandchildren living with grandparents. We still struggle, however, with issues related to caring for young children, especially outside of the home. Our national ambivalence about child care has had negative consequences for many children who, after all, cannot speak for themselves and fight for their right to be cared for in a manner that ensures that they can develop to their optimal potential.

Federal policymakers acknowledge that quality child care makes a difference in how children grow and develop (Government Accounting Office [GAO] Report, 1998; GAO Report, 1999; GAO Report, 2002). What the federal government has declined to do, however, is to establish federal guidelines that ensure quality care for all young children. Instead, the states have been given wide leeway to set up minimum standards that regulate child care, and the result is that there is wide variation from state to state. This wide variation has dramatic implications because of the large numbers of children in care today. Schilder, Kiron, and Elliott (2003) report that in the United States, more than 13 million children are presently cared for by someone other than their mother (this includes mothers who do not work).

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This dissertation follows the style and format of *Early Childhood Research Quarterly*.

Children of working parents are typically in day care between nine and ten hours a day, five days a week.

It is crucial that the director of a child care center have education and training in child development, that she knows what quality child care looks like, and that she is committed to providing quality care to children in her program. *Accreditation Criteria and Procedures 1998 Edition* cites Bloom (1996), stating "research indicates that the skills and leadership of the program administrator directly affect the quality of program provided for child and families" (p. 38).

The first day nurseries were established in the nineteenth century for children whose mothers were forced to work (Rose, 1999; Steinfels, 1973). During the 1920s, the day nurseries began to suffer from the perception that the way to help poor mothers was to help them stay at home with their children, not to help them work outside the home. Because there was a need for such services, however, many of them remained open. At the same time that the day nurseries were falling out of favor, *nursery schools* were beginning to emerge. The target population for the nursery schools was middle and upper class families. Thus began the two-tier system of child care that we are dealing with today: education for some children and regimented warehousing for other children.

Poverty has an enormous negative impact on the development of young children. Watson (2000) cites Dr. Hurt (1999) who studied the impact of prenatal cocaine exposure on young children's brains. Dr. Hurt argues that the ability of a young child's brain to focus, organize, and problem-solve is impeded by poverty because books, newspapers, communal family meals, and travel are often absent or uncommon in lower income households. One of the ways that we can expose children from low-income families to

these missing experiences is through quality child care experiences. Note that the term "quality" is crucial here. According to Adams and Schulman (1998), while high quality child care enhances children's language, social, and emotional development, "children in *poor* [italics in original] quality child care are delayed in language and reading skills, and display more aggression toward other children and adults" (p. 5).

Licensed child care centers in Texas must meet the Minimum Standards established by the Texas Department of Protective and Regulatory Services. These Minimum Standards are intended to protect the health and safety of children who are in child care. Unfortunately for children in the state of Texas, this state's standards are *minimal* standards. According to Adams and Schulman (1998), in 1997, Texas met recommended child-staff ratios for only two of six age groups. In fact, they state, "Texas allows more children per adult than most other states, making it extremely difficult for providers to give children the one-on-one attention they need to be safe and thrive" (p. 6).

In Texas, the minimum standard for training of child care providers is eight hours of pre-service training, and a person qualifies to be a director if she has only a Child Development Associate credential (120 clock hours of early childhood training) with six college credit hours in business management and two years experience in a licensed child-care facility. In most other states the standards are much higher. For example, California differentiates between a "site supervisor" and a "program director." The site supervisor must have a two-year college degree or 60 college credits of which 24 must be in child development; a program director must have a B.A. degree that includes 24 hours of child development. Illinois has a three-tier system for directors of child care centers:

Level I requires an associate's degree, Level II requires a bachelor's degree, and Level III requires an advanced degree.

In order to provide quality care for young children, the National Association for the Education of Young Children (NAEYC) offers an accreditation program that focuses on staff qualifications, staff-child interactions, relationships with families, and curriculum and activities. The rationale for requiring high staff qualifications is that

the quality of the staff is the most important determinant of the quality of an early childhood program. Research has found that teachers' level of formal education and professional preparation in child development and and/or early childhood education is related to positive outcomes for children such as increased social interaction with adults, development of prosocial behaviors, and improved language and cognitive development (*Accreditation Criteria and Procedures 1998 Edition*, p. 35).

NAEYC recommends that a director of a child care center have a baccalaureate degree in early childhood education/child development and three years of full-time teaching experience. In the near future, NAEYC is expected to recommend that lead teachers who are responsible for groups of children age three and above hold a minimum of a baccalaureate degree with emphasis on child development and early childhood education. This is based on the National Research Council report, "Eager to Learn" (2001).

Problem Statement

In 1999, only 30 centers in San Antonio were NAEYC-accredited. At that time, there were approximately 600 licensed day care centers in the San Antonio area. Of the 30 accredited centers, only five (fewer than 20%) were located in high-poverty areas. The rest were located in affluent neighborhoods. Today, there are over 700 licensed child care centers in San Antonio, and 29 are accredited; this is an actual loss of four centers

from the list of accredited centers. Three of the currently accredited centers participated in the DMP, and they are located in high-poverty areas, bringing the percentage of accredited centers in low-income areas up to 28%. It is important to point out, however, that fewer than 5% of local licensed child care centers are accredited.

What the very low number of accredited centers translates into in San Antonio is that Anglo middle- and upper-class children are more likely to receive quality care in child care settings, while Hispanic and African-American low-income children are almost assured of receiving less than quality care in child care settings. Two of the 29 accredited centers are Head Start centers. While there is a large number of Head Start centers in San Antonio, and the Head Start Performance Standards are considered quality standards, the consistent and thorough application of those standards is not seen throughout the city.

In 1999, San Antonio District 10 Councilman, David Carpenter, and the City of San Antonio Department of Community Initiatives funded the Director's Mentoring Project (DMP). The goal of this project was to increase the number of child care centers in San Antonio that provide quality care for young children through the establishment of a mentoring relationship between a director of a nationally accredited child care center and the directors of centers that were merely meeting minimum standards established by the state of Texas.

The bulk of literature on mentoring focuses on mentoring individuals to further their own personal or career goals. It is only in the field of public school education that one finds a significant body of literature that focuses on the use of mentoring to promote institutional change. In fact, almost all the literature that exists focuses on mentoring in public school education, in higher education, in nursing, or in the corporate world. We

do not know what impact mentoring has on promoting institutional change in the field of child care.

The Purpose of the Study

The researcher examined the experiences of directors of child care centers who were either mentors or protégés in a local project called the Director's Mentoring Project (DMP). The purpose of this study was to understand how mentoring is used in the DMP to promote change in child care programs.

Significance of the Study

The significance of this study is relevant for communities that are struggling with child care issues, especially how to improve the quality of child care for all children. The results of this study can enrich our understanding of the theory of mentoring by adding information about a heretofore neglected group of professionals. In addition, the results of this study can guide communities as they initiate similar comprehensive mentoring programs in their local child care industry. When our youngest citizens do not develop to their potential, there is a huge impact on society.

Definitions

For the purpose of this study, the following terms were used:

Mentor: "A person who guides another – or protégé – in becoming the best that he or she can be personally and professional, sometimes in multiple settings and for an extended period of time" (Dingman, 2002).

Protégé: A person of less experience who works with a mentor in order to develop professionally and personally.

Accredited Centers: Child care centers that have been accredited by the National Academy of Early Childhood Programs (the accreditation department of the National Association for the Education of Young Children)

Child Care Delivery System (CCDS): The system through which Texas Workforce Commission funnels dollars into community child care programs.

Rising Star Provider Certification: Program/process for improving quality of child care in Texas. The program is managed by CCDS. The standards exceed state minimum standards, but are below NAEYC accreditation standards in most instances.

Child Development Associate (CDA) Credential: Entry level credential; it includes 120 clock hours of training in ten specific areas. The training may be non-credit, CEU credit, or college credit, depending on where the training is provided and by whom.

Director's Mentoring Project: Mentoring project originally funded by the City of San Antonio; its purpose is to pair directors of accredited centers with directors of non-accredited centers with the goal of increasing the number of accredited centers in San Antonio, thus increasing the number of quality child care facilities.

Assumptions

My approach to this study was influenced by my own experience in the field of child care. I also believe that my experiences in the child care community in San Antonio assisted me in relating to and understanding my participants' experiences. I assumed that my participants would be able to articulate their experiences and the meaning they have made of participating in the Director's Mentoring Project.

CHAPTER II

REVIEW OF THE LITERATURE

Introduction

In this chapter, I review three areas of literature that are important to this study: mentoring, the history of early care and education in the United States, and the effects of high quality versus low quality child care and early childhood education. The review of mentoring and mentoring programs reveals that heretofore, there has been very little research conducted on mentoring in the child care industry. Research articles on mentoring tend to focus on the corporate world or on professionals in public schools, nursing, and higher education. The review of the history of early care and education helps us to understand how early competing views of day care and of motherhood created the day care dilemmas we currently face. The review of literature on quality of early experiences – whether in child care or in school settings – and the impact of quality on children's development supports the need for communities to look at ways to provide quality child care and thus supports the significance of this study.

Mentoring

Phillips-Jones (1982) describes six roles that mentors play: traditional mentors, supportive bosses, organization sponsors, professional career mentors, patrons, and the "invisible godparent." The mentors in the Director's Mentoring Project (DMP) do not clearly fit into any of these categories. The closest is the professional career mentor, because these mentors are getting a small stipend for the time and effort. However, this is not part of their regular job. They may also possibly fit into the organization sponsors group; they are directors of nationally accredited centers.

Baird (in Caldwell and Carter, 1993) sees the role of mentor as "Helper + Sharer + Carer" (p. 55). He discusses both the cognitive and the affective aspects of mentoring; the cognitive aspects include advising and guiding, and the affective aspects include caring and sharing.

> As such, typical mentor behaviors should best be described dualistically – a caring listener, a critical friend, a concerned adviser. As a caring listener, for instance, you hear more than they say – you are attuned to the subtle, personal communications that provide information necessary to inform your response and strengthen the value of the relationship to them. Important affective aspects of the role involve respect, sensitivity, perceptiveness, care, concern, encouragement and enthusiasm. (p. 55)

Dingman (2002) uses the term "mentoring connection" to include several peer relationships that she has observed functioning in the nursing profession; these include "role models, preceptors, coaches and mentors" (p. 10). All of these are present in the mentoring relationships in the DMP.

Most of the literature on mentoring deals with mentoring in the *public school system* (Calder, 2002; Dantonio, 1995; Teacher mentoring ,1986; Feiman-Nemser, 1996; Hall, 1982; Huling & Resta, 2001; Krupp, 1985; Meyer, 2002; Creating a teacher mentoring program, 1999; Portner, 1998, 2001, 2002), *nursing* (*Creative Nursing*, 2002; Dingman, 2002), or in *business and industry* (Caldwell & Carter, 1993; Collins, 1983; Khirallah, 2002; Waters et al., 2002). Although there are a few books about mentoring in the field of child care, there appears to be almost no *research* looking at methods for or effects of mentoring child care center directors. Dr. Lois Kerschen, Senior Research Scientist, Division of Developmental Pediatrics, Medical School, University of Texas-Houston Health Science Center (personal communication, March 3, 2003), confirmed the dearth of the kind of research for which I was looking. She informed me that when she contacted a

member of a national mentoring group inquiring about similar research, she was told that none of his colleagues were aware of any such research. The small amount of research related to mentoring in the field of child care focuses on the teacher rather than the director. Therefore, as I refer to the body of literature on mentoring, I will extrapolate to the area of mentoring directors of child care centers.

In 1982, Hall wrote about induction of new teachers; this is the first three years of teaching after graduation. His ideas about developing a continuum of professional development have great implications for the expansion of the DMP. He pointed out at the time that he was writing that there was almost no research that focused on strategies that could help beginning teachers be successful and therefore stay in the field. This is certainly true of child care center directors today.

Caldwell and Carter (1993) state in the preface to their book that they found that there was a "rich theoretical literature on the concept of mentoring" (p. i), but that there was an absence of literature about best practices across different settings.

After describing the history of mentoring and listing several definitions, Carruthers (in Caldwell and Carter, 1993) states that no matter what, there are basically two categories into which most mentor relationships fall:

1. those which emphasise (sic) the professional development of the protégé only;
2. those which emphasise (sic) professional and personal development of the protégé (p. 11).

The original purpose of the DMP was to increase access to quality care for all children in the San Antonio area, not just to help directors grow and develop personally and professionally. In other words, the DMP hoped to impact the child care industry.

Portner (2002) admonishes new teachers that "years of experience alone are not enough" (p. 2) to develop highly skilled and successful teachers. He points out that one of the reasons teachers drop out of the field or become less than stellar teachers is that traditionally there has been a lack of support when they first enter the field. The same can be said of directors of child care centers. Just being a center director for a long period of time does not make one a good director, and there is a lack of support for new center directors. The situation for public school teachers is changing. According to Portner (2002), "both the National Education Association and the America Federation of Teachers, the nation's largest teachers' unions, are in accord in their encouragement of the establishment of program under which all beginning teachers would be assigned a mentor" (p. 3).

Portner (1998) cites a 1997 report published by the U.S. Department of Education's National Center for Education Statistics titled *Teacher Professionalization and Teacher Commitment: A Multilevel Analysis* that found "that having a mentor program to assist beginning teachers is less important for improving teacher performance and commitment than the quality of that assistance" (p. 4). Portner recommends that the way to achieve a quality mentoring program is to give seasoned classroom teachers the opportunity to be mentors to new teachers. He points out, however, that years of experience as a classroom teacher does not automatically mean that person will be a successful mentor. He acknowledges that many school districts and other educational organizations are implementing training programs for mentors. However, he believes that one of the key elements to successful mentoring has been overlooked, and that is the "purpose and function of the mentor's role in relation to that of supervisor, curriculum coordinator, and

department head" (p 5). He states very clearly that the role of the mentor is not to evaluate. The role of the mentor is to relate, assess, coach, and guide. The DMP presently includes some training for the mentor, but this training could be improved through the use of training manuals, such as Portner's.

In *Training Mentors Is Not Enough*, Portner (2001) explores issues beyond training issues. He claims that there are four components that must be included for a mentor program to be more than just adequate. Portner states that the program must:

1. Be tailored to local culture and beliefs,

2. have buy-in (commitment) from all stakeholders in the community,

3. have a formal structure for collaboration and decision-making, and

4. have access to ongoing support and resources (p. 2).

Portner (2001) also states, "Mentoring operates best within a program. A mentoring program operates best within a system" (p. 3). I would describe the DMP as a mentoring program, in that it was a stand alone project. It was not part of a system, such as a non-profit community agency, a community college, or a university.

The four components of a mentoring system, according to Portner, are:

1. A broad-based commitment and participation from key individuals and groups
2. A compatible relationship with the macrosystem within which the mentoring program operates
3. A viable structure – consistent with local mores – for problem solving, decision making, implementation, and program assessment
4. A comprehensive and accessible body of resources (p. 9).

Portner believes that there are three criteria or factors necessary for commitment to be present -- these are beliefs, expectations, and rewards.

After studying novice teachers' participation in a learning community, Meyer (2002) describes some of the drawbacks to mentoring as a form of induction for that population.

He cites the high rate attrition of new teachers, and there is a similar problem of turnover of directors in child care centers.

Carruthers (in Caldwell and Carter, 1993) discusses matching protégés and mentors. He cites Dodgson's identification of three ways that this usually happens: the protégé initiates the relationship, the mentor initiates the relationship, or the relationship is established by serendipity. Carruthers, however, simplifies the identification by saying it is either formal (from a higher authority) or informal (initiated by either the mentor or the protégé). Furthermore, the most effective mentoring relationships are those in which the mentor and the protégé choose each other freely. Pavia, Nissen, Hawkins, Monroe, and Filimon-Demyen (2003) found that when pairing mentors and protégées was prearranged, "personal responsibilities, philosophies, personalities, and life stages often contributed to incompatibility" (p. 254). In the project under study, the Project Manager does the pairing. Interestingly, it turns out that, some previous relationships already existed between some mentors and their protégées.

Luckner and Nadler (1997) in Portner (2002) state their belief that for a mentoring relationship to be successful, the individuals involved must develop a rapport throughout their relationship, and the key to establishing rapport is to "make others feel accepted, supported, and comfortable (p. 6 in Portner, pp 76 – 77 in Luckner & Nadler). Pavia et al. (2003) reported that the use of the term "protégé" appeared to inhibit the development of rapport in the program she studied.

Portner (2002) and Pavia et al. (2003) address the issue of similarities and differences between mentor and protégé, including age, ethnicity, gender, and years of experience. For child care providers, these also include differences in the type, locale, and clientele of

the child care centers. Portner (2002) stresses the need for mutual respect in the mentoring relationship; that is, "the willingness to understand and honor differences" (p. 11).

Portner (2002) recommends the use of an assessment tool, such as his Assessment of Knowledge and Confidence (p. 35). He suggests that the protégé first rate himself or herself and then the mentor rate the protégé. No such assessment tool was used by either protégés or mentors in the DMP.

Walker and Stott (in Caldwell & Carter, 1993) describe five stages in the mentor/protégé relationship: formal, cautious, sharing, open, and beyond. Carruther (in Caldwell & Carter, 1993), ends his chapter with a list of potential difficulties that might need to be addressed when establishing a mentoring project. Although the DMP has been in place for three years now, those who wish to duplicate the program may want to explore this list as well as use the findings from this study.

At each step of the DMP, protégés are required to develop an action plan for completion of that stage. Robby Champion (2001) in Portner (2002) states that the action plan can be much more than just a checklist to make sure tasks are accomplished. It can serve as a tool for reflection and real growth as the protégé discovers what he or she does not know, sets priorities, finds resources, and decides how to carry out the action plan.

Turner (2000) studied the use of mentoring in child and family social work. The program she studied is sponsored by the Central Council for Education and Training of Social Workers in Great Britain. Her findings suggest that although there are problems such as "conflict of interest, lack of objectivity and inadequate preparation and training," these difficulties do not outweigh the potential benefits of the mentoring program (p.

231). She concludes that such a mentoring project "has the potential to create work-place cultures of a more developmental and professional nature" (p. 321). The purpose of that mentoring program is to provide support to individuals who are preparing to be assessed in order to receive their post-qualifying social work credentials. This is similar to the DMP in that mentors are supporting individuals who are preparing their child care centers to be assessed for NAEYC-accreditation. Another similarity is that both social work and child care are high stress jobs. As Turner points out, not addressing the support needs of those in high stress jobs can have serious consequences not only for those individuals, but for those who depend on the quality of the services (p. 238). Of course, one of the differences (and it is a large difference) is that NAEYC-accreditation examines all the staff in a child care center, as well as families who use the services of that center. It is a much more complex situation.

The protégé is not the only one who benefits from the mentoring relationship in the field of education. Huling and Resta (2001) describe some of the ways that the mentor also benefits. First, many mentors find that their professional competence is enhanced, sometimes from specific feedback from their protégés. Second, being a mentor usually results in self-reflection, which can help one evaluate one's own practices as well as lead to a feeling of renewal. Third, mentors report psychological benefits, such as heightened self-esteem, and their ongoing relationship with protégés reinforces collaborative skills. Fourth, being a mentor contributes to development of leadership skills, which can have far-reaching implications beyond the mentoring arena. Finally, when mentors are part of research projects, they report increased critical examination of their own practices.

The idea of a reciprocal mentor-protégé relationship (Pavia et al., 2003) has intriguing implications. A mentor-protégé relationship in which both mentor and protégé grow and develop can benefit children in care in the mentor's child care center as well as those in the protégé's center.

History of Early Care in the United States

In order to have a better understanding of the context in which this study was conducted, it is important that the history of day care in the United States be explored. Rose (1999) takes us from the nineteenth century when day nurseries were established up to the present time. Although she situates her study in the city of Philadelphia, the day care movement she describes is a national one.

During the nineteenth century, the traditional view of labor within the family was prevalent in the United States. This view consisted of the husband/father as breadwinner and the wife/mother as the keeper of the house and children. Poverty and widowhood, however, forced some women to seek employment outside of the home. Day nurseries were set up by "privileged" women out of pity for children who were playing in the streets while their mothers worked to take care of them (Rose, 1999; Steinfels, 1973). The purpose of these day nurseries was to provide "mothering" to the children while their real mother was away at work. A secondary purpose of these day nurseries was to eventually transform those families into middle class families. In middle class families, of course, mothers stayed home and took care of their children.

Although these early day nurseries were established for women who did not have a man to provide for their families, from 1890 to 1920 the rate of married women who worked for wages nearly doubled (Rose, 1999). However, the "rates of women's

employment, and the types of work in which women engaged, varied with ethnicity, race, and neighborhood" (Rose, 1999, p. 15). Interestingly, these day nurseries did not become popular with many working mothers, who were offended by the judgmental attitude of the managers. Also, the day nurseries were very regimented and not home-like, the way they were supposed to be. The need for regimentation, no doubt, sprung out of the high ratio of children to adults (Steinfels, 1973). The emphasis was on cleanliness and safety, not on mental or social stimulation. "The moral order of the day nursery was well grounded in a secure foundation of soapsuds" (Steinfels, 1973, p. 45). According to Rose (1999), only the mothers who had no where else to turn really appreciated the services. These mothers, however, had no say so about how the children were treated or handled. Mothers who had their children in day nurseries were perceived as needing advice about how to maintain a house and how to mother their children. The social workers who gave advice on these issues were sure their ideas were correct, and any ideas that the mother might have (based on her culture or her own childhood) were pushed aside.

In 1909, during the Anderson House Conference on the Care of Dependent Children, President Theodore Roosevelt stated his belief that the home was "the highest and finest product of civilization" (cited in Rose, 1999) and vowed to help keep poor women at home with their children. As a result, during the 1920s, the day nurseries began to suffer from the perception that the way to help poor mothers was to help them stay at home with their children, not to help them work outside the home. The professional social workers were committed to the idea of returning poor families to "normalcy," with a father working and a mother at home.

Some of the arguments against day nurseries included the fear that they hurt rather than helped family structure; that it gave fathers an "out" from their paternal responsibilities; and that mothers were giving up their responsibility for raising their own children and were, in fact, becoming lazy. Ironically, it was also argued that day nurseries encouraged women to work for wages (Steinfels, 1973), which could hardly be interpreted as being lazy.

At the same time that the day nurseries were falling out of favor, *nursery schools* were beginning to emerge. They were created to benefit children, not their mothers. And the target population for the nursery schools was middle and upper class families, not low-income families. Since nursery schools had a more "educational" focus, infants and toddlers were excluded from participating (Steinfels, 1973). And so the two-tier system got its start: education for some children and regimented warehousing for other children. An assumption common across both of these programs, though, was the idea that mothers did not know enough to raise their children well. What was ironic was that middle class mothers were seen as providing too much mothering and not allowing their children to be independent, while poor mothers were seen as not being maternal enough and providing too much independence for their young children (Rose, 1999).

During the depression, when many men were unable to find employment, the idea that women could and should work became somewhat normalized. At the same time, the idea that government should support families was translated into the development of public nursery schools throughout the country. This was not intended to be a permanent situation, but it affected the attitudes of Americans far beyond the 1930s and into the 1940s (World War II) and 1950s (post WWII). Because the image of the working father

had been such a part of a man's identity, relationships between men and women were affected by women working outside the home in larger and larger numbers. Again, issues of ethnicity and race were subtlety mixed into the debate.

World War II was a real turning point, because women were needed to work in factories while men were away at war. There was still an ongoing debate about women working outside of the home, but there was a significant shift in attitudes at this time. The debate centered around the question of whether mothering was a civic duty and so mothers who stayed home were serving their country or whether working in the factories was a civic duty and so mothers who placed their child in child care while working were serving their country. Rose (1999) states that the idea of "republican motherhood" was revised, which was a concept invented after the American Revolution that was designed to define women's role in the U.S. The idea was that women served their country by serving their husbands and children; their civic duty was to raise children (especially boys) who would be good citizens. There was no consideration for other avenues women might take; becoming a wife and mother was assumed as the path every woman would and should take.

While the debate continued, women pretty much decided that women could handle both work and raising a family. Imagine how differently the history of child care would have looked if at the time this debate was raging, fifty percent of legislatures at all levels had been women! That wasn't the case, though, so the government still pushed for women staying at home as full-time mothers and homemakers. Arnold Gesell (an early child development specialist), J. Edgar Hoover, and President Franklin Roosevelt all spoke out on this issue. First lady Eleanor Roosevelt, however, had spoken out for the

creation of child care centers earlier, and she maintained this stance when others were saying it was time for women to return to the home (Stencel, 1998). Women themselves began to see their working for wages as not a temporary situation during the depression or during wartime, but as a valuable way for them to contribute to their family's welfare. By the end of World War II, the federal government had spent almost fifty million dollars on child care, and over a million children were in day care; industries, also, were running day care centers for their women employees (Steinfels, 1973).

With the war over, the government sponsored day care centers were closed down. It was assumed that life would go back to "normal;" men would go to work and women would stay home and be full-time homemakers and mothers. But "normal" was being re-defined. Not only did women continue to work outside the home for wages (Steinfels, 1973), but the idea of women having the *right* to day care began to be expressed by women themselves (Rose, 1999). The 1950 census showed that there were two million children between the ages of birth and six years whose mothers were working for wages (Stencel, 1998). In 1954 President Eisenhower's proposal to make child care expenses tax deductible was approved by Congress. Throughout the mid and late 1950s the idea of day care as educational rather than as welfare really took hold.

In 1960, a national conference on day care was held in Washington, D.C. This was the first conference of its kind to be held during peacetime rather than wartime (Rose, 1999). This conference was organized by the Children's Bureau and the Women's Bureau at the urging of a new group, the National Committee for the Day Care of Children. As part of President Johnson's war on poverty, Head Start was created in

1965; the purpose of this program was to help poor children be better prepared to succeed once they entered the public school systems (Stencel, 1998).

Although the 1970s were a time when the federal government began to show an increased support for child care (Stencel, 1998), a major setback occurred in 1971, when President Nixon vetoed The Child Development Act. This act contained major federal funding for day care, and it included national standards ensuring high-quality care. Most importantly, the bill contained language indicating that a key goal was to provide child care services to all working families nationwide, regardless of socioeconomic status (Rose, 1999; Stencel, 1998). The bill was passed by both the House and the Senate; however, when Nixon realized that his larger welfare reform proposals would not be passed, he vetoed the Child Development Act. In other words, he saw day care primarily as a way to get welfare mothers working. Women who did not need welfare should stay home and take care of their own children. President Nixon went so far as to equate universal, government-supported child care with communism, stating that such a bill would "Sovietize" American child care (Rose, 1999; Stencel, 1998).

Child Care Today – High Quality vs. Low Quality Care

Thirty years ago -- two years after Nixon vetoed the Child Development Act -- Steinfels (1973) wrote "day care is an idea whose time has come" (p. 1). Although some progress has been made in those thirty years, as a country we are still mired in a debate about whose responsibility it is to provide support so that children can develop to their fullest potential: Is the responsibility of the family alone, no matter what the circumstances? Or is it the responsibility of the government and the family to work together? " 'There is a belief in Europe that quality child care is too expensive, so the

whole society helps. Here in America the argument is that child care is too expensive, and that people should have thought about that before they had kids' " (Faith Wohl, President of Child Care Action Campaign, quoted in Stencel, 1998, p. 413). Indeed, countries such as Denmark, France, and Italy have exemplary early care and education programs as well as extensive paternal and maternal leave for all families (Stencel, 1998).

In the United States, more than 13 million children between the ages of birth and six years are presently cared for by someone other than their mother; this figure includes mothers who do not work (Schilder et al., 2003; Stencel, 1998). Children of working parents are typically in day care between nine and ten hours per day, five days a week. The Cost, Quality and Child Care Outcomes Study Team (1995) reported that "child care at most centers in the United States is poor to mediocre, with almost half of the infants and toddlers in rooms at less than minimal quality" (p. 319). Additionally, "in the absence of universal public day care, day care programs have continued to be stratified by class" (Rose, 1999, p. 216).

In 1996, Congress passed the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), which requires that mothers who receive welfare must work outside the home. This rapid influx of low-income mothers into the workforce has meant that more low-income children are in need of child care. Brady-Smith, Brooks-Gunn, Waldfogel, and Fauth (2001) investigated the impact that the PRWORA has had and is having on the lives of young children. Because of the low minimum standards set forth by the state of Texas, we cannot assume that the children of low-income working women are receiving quality care. According to Burchinal, Campbell, Bryant, Wasiki, and Ramey (1997); NICHD ECCR (1996, 1997, 1998); and Vandell and Corasaniti

(1988), the quality of care that a child receives is associated with certain outcomes, even when controlling for maternal, family and child characteristics. The higher the quality of care, the more positive the outcomes in areas such as math and language skill development, positive relationships with peers, and fewer behavior problems (Helburn, 1995; NICHD ECCR, 1997, 2000).

Peisner-Feinberg, Burchinal, Clifford, Culkin, Howes, and Kagan (2001) found that the quality of early care has long-term effects in both cognitive and social-emotional development through kindergarten and, in some cases, through second grade. These authors state that "the quality of children's preschool experiences is an important predictor of their readiness for school. Children who experienced higher quality preschool child-care settings demonstrated better skills in their first year of school" (p. 1550). As with former studies, the effects were more pronounced for children whose mothers had little formal education. Because of the dearth of high quality child care opportunities for children of low-income working mothers, "the effect of employment on family income and maternal well-being may contribute to detrimental child health, cognitive, and behavioral outcomes" (Brady-Smith et. al. 2001, p. 421). Stencel (2003) reports that "several studies say U.S. child care is so poor it threatens children's health and development" (p. 409). These findings are not accepted by conservatives, and there is continued resistance on their part for federal funding of child care and the establishment of federal standards for quality child care.

The cost of quality child care is high, even when subsidized by entities such as a church, a community organization, or a college or university. "Child care is a major expense, costing up to $10,000 a year per child, or more than the cost of tuition at many

public universities. About half of all American families with young children earn less than $35,000 a year. A family with both parents working full time at minimum wage earns only $21,400 a year" (Stencel, 1998, p. 410).

Han and Waldfogel (2001) determined that "child care costs have a strong negative effect on the probability that a mother works and … these affects are larger for single mothers than for married mothers" (p. 566). This means that single mothers who are forced out of welfare and who will most likely be forced to work for low wages will be unable to afford quality care. These children will be in low-quality day care, which will have a negative impact on their well-being, both present and future. Welfare reform, therefore, should include provisions for lowering the cost of quality child care across the nation. "If universal child care is not available, we will not be able to move dependent people off welfare" (Bergman quoted in Stencel, 1998, p. 417).

In 1998, a Government Accounting Office Report looked at how states were addressing this issue, usually combining local dollars with federal dollars from four child care subsidy programs. Efforts had been made to make it less unwieldy for poor families to access these programs. Texas was one of the states included in this study, and although we had been successful in creating one child care program using funds from these multiple streams, in 1997 there were almost 40,000 children on the waiting list for subsidized care. This report concludes that "the effect of welfare reform on states' efforts to regulate and ensure that children receive quality child care is as yet unknown…Some child care advocates and researchers are also concerned that decisions to expand the supply of state-subsidized child care could create more providers that are exempt from

state licensing or regulatory requirement, leaving no protection in place for children in these settings" (Paragraphs 46 and 47).

Another Government Accounting Office Report (1999b) reported on child care programs and services that were available to low-income families. The three major barriers to quality child care for low-income families were identified as cost of care, availability of quality care, and accessibility to quality care. This report reiterates that research indicates that a developmentally appropriate program is beneficial for young children. Unfortunately, many states – Texas included – have implemented high stakes testing. Because knowledge of developmentally appropriate practices is still not fully understood or used as a knowledge base for decisions about early education, this has resulted in child care centers being pressured into getting children ready for school in inappropriate ways, instead of supporting early stages of growth and development.

Interestingly, one very large group of child care centers is immune from this pressure; they are, in fact, mandated to provide quality, developmentally appropriate child care and to be NAEYC-accredited, which means they have met high standards for staff qualifications, staff-child interactions, relationships with families, and curriculum and activities. These are the child care centers world-wide that are operated by the Department of Defense; they provide child care for the children of men and women serving in the Air Force. (Eighty-nine percent of *all* military child care centers are NAEYC-accredited; only the Air Force requires that 100% be accredited.) A 1999(a) Government Accounting Office Report compared the cost of running these child care centers with the cost of running a civilian child care center. The findings indicated that the cost of quality care was slightly higher for the DOD centers, mainly because there

were more *very* young children in care (accreditation criteria calls for lower child-staff ratios and smaller group sizes).

The main difference between centers that provide quality care and those that provide mediocre care is that the quality care centers devote a much higher percentage of their budget to teacher salaries. They are able to do this because they are so heavily subsidized by the DOD.

A 2002 GAO Report looked at ways states had addressed the issue of improving quality of child care. They found that over half of the states reported that they had provided incentives for providers to become accredited or to move beyond minimum standards. Texas, through the Child Care Delivery System (CCDS), has the Rising Star program, which does move centers closer to NAEYC-accreditation standards. Although the quality is improved in those centers that participate, it is still not what research indicates children need in the early years (National Research Council, 2000).

Snow, Burns, and Griffin (1998) argue that children who have not mastered certain pre-literacy skills before they enter kindergarten are "at risk" of reading difficulties and other academic problems later in life. This broad-based review of the literature on teaching children ages two to five found that children need not only to have more books, but caregivers who know how to help them enjoy those books. Snow and her colleagues determined that it often takes some training for adults to recognize a child's skills and to know how to approach the child appropriately. When caregivers use literacy strategies, such as starting conversations that require a child to respond and expand on ideas, children develop more complicated language and thinking skills. Knowledge of word meanings, an understanding that print conveys meaning, phonological awareness, and

some understanding that printed letters code the sounds of language all contribute to reading readiness, and these skills can be enhanced by reading to children and encouraging activities that direct attention to the sound structure of words (such as rhyming games).

In general, children should be exposed to a rich language and literacy environment. Snow et al. (1998) concluded that far too many preschools, as well as other settings in which children are cared for in groups, are environments that do not provide the kind of rich language and literacy that young children need. According to Vandell (2000), adults' participation in language-rich activities with children is a crucial factor in children's literacy attainment, and that effect is cumulative and significant.

As mentioned in Chapter I, the purpose of this study was to understand how mentoring promotes change in child care programs and how that change results in better quality care. Holloway, Kagan, Fuller, Tsou, and Carroll (2001) point out that legislators at the local, state, and federal level want proof that spending tax dollars on child care is a good investment. We know today that there is a difference in outcomes when children are in poor care and when they are in quality care (Brady-Smith et al., 2001; Helburn, 1995; NICHD ECCREN, 1997, 2000; Peisner-Feinberg et al., 2001; Stencel, 2003). Holloway et al. (2001) also point out that most studies indicate that the nature of the interactions between child care center staff and children in their care is the best predictor of quality. Most researchers have relied on direct observation of these interactions to determine the level of quality. Holloway et al. took a different approach and conducted a study to see if information obtained through telephone interviews might provide the same information at a much lower cost. In the discussion of their study, they point out that

teacher education, avoidance of whole group activities, avoidance of worksheets, and availability of sand and water play were predictors of quality as confirmed by the use of the Early Childhood Environment Rating Scale (Harms & Clifford, 1980). This scale measures quality based on seven environmental dimensions: personal care, furnishings/display, language/reasoning activities, creative activities, fine/gross motor activities, social development, and adult facilities/opportunities.

Holloway et al. (2001) do, in fact, conclude that "a telephone interview of providers can be an efficacious way to obtain a global sense of the quality of a particular setting" (p. 186). Because criteria for becoming accredited through NAEYC includes higher teacher education, avoiding worksheets, avoiding whole group activities, and including many appropriate activities and materials, including sand and water play, it makes sense that as the number of accredited centers in a community rises, the number of children receiving quality care will rise as well.

McDonnell, Brownell, and Wolery (1997) conducted a survey to assess how well teachers in NAEYC-accredited centers were prepared to work with children with special needs. They refer to the 1993 position statement by the Division for Early Childhood of the Council for Exceptional Children that states that young children with special needs should be included in a variety of "natural" early childhood settings, including family day homes and child care centers. The results of their survey indicate that children with special needs are enrolling in NAEYC-accredited centers, but that those centers can accommodate only a very few such children. This points to the need for more accredited centers so that there are more quality child care slots for children with special needs.

Although Calder (2002) writes about school principals, many of his ideas could just as easily be applied to child care center directors. For example, he writes about the difference between leadership and management. It takes good management skills to run a center that meets minimum standards, and it takes good management skills to maintain accreditation standards once they have been achieved. But to lead a staff through the accreditation process takes leadership skills. Calder questions whether or not leadership can even be taught, but he does state his belief that it can be nurtured. The DMP is about nurturing those leadership skills needed as center staff work towards accreditation status.

Currently, there is a trend for school districts to offer programs for younger and younger children. In San Antonio, children as young as three years of age may be enrolled in pre-kindergarten programs in their local school district. The National Association for the Education of Young Children (NAEYC) and The National Association of Early Childhood Specialists in State Departments of Education (NAECS/SDE) have issued a joint position statement (2002) in which they affirm that "The first years of life are critical for later outcomes. Young children have an innate desire to learn. That desire can be supported or undermined by early experience" (p 1). The joint statement addresses the issue of learning standards that are being imposed on very young children, and in an effort to differentiate these standards from standards that are appropriate for older children, four essential features are outlined. The first feature is that these standards should emphasize developmentally appropriate, meaningful, and relevant learning content that addresses all domains of development, not only the cognitive (academic) domain. These standards must also be based on current research about how young children learn and develop, and they should not be based on standards

developed for older children. The second feature is that the standards must be developed by the multiple stakeholders, including experts in the field of early childhood, parents of young children, community leaders, etc. These standards must also be reviewed and revised as needed. The third feature is that these standards must be implemented through developmentally appropriate and ethical practices. This includes assessment, which must lead to improved teaching practices, and must not be used to "rank, sort, or penalize young children" (p 3). The fourth feature is that adoption of these standards must be concomitant with support for all programs that provide services to young children, with support for professional development of those working with young children, and with support for families of young children.

Summary

Mentoring is perceived as being an effective way to help individuals meet their goals, both personally and professionally. The literature on mentoring focused on roles that mentors play (Phillips-Jones, 1982), the cognitive and affective aspects of mentoring (Baird in Caldwell & Carter, 1993), and other aspects of the mentor-protégé relationship. Integral to this discussion was the issue of matching mentors and protégés, and the stages of the mentor-protégé relationship. In addition, the literature pointed out the need for mentor training, the value of housing a mentoring program within a larger system, and finally the benefits to the mentor. As I pointed out, the small amount of research related to mentoring in the field of child care tends to focus on the teacher rather than the director.

Whether she knows it or not, a child care director sits in the eye of a political storm that has been raging for decades. A review of the history of early care and education

takes us from the nineteenth century – when the first day nurseries were established – to present day. The purpose of the first day nurseries was twofold: to provide "mothering" to poor children while their mothers were away at work and to eventually transform poor families into middle class families. At the beginning of the twentieth century, government officials made it clear that women, including poor women, should stay home with their children, and so the day nurseries began to fall out of favor. Ironically, at the same time that the day nurseries were falling out of favor, nursery schools for middle and upper class children were beginning to emerge. The experiences that women had during World War II were pivotal in influencing their attitudes towards work outside the home. When the war was over, women were not satisfied to return to the home. Instead, they viewed working for wages as a valuable way to contribute to the welfare of the family. President Lyndon Johnson declared "war on poverty" during the 1960s, and Head Start was proposed, funded, and implemented. Although it appeared that the federal government was beginning to take an interest in child care, a major setback occurred in 1971, when President Nixon vetoed The Child Development Act. We have never recovered from this obstruction to national quality standards.

The literature review of early care and education in the United States today includes information about the large numbers of children in care as well as the quality of that care. Unfortunately, studies have shown that quality care is a rarity and poor to mediocre care is common (The Cost, Quality and Child Care Outcomes Study Team, 1995). This is critical information, because as Vandell and Corasaniti (1988) point out, the quality of care that a child receives is associated with certain outcomes, even when controlling for maternal, family and child characteristics. Because the United States government does

not support women and families in the same manner other countries do, because of the high cost of quality care, and because of welfare reform, single mothers who are forced out of welfare and who will most likely be forced to work for low wages will be unable to afford quality care. These children will be in low-quality day care, which will have a negative impact on their well-being, both present and future.

We know that quality early care and education pays off. There is a large body of research that supports this idea. Unfortunately, this research is not always used as a basis for making decisions about young children, about children and families, about child care, or about early education. This is true on the national level, on the state level, on the local level, and even on the family level. Pruissen (2003) states that parents "spend more time choosing a vehicle or for that matter a pet, then (they) do choosing a quality child care setting" (p.1). Well-meaning parents frequently base their decisions about child care on convenience and cost. Children cannot choose their own child care; whether they receive poor care or quality care is beyond their control. It is up to adults at all levels to ensure that all children have access to quality child care.

CHAPTER III

METHODOLOGY

The purpose of this study was to understand how mentoring was used to promote change in child care programs. The research design selected for the study was qualitative and utilized the case study approach. Qualitative research is characterized by focusing on the participants' perspective or meaning-making, by acknowledging that the researcher is the principal instrument for data collection and analysis, by observing the participants in the field, by building theory rather than testing theory, and by the use of words and pictures rather than numbers to report findings (Merriam, 1998).

According to Merriam (1998), "A qualitative case study is an intensive, holistic, description and analysis of a bounded phenomenon such as a program, an institution, a person, a process, or a social unit" (p. xiii). In this study, the bounded phenomenon was the Director's Mentoring Project (DMP), and because "insights gleaned from case studies can directly influence policy, practice, and future research" (Merriam, 1998, p. 19), this research approach clearly is a good fit with the purpose of the study.

One of the values of qualitative research is that the researcher becomes immersed in the subject of the study, rather than simply looking on from the outside. The result is a fresh perspective and a more critical eye when examining the current literature on the topic, especially when the bulk of that literature was based on quantitative methods.

Another value of qualitative research is that it is a good fit for researching sensitive topics, such as people's attitudes, beliefs, and perceptions. A quantitative approach (such as a survey) simply will not reveal the participants' doubts, questions, and even disagreements that can be crucial pieces of information.

Another value of qualitative research is its ability to reveal multiple realities within the phenomenon which is being studied. Understanding these multiple realities can help the researcher to understand "how all the parts work together to form a whole" (Merriam, 1998, p. 6).

Sample

In 1999, San Antonio District 10 Councilman, David Carpenter, and the City of San Antonio Department of Community Initiatives funded the Director's Mentoring Project (DMP). The Project Manager and founder is Donna Rose Bauer. Although Ms. Bauer's background and education were not in the field of early childhood or child development, she became interested in the issue of quality child care when she was working for the City of San Antonio.

The goal of the DMP was to increase the number of child care centers in San Antonio that provide quality care for young children through the establishment of a mentoring relationship between a director of a nationally accredited child care center and the directors of centers that are merely meeting minimum standards established by the state of Texas. More specifically, the stated goal was for the protégés centers to become NAEYC-accredited. Mentors and protégés were required to meet a certain number of hours per month, and they also spent time on the telephone. The mentor served as a resource for the protégé as she moved the center towards accreditation standards; the mentor received a small monthly stipend. Both mentors and protégés received some degree of training through the DMP; this training was related to the mentor-protégé relationship, quality child care, advocacy issues, and the accreditation process.

Project funds were spent to send protégés to professional development activities, such as conferences and workshops; and funds were spent on having local consultants conduct workshops, as well. Educational materials were purchased, and meals were served at most meetings and training sessions that the protégés attended.

At the time that the DMP began, there were 30 NAEYC-accredited centers in San Antonio. The goal was for 50% (15) of those center directors to mentor two protégés each, for a total of 30 protégés. The Project Manager recruited the original 15 mentors by first determining who had been directors of accredited centers for the longest period of time. She then made phone calls to those directors. Therefore, the original mentors were current or former directors of child care centers that were accredited by NAEYC.

The Project Manager recruited the original protégés by sending letters to directors whose names she had gotten from child care licensing staff, from some of the mentors, and from city personnel who worked with child care centers. When protégés joined the project, they were directors of child care centers that had not achieved "quality" status. The centers were licensed by the State of Texas and met minimum standards for caring for young children. Each potential protégé filled out an application form; the subsequent screening process that was used was somewhat subjective. The Project Manager interviewed potential protégés either in person or on the telephone. A protégé was rejected if she showed an "unwillingness to commit the time and effort" or if she felt like the individual might not have "the time to attend the professional development events" (personal communication, 2003). There were 33 applications, three of which were rejected.

During the course of my research, some of the original mentors and protégés left the project, for a variety of reasons, and they were replaced by other center directors. Generally, decisions about determining who would participate as mentors or protégés were made by the Project Manager.

The DMP Advisory Council is made up of 12 early childhood professionals representing agencies and institutions such as child care licensing, colleges and universities, the City of San Antonio, and the San Antonio Association for the Education of Young Children. In addition, two of the project mentors serve on the Advisory Council. During the first year, the Advisory Council met monthly. In subsequent years (and currently), the Council meets on a bi-monthly basis.

When I was ready to begin my research, I asked the Project Manager to identify the three most successful mentors in the project. I defined success by the progress their protégées had made through state licensing categories, CCDS categories, and progress towards NAEYC accreditation. Even these successful mentors, however, experienced problems with some of their first protégés, and they (the protégée) were among those who left the project early on. Therefore, the protégés I interviewed had not necessarily been in the project since its inception. At the time that I began this study, there were 15 mentors and 30 protégés in the DMP. The three mentors nominated for this study each had two protégées, resulting in a total of three mentors and six protégés.

Data Collection

The primary method for data collection was through semi-structured interviews with each participant. The primary goal of the interviewing was to develop an understanding of the participants' experiences in the DMP and the meaning they made of those

experiences. As Patton (1990) points out, the purpose of interviewing participants is to acquire at information that is not directly available to the researcher. The experiences the researcher seeks to understand are not the researcher's experiences. Therefore, the interview is designed to reveal the thoughts, feelings, and perceptions of the participant.

I interviewed the three mentors and their six protégés individually, and then I interviewed each mentor with her two protégés. Interviews were all between one hour and one hour and thirty minutes in length. Individual interviews occurred either in the conference room across from my office in the Child Development Building at San Antonio College or at the child care center where the director worked. Two of the group interviews were conducted at the mentors' child care center. The third was conducted in the Child Development Building; that mentor is retired. The interview of the Project Manager was conducted at her home.

Merriam (1998) discusses a continuum of interview structure, ranging from a highly structured approach to an unstructured approach, with a semi-structured approach in the middle. Although I began this study with a more unstructured interview approach, the approach I eventually adopted after the first two or three interviews was a semi-structured approach.

The focus for the mentors' interviews was on their perception of the structure and development of the DMP (since they were all in the original group of mentors), as well as on their experiences with the different protégés whom they had been assigned to mentor. The focus for the protégés' interviews was on their motivation for participating in the project and on their perception of the progress they had made during their involvement in the project.

Each interview was audio taped. As Patton (1990) points out, the use of a tape recorder "permits the interviewer to be more attentive to the interviewee" (p. 348).   I told each interviewee that if I thought of a question while she was talking, rather than interrupt, I would write a few words down and ask my question later. I did this because I did not want them to be suspicious or nervous when they saw me writing during the interview.

Data Analysis

I used the constant comparison method for data analysis. According to Bogdan and Biklen (1998), the constant comparative method is similar to analytic induction because the researcher actually begins to analyze data near the beginning of the study and by the time data collection is complete, that analysis of that data is almost complete, as well. As data for the study were collected, I analyzed simultaneously for recurrent themes or key events that became categories. I then developed categories in writing as new material from subsequent interviews was obtained and incorporated.   Reductive analysis techniques were utilized to identify, code, and categorize data into units in order to arrive at common or unifying themes or patterns. For example, a recurrent theme in the interviews was how the mentor perceived her protégés and how the protégé perceived her mentor. Out of this developed two categories: instrumental mentor/protégé relationship and affective mentor/protégé relationship. I then developed these categories as a major finding, the nature of the mentor-protégé relationship. Subsequently, I was able to perceive a continuum that extended between these two categories, and I was able to see how this interacted with another finding, models of mentoring within the DMP.

I utilized peer review by discussing my preliminary findings with other early childhood professionals. In addition, I asked for feedback from the Advisory Committee members and from the mentors. I have reported some of that feedback in Chapter V.

Theoretical triangulation was conducted after data analysis and during the development of my discussion of the findings and implications for theory. Not only did I refer back to literature cited in Chapter II (for example, Walker and Stott in Caldwell & Carter, 1993), I also searched for and found additional resources (for example, Apter and Carter, 2002).

Although I was not aware of it when I first got the names of the mentors and protégées that the Project Manager had identified as "successful," it turned out that I knew each and every one of them. Some I had known for years and was very involved with on a continuous basis; others were former students, and I had not seem them as frequently during the ensuing years; one I had met briefly at several meetings. In most cases, the rapport and collegial relationship that had been established earlier served to create a relaxed and intimidate interview environment. In the cases where this was not already established, it did not take long for the interviewee to begin to relax and share her experiences with me.

Limitations

This study focused on a single mentoring program in one state, and it included only three mentors and six protégés in the child care industry in a large metropolitan area in Texas. The findings, therefore, reflect the uniqueness of that context. Additionally, my experience in the child care field gave me a specific perspective on these issues and may have made it somewhat difficult for me to see things that did not fit that perspective.

It was imperative that I engage in reflexivity, and while I am confident that my interpretation of the data is sound, I am aware that my perceptions have influenced that interpretation.

CHAPTER IV

CONTEXT AND BACKGROUND INFORMATION

It is important to situate these profiles and their directors' experiences within the context of child care in general in the state of Texas as well as the child care centers in which they work. This chapter includes an overview of child care standards in Texas and a profile of the child care centers, followed by a profile of each participant.

Since 1993, *Working Mother* has published an annual report ranking each state on the quality of child care as indicated by state's child-staff ratios and other state regulations, how the state funds (quality) child care, and the turnover rate for child care providers. In the 2002 report, Hemphill states that Texas is a state in which "inadequate care is more often the rule than the exception" (p. 32).

During the time that this research was conducted, child care centers were regulated by the Texas Department of Protective and Regulatory Services (TDPRS). As of September 1, 2003, TDPRS has a new name. It is now called the Texas Department of Family and Protective Services (TDFPS) and has been placed under the Health and Human Services Commission.

Licensing staff inspect facilities to determine if they meet minimum standards and licensing laws. These standards cover such issues as recordkeeping, personnel qualifications and responsibilities, child-staff ratios, group size, activities, basic care requirements, discipline and guidance, nutrition, health practices, safety practices, indoor and outdoor physical facilities and equipment, and emergency procedures. It is the low personnel qualifications, the high child-staff ratios, and the large group sizes that keep Texas ranked in the lowest of the 50 states in child care standards.

Every licensed facility must be inspected at least once every 12 months, and at least one inspection each year must be unannounced. Other inspections may be announced or unannounced. Facilities are placed on a monitoring plan when they are issued a non-expiring license or certificate. The monitoring plan sets the intervals for the inspections by licensing representatives. The plan is based on an assessment of the facility's compliance history and other pertinent factors. There are three monitoring plans, and the main difference between them is the schedule of inspections. A center that is in Plan 1 must be inspected at least every 3 to 5 months. A center that is in Plan 2 (which is considered the basic plan) must be inspected at least every six to nine months. A center that is in Plan 3 must be inspected at least every 10 to 12 months.

The Child Care Delivery System (CCDS) is the system through which the Texas Workforce Commission (TWC) funnels state and federal dollars for subsidized child care into local communities. The Texas Rising Star Provider certification program is a method for improving the quality of child care services; the standards set forth in the certification guidelines are higher than those set forth by TDPRS. The guidelines cover the same issues listed above for licensing standards.

There are three levels of certification: Two-Star Status, Three-Star Status, and Four-Star Status. Any center that is NAEYC-accredited or operated by the U.S. military is automatically granted Four-Star status. Centers can be placed on Deferred Status and still be part of the Rising Star certification program as they work towards Two-Star Status.

Protégés' Child Care Centers

One of the protégées was the director of a corporate, national chain of day care centers. Four of the protégées worked at child care facilities that were part of a larger

community service agency. One of the protégés worked at a church-sponsored child care facility. It is important to note that the staffs of non-profit and for-profit centers view one another differently. Those who work in non-profit centers see the for-profit centers as making money off struggling families. Those who work in for-profit centers tend to believe that non-profit centers are provided with everything they need without having to account for every penny.   As is usually the case, there may be some truth to one's perception, but there are also misunderstandings.

The average number of children in the six protégés' centers was 117. Three of the centers were licensed for 167-170 children; one was licensed for 103 children; one was licensed for 85 children; and one was licensed for 48 children. (Note: the center that was licensed for 48 children was closed after I interviewed that protégé. That director was moved to the main facility as assistant director; that center was licensed for 169 children.)

Five of the six centers served infants, toddlers, preschoolers, and school age children (in before and/or after school care programs). One center did not have a school-age program. Three of the centers said they were feeling the effects of the local public school districts serving younger and younger children. Because the child-staff ratio is lower for infants and toddlers, there is an increased cost to providing care for the youngest children. Five of the centers served families that come from low socioeconomic backgrounds. These five centers were all CCDS vendors. Two of these five centers worked with teen parents who were trying to stay in school. One served a large military population. One was located in a public housing complex. One served primarily middle and upper class families; however this center did have 10 CCDS slots (out of 85 total slots available).

Mentors' Child Care Centers

One of the mentors was retired. She was the former chairperson of the San Antonio College (SAC) Child Development Department. After her retirement from that position (in her 70s), she became the director of a center that is part of a larger community service agency. The center became accredited under her leadership; it was the first accredited center in San Antonio located on the "west side," a low-income neighborhood.

The other two mentors were directors of church-sponsored child care centers. They were among the earliest of the accredited centers in San Antonio. One of the mentors last worked in a center that served low-income families. The other two mentors worked in centers that served predominantly middle and upper class families, although they did serve some CCDS children.

Participant Profiles

Pseudonyms have been used for all mentors and protégées in this study in order to ensure confidentiality.

The Mentors

Norma was the director of a church-supported child care center. Prior to her position at this center, Norma was the kindergarten teacher at a different child care center, which had become accredited under the directorship of Allison. When Norma moved to her current center it was already an accredited center, having reached accreditation status under the directorship of June, a mentor in the DMP that I did not interview for this study. Norma had maintained accreditation status since becoming director. Norma was an adjunct faculty member in the Child Development Department at San Antonio

College. She was working on a Master's degree in Early Childhood Education, and she expected to graduate in 2004.

Loretta was the director of a church-supported child care center. Before becoming director, she was a toddler classroom teacher. She was a teacher at this center when it first became accredited in 1984 under another director, Allison, who then left to become director of another child care center. Loretta had been involved in an accreditation support group since its inception in the 1980s. She had been a workshop trainer for many years, and she served as an adjunct faculty member in the Child Development Department at San Antonio College for 11 years. Loretta had a master's degree in Early Childhood Education. She used the following terms to summarize her self: early childhood professional, advocate, center director, role model, community college adjunct instructor, mentor, trainer, and author.

Barbara was the chairperson of the San Antonio College Child Development Department from 1974 to 1986. It was during this time that the San Antonio College Child Development Lab Center was the first center in San Antonio to be accredited by the National Association for the Education of Young Children (NAEYC). This occurred in 1982. Barbara retired from San Antonio College in 1986, but she became the director of a non-profit center affiliated with a community agency deep in the west side of San Antonio in an area that has a high poverty rate. Under her directorship, this center achieved accreditation status in 1996, the first to do so in a low-income area. One of the directors that Barbara mentored in the DMP was the first in the project to reach accreditation status in 2002. Barbara had a Master's degree in Early Childhood Education.

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The Protégés

Nancy was the director of a for-profit, corporate child care facility, which is part of a national chain of centers. She had a Child Development Associate (CDA) Credential, which is an entry level credential; it includes 120 clock hours of training in ten specific areas. She had been in the project since November, 2002 (a length of 7 months when I last interviewed her). She had a much support from her area manager, and she saw her center moving right along towards accreditation. Nancy was quick to get involved in something she saw as benefiting her program. She saw herself as a leader and a mentor in her corporation and, as stated above, she was already a mentor for other directors in her corporation.

Elizabeth was the director of a non-profit child care center that was part of a community service center. Elizabeth had an AAS degree in Dental Assisting from San Antonio College. She had taken some child development courses, and she was working on a Bachelor's degree at the Worden School of Social Work at the Our Lady of the Lake University. This was cut short when she gave birth to a baby boy who had special needs. Elizabeth had a positive outlook, and she was not easily discouraged. Elizabeth had been in the DMP since October, 2001 (one year and six months). Her center was a Four Star Vendor when she entered the program, and that status had been maintained. Elizabeth had begun the accreditation process; her plan was to submit the paperwork for application for accreditation at the end of 2003.

Adriana was the director of a non-profit, church-sponsored facility. Adriana also took child development courses at SAC, but she did not earn a certificate or a degree. She had taken some courses in child development, and she was almost finished with her

Bachelor's degree in social work. She had been with the project since January, 2001

(two years and five months length of time when I last interviewed her). Adriana set goals

for herself to continue growing, whether it was in her personal life or at work.

Patience was the director of a non-profit child care center until just recently, when it

was closed. Patience had been at her center for 16 years. She started as an infant/toddler

teacher, and then she got promoted. She had had long-term relationships with many of

the families, because all of their children have been in the center at one time or another.

She was moved recently to the main child care facility as assistant director. Patience

had an AAS degree in Child Development from San Antonio College. She had taken

additional coursework toward the Technical Certificate in Child Care Administration.

 Patience had been in the Director's Mentoring Project since October, 2000 (two years

and seven months). During this time, she moved from Licensing Plan 1 (the lowest

category) to Licensing Plan 2 and then back to Plan 1. According to Patience, her first

licensing representative recognized that the quality of care had improved, and that is why

she was moved to Plan 2. She got a new rep, however, and that rep moved the center

back to Plan 1. Patience stated that the condition of the facility was the barrier to

moving forward on the licensing plans. Patience was definitely someone who strived

constantly to look on the bright side of any situation.

Hannah was the director of the child care program at, a non-profit, multi-service

agency. The center was on licensing Plan 1, and then moved to Plan 3. The center also

became a Four Star CCDS Vendor. Hannah was almost finished with her Bachelor's

degree in social work. Hannah had been involved in her agency for many years running

the social service programs, not the child care. She had been working on her Bachelor's

degree in Social Work at Our Lady of the Lake University. She had not taken any courses in child development. She entered the program in November, 2002 (seven months when I last interviewed her). Hannah was a very organized person who did not make decisions quickly. Before she made a change, she considered her options and the value of making that change. When Hannah did make a change, she committed to it all the way. In fact, Hannah was unusual as a protégé in that she had already been involved in advocacy activities, such as the Stand for Children and the annual SAAEYC conference.

Thelma was the director of the child care program at a non-profit, multi-service agency. She had a CDA credential. Her center was the first to become accredited in the DMP, after being in the project for two years and four months. Even though the agency had been saying they were interested in accreditation since 1985, Thelma really started at step one. When she became the director, the center was not even a CCDS vendor, although it had previously achieved Four Star status under another director. When that director left, though, the center could not maintain the level of quality. Thelma was a very self-confident, assertive person. She valued honesty and integrity, and she demanded it from her staff. She seemed to experience a bit of culture shock when she became director of this center, but her openness to learning was what led her to become involved in the DMP. Instead of being judgmental about the different population she was working with, she asked her mentor, Barbara, to help her understand them.

Summary

Two of the mentors' child care centers that were included in this study were church-sponsored programs. The other mentor was retired; she was the former director of a non-

profit, NAEYC-accredited center located in a community agency. The protégés' child care centers that were included in this study run the gamut from the lowest licensing plan (Plan 1) to Four Star Status (higher than licensing standards, but still quite far from NAEYC-accreditation standards). All but one were non-profit centers; one was part of a national, for-profit chain of child care centers.

Although the range of quality is reflective of child care settings across the San Antonio area, the proportion of non-profit to for-profit is probably reversed. I believe there are far more for-profit child care centers than there are non-profit child care centers in the San Antonio area, but I have been unable to retrieve these data for confirmation.

Two of the mentors that were included in the study had Master's degrees, and the third was scheduled to receive hers in May 2004. All three mentors either were current or former directors of NAEYC-accredited centers. They all had a connection with the Child Development Department at San Antonio College; one was the former department chairperson, and two were adjunct faculty members.

Two of the protégés that were included in this study had a Child Development Associate credential. One had an Associate in Applied Science in Child Development, and she had almost completed her Technical Certificate in Child Care Administration. One had an Associated of Applied Science in Dental Assisting and was earning her bachelor's degree in social work. Another had taken courses in child development, but had not earned a degree or certificate. She was also earning her bachelor's degree in social work. Another protégé had never taken any courses in child development, but she was almost finished with her bachelor's degree in social work.

The level of education of the directors in this study (both mentors and protégées) was far higher than the overall population of child care center directors in the San Antonio area. Most directors meet the minimum standards to qualify to be directors.

CHAPTER V

FINDINGS

> I would just like to encourage any director to stand firm on their feet and be strong despite the letdowns and the trials that we go through. Be strong and don't think about yourself; think about the kids. But do take care of yourself. So I do encourage all you directors to be strong and stand firm, and if you're not part of the mentors' project, become one or find a good director or another friend that can help you out. Just stand strong. If you need anybody to talk to, try and find a director that's already been through that. That can help you. And stay in the race.
>
> Patience, 2003

Patience's heartfelt advice to other center directors is especially poignant in light of the fact that, despite her unrelenting optimism about the possibility of moving towards accreditation, her annex center was closed down, and she was moved to the main center as an assistant director. Patience is living proof that being the director of a child care facility in Texas is a daunting job, especially if that director has knowledge about and a commitment to providing quality care for the children who come to that facility. As mentioned in Chapter II, Texas ranks as one of the lowest states when all 50 states' minimum standards for day care are compared. There is a huge gap between Texas' minimum standards and NAEYC accreditation standards, and bridging that gap is quite a challenge for those centers that are meeting Texas state minimum standards only. That is one of the reasons that only three DMP protégées' centers have achieved NAEYC accreditation despite having been in the DMP since its inception in January, 2000. Because research (National Research Council, 2001) has shown that staff qualifications and child-staff ratios are crucial indicators of quality, I have compared Texas state minimum standards to CCDS requirements and to Massachusetts state minimum standards to graphically illustrate that gap (Figure 1.)

Consistently ranks in the top
five when all 50 states are
compared

Massachusetts
Worker Qualifications:
Includes being 21 years of
age and college credit
in coursework related to
child development

Massachusetts Child/Staff Ratios:
Infants 1:3
Toddlers 1:4
Preschoolers 1:10

NAEYC-Accreditation
Worker Qualifications:
Includes being 18 years of
age and a minimum of
a CDA credential with
AAS degree or baccalaureate
degree in child development
preferred

NAEYC-Accreditation
Child/Staff Ratios:
Infants 1:3 or 4
Toddlers 1:4
Preschoolers 1:10

CCDS Worker Qualifications:
Includes being 18 years of age
and 30% of center's workers
must have a minimum of
a CDA credential or other entry
level certificate

CCDS Child-Staff Ratios
Infants 2:12
Toddlers 2:17
Preschoolers 2:21

Consistently ranks in the
bottom five when all 50
states are
compared

Texas
Worker Qualifications:
Includes being 18 years of
age, a GED or high school
diploma and eight hours
pre-service training

Texas Child/Staff Ratios:
Infants 1:4 or 5
Toddlers 1: 9 - 11
Preschoolers 1:15 - 18

Figure 1. Comparing Texas' Minimum Standards with Quality Standards

Despite the fact that only three centers had been accredited since its inception in 1999, the DMP was perceived by many as a valuable and successful program, mainly because of the support it provided for struggling directors. In this chapter, I present three salient findings. The first is the critical issue of identifying, screening, and selecting protégées. Accreditation is not an easy or quick process, and because of the huge gap between state minimum standards and accreditation criteria, it can be extremely difficult for a center that is currently meeting minimum standards only to move towards accreditation. It seems that a protégé who enters the program without an understanding

of that gap and without a clear understanding of the accreditation process is not likely to make much, if any, progress towards accreditation. Although there are many circumstances beyond the protégé's control that can negatively impact her center's ability to reach accreditation, it appears that a crucial factor in at least moving towards accreditation is the protégé's recognition that she needs help and support. A less tangible quality that seems important is the protégé's potential for growth.

The second finding illustrates how the protégés' and mentors' understanding of the primary goal of their participation in the Director's Mentoring Project determines the model of mentoring that is utilized. The mentors and the protégés construct an understanding that the primary goal of the DMP is to either gain NAEYC-accreditation status for the center itself or to provide professional and personal support to the protégé directors. While all the mentors began the program with accreditation as their primary goal, those who developed a close and empathic relationship with their protégés came to believe that support of the directors was primary, and they utilized an affective model of mentoring.

The third finding focuses on the nature of the relationship between the mentor and the protégé. The nature of the mentor-protégé relationship falls on a continuum from instrumental to personal and developmental. Where the mentors and protégés fall on the continuum parallels the model of mentoring that they utilized. The instrumental relationships occur when the mentor and protégé maintain their belief that the primary goal of the program is accreditation and when the protégé sees herself as competent and capable. These protégés construct a relationship with their mentor that allows them to maintain their view of themselves as competent and capable while accepting help. The

more personal and developmental relationships occur for those mentors and protégés whose initial belief that the primary goal of the program is accreditation is modified during the course of their relationship. These mentors help the protégés to identify their own strengths, to become effective problem-solvers, and to develop a more reflective practice. Their protégés construct a relationship with the mentor that helps them begin to view themselves as competent and capable. In regard to the problem solving skills that the protégées learn, they include identifying the problem, identifying the protégés' needs, learning to "speak up," and learning "whom to go to."

Identifying, Screening, and Selecting the Protégés

A critical factor in the effectiveness of the program was the identification screening, and selection of the protégés. The original protégés were recruited by the Project Manager, through her contacts with personnel in the Texas Department of Regulatory and Protective Services (day care regulation) and in the Child Care Delivery System (subsidized child care with incentives for quality). Additionally, some protégés contacted her directly. The protégé filled out an application form and then was interviewed by the Project Manager. The interviews were either in person or on the telephone. A protégé was rejected if she showed an "unwillingness to commit the time and effort" or if she felt like the individual might not have "the time to attend the professional development events" (personal communication, 2003). This process resulted in three rejections, since there were 33 applications.

The three mentors that I interviewed had all started the project with protégés that subsequently either left the project or were dropped by the Project Manager. In fact, only one mentor (Barbara) retained one of her original protégées (Thelma).

Two of the mentors that I interviewed talked about what it was like to be mentors in a brand new project. Notice that the mentors did not know who their potential protégés would be; and although their first protégés seemed highly motivated, they did not stay in the DMP. It is important to remember that because there were no similar projects upon which to model the DMP, there was a sense of having to make it up as they went along.

> I think that was very new for everybody. We didn't really…I mean we knew where we were going and what the goal was, but we didn't know what it was going to be like or how we were going to get there or who we were going to be with. (Norma)

> …really just starting out with the training and the excitement and just the motivation of, you know, like a race horse ready to go. Really excited. And I was paired with two women that I'm no longer with and just really motivated and seemed to really connect early with them. But I think early the Director's Mentoring Project had some glitches to work out with that. (Loretta)

One of the glitches that the DMP had to work out was developing criteria for identifying, screening, and selecting protégés. In fact, the protégés had already been selected by the Project Manager at the time the mentors attended their first training session.

> And then we had to decide well, did we want to have protégées who were close to where we worked or close to where we lived? How were we going to get access to them, how long did we have to be with them, how much commitment was going to be involved from us on our part? And then after all of that was tweaked, then we were, you know, paired up with someone. (Norma)

Not having more objective selection criteria in place turned out to have several consequences. First, time and money were spent on protégés who probably would not have been included in the project if there had been an objective screening instrument or procedure in place. Second, some of the mentors reported that they began to question themselves and wonder if the problem was something they were doing.

Accreditation is not an easy or quick process, and because of the huge gap between state minimum standards and accreditation criteria, it can be extremely difficult for a center that is currently meeting minimum standards only to move towards accreditation. It seems that a protégé who enters the program without an understanding of that gap and without a clear understanding of the accreditation process is not likely to make much, if any progress towards accreditation. Those protégées, in fact, are very likely to drop out or be dropped from the project.

Several of the protégés who left the program after the first year or two had been told by someone else to enter the program, and neither the protégés nor the person who directed them into the project seemed to be aware of the big picture in regard to accreditation.

The three mentors that I interviewed for this study were previously paired with protégés who were directors of national for-profit child care centers. Two of the mentors questioned these protégés' motivation for participating in the project, and all three expressed frustration with their protégés. This frustration came from their perception that there was a lack of commitment and a tendency to be distracted by other priorities; which resulted in missed meetings, unreturned phone calls, and little progress made towards accreditation. As I mentioned earlier, this situation caused at least one mentor to question whether she should even be a mentor in the project.

(Corporate) upper management had decided that the two directors who were Norma's first protégés would be in the project, and that is why they applied for participation.

> And one of them had been trying for many years to get accredited and had just never gotten there. And the other one had just become interested in it. But when I started meeting with them, the impression that I got from one of them was that they had not been given a choice about being in the project. It has just come down from

management that this was the way the chain wanted to move, and so they were just going to have to get in this to help them get accredited. But they were not given a choice. So one of them was kind of like, "No, I've been with this chain so many years and, it's fine, and I'm just going to do what they want," and the other one was kind of resentful in the beginning.

Loretta was also paired with two directors from for-profit centers, but they were not from the same national chain. She encountered some of the same problems.

And one of them I don't think we really fully had her commitment. Yeah, in the sense of that when we met face to face in the whole group 100%, yes, we do this and giving that relationship building starting out. But then when it would be one on one it was like pulling teeth, and sometimes I would go out to her center and have scheduled a time, and she wasn't there, which I can understand. Things happen, but the people that were at the front desk wouldn't know when she would be back, and things like that. Maybe she was walking, saying actions but not, saying she would do the actions but not… And you know of course her goal was to be accredited and I think that was really a misunderstanding. But everybody thought, "OK, we'll become accredited." Of course that's what she wanted, but not willing to make the work. And so every time I'd set up to talk about the classroom observations, she never was available. So I think really she didn't have a good handle on what the Director's Mentoring Project was about. It was as though I was going to come in and give her all these tools to become accredited.

Loretta did not believe that the motivation to become accredited was based on children's needs or knowledge of quality care. Her impression was that it more to do with personal gain and with marketing, because accredited centers not only post their accreditation certificate, they are allowed to use the accreditation symbol (a torch) on their flyers, website, stationery, etc.

The torch. Just having it on their sign. And if she got accredited she would get a huge bonus. It would also put her up further on the ranks so that accreditation for her was more income on that end. It wasn't for what's better for the children. She didn't know early childhood. Her background was really more social work and she tended to hire staff that had problems.

Norma had a similar impression; marketing was the driving motivation for entering the project.

If I remember right, she said their goals were to start opening…to move towards a school, like a private school, a charter school, something like that. I remember her telling me that, that they felt like accreditation status would give them more of a school; people would perceive them more rather than just a place where you drop kids off, so that that's one of the reasons they wanted the to get it. These directors were never given a choice. They were never given a choice about going for accreditation. But they're company people, and whatever their company says they have to do, that's what they're going to do.

Interestingly, Barbara mentioned the protégés she lost only in passing, towards the end of my interview with her. The first protégé was the director of a center that was part of a non-profit community agency, and all she said was that the Project Manager "made her drop out." That protégé was replaced by the director of a for-profit, national chain, day care center. Barbara had specifically asked for a center near her home, and this was the basis for pairing her with this protégé. But Barbara became discouraged, and she talked to the Program Manager about the situation.

I just said to her, "I'm really not getting where I'd like to be, and I think it's because it's a commercial, for money, center." So she gave that center to another mentor who her experience was with for-profits.

Both Norma and Loretta also began to seriously question whether their original protégés should be allowed to stay in the project. Norma was concerned about the issue of commitment.

What came about after a year was that the one who was willing to try things I kind of realized she's just a talker. Kind of. She was always willing to go around and do…but as I kept telling her the changes she needed to make, they were never done. They were never made. She was always too busy, something came up, and then her husband had to have heart surgery and she ended up taking a month off from her job. And was gone. And so I just felt the commitment wasn't there.

Although Norma felt her other protégé had made more progress, the management of that for-profit center was making demands that had an impact on her commitment to the DMP and to getting her center accredited.

The other one, we continued to build a relationship, which I thought was a very strong relationship and a strong commitment and we'd make plans and I'd go to her center and we were tweaking things. She had ended up already giving out the first, not the self-study, but the first questionnaire/survey. She's a go-getter. But then, the center wanted to open up another childcare center and they wanted it just to be for after school children. And it was next door to her center, so instead of hiring somebody else to do it, they gave it to her. So she ended up being the director of her program and then having to basically design and buy the equipment and furnish and decorate everything. It was like it became her baby. And so that distracted her a long time from the program, from getting her goals done.

During the second and third years of the project, Norma and Loretta talked to the

Project Manager about dropping protégés. The husband of one of Norma's protégés was

having serious health problems.

So after that year I told her no, she was going to have to stay home with her husband for a while. I said, "You know I think it's better if…" I talked with Donna, and she agreed… "if you just step out for a while, and at some other point when you have less commitments you can come back in." And you know I still wanted to stay in touch with her if she wanted me to. We separated on very good terms, and I told her she could call me, and if she still wanted to proceed with accreditation I would help her on the side. But I never really heard from her after that. She didn't really pursue it.

Norma also talked to the Project Manager about her other protégé.

I said, " I really feel like not going into this third year, because there's always something, and it's not that she doesn't want it, but I think its just that the situation that she's in, the for-profit chain, it's always going to be something."

At the time that I interviewed Norma individually, her protégés were Adriana and

someone who was subsequently dropped. Nancy was not her protégé until a few months

later. Only recently did Norma and I talk about Nancy during a telephone conversation

that I had instigated to get information I had not gotten during the interview.

Loretta talked to the Project Manager about dropping one of her protégés, and she

expressed concern about the project itself.

And of course I felt at that point I was robbing the project with that. And so I…Donna listened very well. And she agreed that maybe Isabelle was not the right match for

whatever reason. I do know that she was placed with someone else and then subsequently dropped.

Although there are many circumstances beyond the protégé's control that can negatively impact her center's ability to reach accreditation, it appears that a crucial factor in at least moving towards accreditation is the protégé's recognition that she needs help and support. A less tangible quality that seems important is the protégé's potential for growth. By this, I mean that the protégé must be able and willing to view herself as a "learner." This is different from recognizing the need for help and support. It means being able to admit that her knowledge base can be added to, whether it is in the area of working with parents, working with staff, learning about up-to-date guidance and curriculum development techniques, etc. While most of the protégés who did not fit this profile left the project, I identified one of the protégés that I interviewed as a discrepant case. She "talked the talk," but she did not "walk the walk."

Because of her experience with her first protégés, Loretta gave some thought to recruiting protégés who would be more likely to be successful in reaching accreditation. The Technical Certificate in Child Care Administration that is offered in the San Antonio College Child Development Department has two administration courses in it, Administration I and Administration II. For many semesters, Loretta had taught Administration II. She saw the students in this class as being directors who, by enrolling in the course, had identified themselves as people who were ready to learn more about directing a child care center.

> I was just sharing with Donna some different ideas of names and things like that, and I mentioned the Administration II class would be a good source of directors needing, leading into…already directors, they were already trying to make improvements in themselves by coming back to school or also meeting the minimum standards requirement. But we'd already planted seeds here at SAC. So I gave her a list and a

lot of those directors went into the program and when Isabelle and I parted our ways Donna paired me with Patience.

Despite Patience's self-selection into the project, the situation at her center prevented her from making significant strides towards accreditation. I will discuss this further, including why she stayed in the project so long even though she, Loretta, and the Project Manager all knew she could not achieve accreditation status, when I discuss the other two major findings.

Loretta's other new protégé had also self-identified as a director who was asking for help and support.

And I did a training for SMART START, and Elizabeth was there with her staff. And she came up afterwards and said, "Could I talk to you sometime about accreditation?" And I said," Sure," gave her my card, and I said "But the other thing, are you part of the Director's Mentoring Project?" and she said, "No." So I told her about it. Well, Elizabeth's a go-getter. She immediately called Donna, and Donna paired us. I still had a few more weeks with Amy, but she paired Elizabeth and I immediately.

Loretta recognized that the two protégés she was working with during the third year of the project were very different from her first protégées.

Which was kind of interesting because my next two people were people that some force had guided, or in a sense they had a different reason for joining the program, or I already had a relationship with, as with Patience. And Elizabeth had come up, and Elizabeth is a go-getter. She will seek out questions, she will seek out answers, she works a lot with Virginia Norton with CCDA, and she works a lot with [a SAC CHD adjunct faculty member]. She had taught her class over there. And every time Elizabeth and I talk she's already sought out some advice from somewhere else.

Norma had a similar experience with one of her new protégés.

And then the second year I had been assigned another protégé to take the place of the other one. And we had known each other for a while, and we felt very comfortable already. This was Adriana. And she was somebody that I knew really wanted to grow, she really, really wanted to get her center accredited, but she was like at step one.

When I asked Barbara what her initial impressions were of her protégé, Thelma, and Thelma's center, Barbara indicated that Thelma was aware that she could use the help and support that the DMP offered.

Well, they were kind of far. But Thelma Anderson, the director, was most anxious and willing to cooperate, and all the teachers were willing to cooperate and I think it was because they all came together and they all knew what was going on. The director can't go in and do all that stuff.

When I asked her about Hannah and her center, Barbara said,

Well, they're doing everything I ask, which helps a lot. Course I know that Hannah thinks that they should do it, and I think I can have them done in a year.

Some of the protégés construct a view of themselves as professionals who are able to seek outside help in order to provide quality care to young children. This view of themselves not only propelled them into the DMP, but had also been instrumental in their seeking out mentors previously. This construction appears to be based, at least in part, on having received some formal education in child development, early childhood, or social work (see protégé profiles in Chapter IV).

Although some of the earlier protégés were told by (corporate) management to become involved in the DMP, five of the six protégés that I interviewed had taken steps themselves to get into the DMP. Knowledge about quality care, including the Rising Star program and NAEYC accreditation, seems to have been a motivating factor in their seeking out the DMP.

Having previously met one of the mentors in the DMP also seems to have facilitated introduction into the project. Two of the mentors I interviewed actually encouraged the potential protégé to contact the Project Manager. These two mentors first encountered their potential protégés as either an early childhood trainer or as a community college adjunct professor.

Elizabeth's mentor is Loretta. Elizabeth became the director of her child care facility in 1997, but her background was not in early childhood. She had taken a few courses in child development, but she had started her bachelor's degree in social work, and she did not feel like she had a strong enough background in early childhood.

> So I didn't know where to start, basically, and I did some phone calling. So I did some phone calling, and other directors kind of directed me, but I still wasn't really getting to where I wanted to be. And fortunately I had gone to a training and Loretta Dennison and I knew her involvement - not too much - but I knew her involvement with accreditation. So I talked to her and she was overwhelmed at that time.

Loretta was involved in the Accreditation Support group for SAAEYC at that time, and Elizabeth was aware of that involvement. Elizabeth arranged for a child development class to be taught on site, and she sees that as her first step towards improving quality in her child care center.

> And so I took the initiative to start a class at the center. So we did a Positive Guidance. So that was real good, and an instructor from the college went to our facility, so that worked out. So that was my first step.

She decided to talk to Loretta again, but when she called Loretta's center, Loretta was not there.

> And then the fact that I was seeking and searching, and so I didn't stop there. I said, "OK, I talked to Loretta Dennison, I'm going to call her." So I called, and she was not there, but then the assistant director was, and she said, "Well, you know what? We have this project going on…" Which I was not familiar, which was the DMP. And so she fed me information and who to call.

Once Elizabeth had the information about the DMP, she acted on it.

> So I called Donna. And then from there Donna says, "Well, you know that's great. We are to capacity with the mentors and protégés, but I can keep you, and we can maybe call you when there is an opening or when the year starts." Which I was disappointed, but I said this is good, this is good. And I was taking it all in, soaking it all in. Well fortunately, I don't know if it was days or weeks later that Donna called me and said we have a spot for you. And I was so excited and then she says lo and behold, it was Loretta Dennison. So that just… I was very excited because I felt I didn't…I knew what direction I wanted to go into or where I was heading, but I just didn't know where and how to start. And those seemed like roadblocks for me, but I tried to turn it into a positive is what I wanted to do. So then when Loretta and I met it's been nothing but good.

Adriana first met her DMP mentor, Norma, when she was a student in a class Norma was teaching at San Antonio College, Math and Science for Young Children. Adriana says,

> And now I had at least maybe half a year of schooling so then from then I wanted to really better the quality of our program. Being a student of Norma Castro, she was the one that mentioned the Director Mentoring Program and what they did, just linking to a center that was interested in bettering the quality of their program. We just bonded, and later on, she turned out to be the director at [a church-sponsored center] when June Nelson retired. She was the one that talked, that mentioned to me the first time abut the DMP.

Patience's mentor is Loretta. As I mentioned previously, Patience was taking a child care administration course in the Child Development Department at San Antonio College, and Loretta was the adjunct professor teaching the course.

> I was going to school one semester, and Loretta Dennison just happened to be my teacher in one of the administrative classes. And then she's the one that got me into that. I was really thankful…

Hannah was involved in social services for the agency that includes the center where she is now director. The center had been accredited before and had lost its accreditation status. When Hannah decided to take over as director, one of her goals was to bring the center back to accreditation. She discussed it with the Executive Director, and he

supported her in that goal. Hannah simply states that she signed up with the DMP in October of 2002 and then met with Barbara. She also states that her Executive Director was close with Barbara, so that influenced her comfort level.

Thelma's introduction to the DMP is a little different from the other protégés I interviewed. She says,

> Well, I did not want to go into it to start with. First of all, I felt like, because I had so many years' experience that really I would be wasting my time. And I don't like meetings. And so I just felt like I had too much to do, and I was not going to get involved in it. However, Donna Bauer called a couple of times, and I talked to Donna a couple of times. I said, 'Donna, the only way I would do it is you could match me with a center who is really like [a non-profit center].'

It turns out that Thelma's husband had read an article in the newspaper about the project, and he sent Thelma's resume to the Project Manager, who persisted in calling Thelma.

> And so Donna just happened to catch me on a day when I was going, 'How can I get help?' Because I need help. Donna called on a really bad day and said, 'Thelma, I think I have someone for you.' And she started telling me about [a non-profit center]. And that she thought that Barbara would be able to help me.

Models of Mentoring within the Director's Mentoring Project

The mentors and the protégés utilized a model of mentoring that was based on their understanding that the primary goal of the DMP was to either gain NAEYC-accreditation status for the center itself *or* to provide professional and personal support to the protégé directors (Table 1). While all the mentors began the program with accreditation as their primary goal, those who developed a close and empathic relationship with their protégés came to believe that support of the directors was primary. The former utilized a more goal-oriented model of mentoring; the latter utilized a more affective model of mentoring.

Table 1. Models of Mentoring Based on Perceived Goal of the DMP

Accreditation is primary goal = goal-oriented mentoring model	Combination of accreditation and support is primary goal = combination of goal-oriented and affective mentoring model	Support is primary goal = affective mentoring model
Barbara	Norma	Loretta
Thelma reached accreditation	Adriana	Elizabeth
Hannah	Nancy (the discrepant case)	Patience

Of the three mentors that I interviewed, Barbara is the only one whose belief in accreditation as the primary goal never wavered. The model that she followed was clearly goal-oriented. She was very directive with her mentors. At the time that I interviewed Barbara individually, she was the only mentor who had a protégé whose center had achieved accreditation. When I mentioned that this was the first center in the project to be accredited, Barbara said

> …that amazed me! I had no idea. I thought, "How many does this make?" When I talked to Donna, she says, "You're the only one." And I thought to myself, "What are they doing out there?"

The interview with Barbara was qualitatively different from my interview with Loretta and Norma in that Barbara focused on exactly what she did as a mentor rather than her feelings about the project or about her protégés. When I asked her what she did that resulted in one of her protégés' centers becoming accredited, she said

> Generally, I spend a lot of time getting acquainted with the teachers and observing and maybe having a meeting as to how important it is to get the national accreditation. I go around and talk to them all, because if they don't all understand, where are you?

Barbara said she gave them information about child growth and development and then had them look at their curriculum. She actually made materials for the classroom, such as signs and posters. She had brought them with her to the interview, and when she showed them to me she said,

> And I make these for them. You see? I help them because they're scared. They don't know – or I make a sample.

It is also important to note that the center that was the first to be accredited had been trying to get accredited since 1984. Thelma, Barbara's protégé, was very clear that her goal was accreditation. In addition, Barbara's other protégé, Hannah, works at a center that had been accredited in the past and had lost that status under a different director.

Norma started the project with two protégés who did not stay in the program. Both of these protégés worked in national, corporate, for-profit child care centers. During the second year of her involvement in the project, one of her original protégés had been dropped from the project, and Norma was paired with Adriana.

> And we had known each other for a while, and we felt very comfortable already. And she was somebody that I knew really wanted to grow. She really, really wanted to get her center accredited, but she was like at step one. Her program was not saying get accredited. This was her idea, and so she had to convince her minister; she had to convince her board. Her parents were for it, but where was the money going to come from, and so a lot of factors that had to be addressed that first year with her. And just planning on how she was going to do this.

The model that Norma originally used was goal-oriented, but as she worked with Adriana, Norma began to modify her belief that accreditation was the primary goal of the project.

> So it wasn't even getting to accreditation kind of. To me it was sort of like these are the steps that she's going to have to take and she kind of knew it, but we were just taking the over and mulling them over…

At the end of our interview, Norma said,

I don't know, because, see, I'm torn. Because at some point you have to cut it off. Just because it's a grant, and you have to have some results. I think the goal should be accreditation, and I know there has to be a cut off date somewhere, but I think the support is so important.

To some extent, Norma's understanding of the goal of the project was shaped by how being involved in it had affected her personally. The model of mentoring that she eventually adopted was a combination of the goal-oriented model and the affective model.

It's been important to me having people to bounce off of that aren't really connected to my center.

During her third year in the project, the second of Norma's original protégés was dropped, and Norma was given Nancy as her new protégé. Nancy is the discrepant case in this study. I will discuss this case later in this chapter.

Loretta also started the project with two protégés who are no longer in the project. At the time that I interviewed her, however, she had been paired with Elizabeth and Patience.

When Loretta first started working with Elizabeth, she believed that Elizabeth was well on her way to getting her center accredited. Therefore, Loretta started mentoring Elizabeth using the goal-oriented model.

She came on Four Star designation. She was…she's ready for accreditation. A lot of her staff are ready for accreditation, the facility's not.

There were some major changes in Elizabeth's agency, however, and these changes affected the child care center. In addition, Elizabeth began to have some health problems. Loretta saw Elizabeth losing ground, and this is the point at which Loretta began to adjust her view of the purpose of the DMP.

Our relationship in a sense got stronger. But where our focus was "Let's go towards accreditation," I said, "Elizabeth, put it on the back burner." In her mind the Director's Mentoring Project would only be there for accreditation, and I couldn't be there for anything else. So she always would try to put it in the guise of accreditation. And I said, "That's OK. Just hearing this out and all of it is related to accreditation."

At one point, Elizabeth was so frustrated and full of self-doubt, she told Loretta she had decided to resign. Because Loretta was recruited to help centers get accredited, she had doubts about what she should do. She called another mentor in the project for advice.

And I really at this time wasn't sure what to do. And I wasn't sure how to turn to Donna because I could see Donna getting worried about this type of thing. 'Cause here she has her Four-Star Designated Vendor with that. And so I called June. June Nelson. And I just said, "June, this is kind of what's happening, what do I do?" And June said, "Just listen to her." And all of a sudden my role completely switched. 'Cause I could see how it would be good for her to leave. I could see how it would be good for her not to leave. And I was really just like on a see-saw. Just really became a listening ear, reflecting back, no answers 'cause I couldn't give her the answers 'cause my answers would not be really… wouldn't have been right for her. So all I did was listen.

Loretta said she called June rather than the Project Manager Bauer because she was having conflicted feelings about her role as a mentor.

Once again I had questions. I've gone through two directors. But also Elizabeth was such a productive and probably a closer one to accreditation than many of the others. But yet still so far away. And that's the hard part. I can see how far away they are.

At one point, Elizabeth did turn in her letter of resignation to the executive director of the agency. Loretta saw her role change again.

And so then my role became promoting who she was. "You're worth a lot, you're a good person, look at all the improvements you've made at Inman." 'Cause I could see the future for her. She was once again going to have to sell herself. And I said "Now, Elizabeth, I've often heard, and I'm just going to say this to you, it's easier to find a job when you already have one. And you'll still have your benefits." And she goes, "I know." And I said, "I'm just gonna plant that seed. I want you to think about that." And she, then she called back and she said, "But this is too much. I can't handle this anymore." So she went ahead and resigned.

At this point, Loretta decided she needed to tell the Project Manager what was going on.

> I immediately called Donna, 'cause I felt Donna needed to know, 'cause I felt I didn't need to leave Donna in the dark anymore. And Donna handled it wonderful and said, "Oh my God." And I said Donna, "This is, I wasn't sure what my role should be and what should it be from here on out." And Donna in her wise background said, "No, you support the person. It's not the center. The Director's Mentoring Project is for the person."

Subsequently, Elizabeth's agency ended up rehiring her. For Loretta, though, this was a real turning point. Her other protégé, Patience, was also experiencing difficulties, but by that time Loretta had come to believe that the primary purpose of the DMP was to support the protégé director, not to reach accreditation. It is at this point that Loretta fully adopted the affective model of mentoring.

> And I struggled with that with Donna, because I think accreditation is sometimes so out there that some programs… And what I've done with Patience. And I've built Patience's voice. I mean Patience has now presented at TAEYC; she is now speaking out. She wrote a letter to Mr. Hargrove about the facility whereas before it was just like a, you know, a puppy that had been slapped. "I keep taking this; I keep putting up with it." So what we've built in Patience is a person. And a person that's part of a program that needs to have a voice, because before Patience wouldn't speak up. I don't think they'll ever get accredited. So with Patience it's not getting that center accredited. It's not getting the center Designated Vendor any more, although we were close. I think they would've been rejected though, I really do, 'cause there's so much, so much basic stuff. With Patience it's a voice.

Among the protégés, the issue of whether or not accreditation seemed attainable shaped their belief about the primary goal of the program. Like the mentors, the protégée entered the program with the idea that accreditation was the primary goal. However, only those protégés who headed centers that were most likely to attain accreditation continued to believe that that was the goal of the DMP. Those protégés whose centers were less likely to attain accreditation began to believe that the primary goal of the program was to support the center directors.

Thelma did not specifically address the question of the purpose of the DMP, but she stated that her center had been trying to get accredited for a long time (since 1985), and one of her goals in taking the position as director was to be successful in getting the center through accreditation.

Hannah states her belief that the purpose of the DMP is to both support individual directors and to raise the quality of care. "I think it's a combination of both. Because we need help. And I'm always looking for help." She also said, "…It's for the children. The bottom line are the children." She has been in the DMP only a short time, and one of the reasons she asked to become a protégé was because before committing to being director of her program, she had written a list of goals. One of those goals was to get the center re-accredited.

When I asked Adriana about the purpose of the DMP, her immediate response was,

Oh, the quality. Overall. It's just not one particular center because they're being advocates. To me, when I've been there, I've seen it more exposed. A lot more.

As she elaborated, however, it appeared she was not necessarily talking specifically about accreditation status, but a vaguer and more subjective feeling about quality.

Because I think anything that has, that brings to quality overall? It's not about competition; it's about getting better care for our children. Overall. Educating everybody…There's a lot of networking going around. So it's becoming a little bit larger, I think, and more centers are getting interested in raising the quality of the care. I even, when I call up different centers for whatever reasons, I talk about our program, and how we've come a long way, and how they can get some information. I remember there was a couple of centers that weren't quite at that level, and 'Well, how did you get in here?' and 'Well, this is I what I did.' And it's really helped the better of the program, the children, the staff. You do networking there, and then you bring in more characters that want…and now I know those people from those centers are in the Texas Rising stuff. And then from there it goes on to another level.

Norma got Adriana involved in the San Antonio College Child Development Institute on Quality in Early Childhood by asking her to serve on the steering committee.

Elizabeth is very much committed to seeing her center get accredited, and that was her motivation for becoming a protégé. However, she also sees that she has experienced a lot of personal growth because of her involvement in the DMP and her relationship with Loretta. She says that Loretta "opened the doors for not only me, but also the people that I work with." Apparently, the previous director had attempted to get the center accredited, but she had not been successful.

> So I see this as a plus for myself and for the center. Because now I know a lot more. And a lot more than what I think they did…That's why I say everything has just been very positive. And I have seen us grow.

Elizabeth has begun to actively seek funding for her center, and about the skills to do that, she says,

> But then again, how did I gain all this, but through the people that I've worked with. So not only has it helped our center, but it's helped me as an individual.

When I specifically asked Elizabeth about the purpose of the DMP (support for director or raise quality of care), she said,

> Both. Both, because everything that I have learned, it doesn't just stay with me. I go out and then our center gains, our staff and our families gain. I have grown, not only as an individual, but as a director. And I think our facility has changed so much to the good. Because we have direction now, and that's been through me, through Loretta, through the Project itself. And just the networking itself and the learning; it's tremendous.

Elizabeth has also presented at a state conference for the first time; she was part of a panel of mentors and protégés who talked about their involvement in the DMP. She says,

> The support that I had from Loretta and the group itself and the meetings and just the workshops themselves that are planned through the DMP, it's just been very good. And I'm able to utilize that and take that back to the facility and to the staff and the families and the children.

Elizabeth states that before she was involved in the DMP, only a couple of her center's staff would attend the annual conference of the Texas Association for the

Education of Young Children, but she was able to get 12 people to attend the 2002 conference in El Paso. She definitely sees this as a consequence of her growth in the DMP. She says, "I wasn't demanding, just kind of let them know, this is what we need to do." Some of the other changes that Elizabeth has brought about with the staff include the introduction of child-centered curriculum and "bringing a lot of culture into the facility."

Elizabeth talked to her city councilman, and as a result, her center has been allocated $84,000 to build three new playgrounds. She also approached the Charity Ball, and she believes her center will be receiving money from them as well (approximately $28,000 more). She told me her being able to approach people to ask for this money "comes through learning and through working with all the people that I've been exposed to, and that means the Project, too."

Patience probably stated the most adamantly that she sees the purpose of the DMP as a support for center directors, whether or not the status of the center changes. She stated clearly that she does not believe there should be a time limit for being a protégé in the DMP. She believes that directors that are really trying to improve quality should be kept in the program indefinitely.

> I don't think there should be a time limit, because half of the stuff…it's not really a person's fault…a director's fault why they can't move up. It's a lot of issues behind that. If a person was to get kicked off, it would belittle that director. It would hurt me…Every director needs support. Whether they can't or they can move up. I think if a person gets kicked off after being on the project so long, it's not a good feeling. They're gonna give up, and they're gonna like, 'Well, people think less of me, so I'm not gonna get anywhere.' And they do lose the support whether they can …able to move up or not.

Patience believes that only those who are clearly not cooperating and not making any attempt to improve should be removed from the program. One of the first things that Patience said about being in the DMP is how her feelings of isolation were diminished.

> It feels good to know that you're not the only director that's going through hardship and hard times. It's everybody, and everybody has the same questions, and everybody goes through the same things when you feel like you're alone. There's times when you as a director…you have to wear many hats, and it becomes very hard and complicated to where you just want to give up. But you've got to turn around and think about it's not about you; it's about the kids. And that's what makes you stand up a little firmer because there's gonna be trials, and there's gone be times when you do wanna give up, and there's times where the inspectors come in and they just make you feel so low and good thing you have mentors that can help you stand back and stand strong on your feet. It has been really good to me. Loretta comes in whenever I need her; she's always there for me."

When I asked Patience how the quality of care had changed, even if the facility was in poor condition, she replied that "the main thing is that my teachers are very good, and they take care of the kids and they meet their needs." I asked if the teachers were better now than before Patience joined the DMP, and she said yes.

> They continue to go to workshops; they come back, and they use them in their classrooms, and they share 'em with the others. They see things that need to be changed, and they're not afraid to change, if something's wrong, they'll come and ask me, 'Do you think this is right?' or 'Is this in a good area?'

Patience is proud that her teachers feel comfortable going to her and asking for advice and feedback. She tells them, "Don't feel bad; it's just you learn from your mistakes."

Nature of the Mentor-Protégé Relationship

The nature of the mentor-protégé relationship forms a continuum from instrumental to personal and developmental (Table 2). Where the mentors and protégées fall on the continuum parallels their understanding of the purpose of the project and the model of mentoring that was adopted.

Table 2. Nature of the Mentor-Protégé Relationship

Instrumental Relationship (Accreditation is primary goal = goal-oriented model of mentoring)	Moving from Instrumental to Personal and Developmental Relationship (Combination of accreditation and support is primary goal = combination of goal-oriented and affective model of mentoring)	Personal and Developmental Relationship (Support is primary goal = affective model of mentoring)

Barbara
  Thelma (achieved accreditation)
  Hannah
	Norma
	  Adriana
	    Nancy (the discrepant case)
		Loretta
		  Elizabeth
		    Patience (center closed down; moved to main child care center as assistant director)

The instrumental relationships occurred when the mentor and protégé maintained their belief that the primary goal of the program was accreditation <u>and</u> when the protégé saw herself as competent and capable. These protégés constructed a relationship with their mentor that allowed them to maintain their view of themselves as competent and capable while accepting help.

The more personal and developmental relationships occurred for those mentors and protégés whose belief that the primary goal of the program was accreditation was modified during the course of their relationship. These mentors helped the protégés to identify their own strengths, to become effective problem-solvers, and to develop a more reflective practice. Their protégés constructed a relationship with the mentor that helped them begin to view themselves as competent and capable. In regard to the problem solving skills that the protégés learn, they included identifying the problem, identifying the protégés' needs, learning to "speak up," and learning "whom to go to."

Throughout the project, when Barbara was assigned a new protégé, she seemed to pretty much start right out with accreditation criteria and the accreditation self-study.

When I clarified my understanding that this was what she was saying, her response was, "Yeah, oh yeah, why…I mean that's what I'm there for, right?" Unlike Loretta and Norma, Barbara did not agonize over losing two early protégés whom she perceived as not working towards accreditation. Although she had a cordial relationship with them, it was definitely not a personal relationship.

Because another of Barbara's protégés had been the first to achieve accreditation, I encouraged Barbara to talk about the trusting relationship she appeared to have developed with the teachers in both centers as well as with her two current protégés. She responded by describing what she did, rather than describing the nature of their relationship.

> Well, generally I spend a lot of time getting acquainted with the teachers and observing and maybe having a meeting as to how important it is to get the national accreditation.

When I asked her to elaborate, again hoping to get at the nature of the relationship, her response was:

> Well, I thought everybody was doing that. I didn't know any different. I did what worked for me when we did it at Good Sam.

She consistently maintained instrumental relationships with her protégés and didn't seem to consider any other approach.

Norma falls midway between Barbara and Loretta. Her understanding of the purpose of the project began to change in part because she began to realize that she herself was benefiting from participating as a mentor.

> Because what I started finding out was, hey, this is very good for me because this is someone who has no connection with what I'm doing over here, and I can tell them things, and hey, she has something to offer me, too. You know, yeah, they do a lot of marketing, a lot of promoting, but what's wrong with that? What can I learn from this? And so then it became kind of like a two-way thing. Like where I would say, this is happening to me. And so she was kind of giving me her ear. So it kind of was becoming a two-way thing with us. I think in that second year. Kind of a give and

take. And I've kind of even seen that developing with Adriana. The second year, I felt like, hey, we're really getting kind of close.

As she continued to work with her protégés, she realized the nature of their relationship was changing.

> But like anything, I think, we are all distracted so much, and it is so hard. That's what I've found. It's not that they don't want to do it; it's not that Sophia doesn't want to do it; it's not that Adriana doesn't want to do it. So many things are thrown at you as a director that you're going and then someone throws something at you and you're knocked off and you gotta stop, because this is more important. Even though accreditation is important, this is more important. This is immediate. And on top of that you have all your commitments in the community, and then on top of that you have your family, and so it just gets huge. And it's no wonder that we burnout and cave in after three years. That's the burnout rate for directors, is just three years, because it's just so much that you have on your shoulders.

When Norma was paired with Adriana, she found that Adriana had not figured out how to convince the board that accreditation was a worthwhile endeavor. So her first task was to help Adriana think through the steps to solve that problem.

> Her program was not saying get accredited. This was her idea, and so she had to convince her minister; she had to convince her board. So it wasn't even getting to accreditation kind of. To me it was sort of like these are the steps that she's going to have to take and she kind of knew it, but we were just talking them over and mulling them over.

They decided that a good step would be for Adriana's board members to actually see Norma's center; they are both close to the downtown area, and they are both church-supported, so there are some important similarities between the programs.

> What Adriana and I did, she brought her board members over to my center, and I did a tour, and this is what an accredited center should look like, and then I talked to them about the value of accreditation. Why it was important.

As I mentioned earlier, Norma had not been paired with Nancy at the time that I interviewed Norma individually, but in a phone conversation, Norma expressed frustration that Nancy's attitude is one of already having all the answers.

Loretta's transformation from instrumental to personal and developmental relationships had its seeds early in the project, when one of her first protégés was the director of a center sponsored by the a non-profit agency. Loretta had been employed at her current center since she first entered the field of child care.

> So that was, it was interesting to go out there and see a setting where children maybe came one day, maybe came six months. It was just a real different type of setting.

Her transformation was finalized, however, when she was paired with Elizabeth and Patience. She came to believe passionately that her role was to support her protégés as they struggled with the difficulties that confronted them. She said that the circumstances under which they labored to provide quality care for young children "opened my eyes and my heart." She watched as Elizabeth struggled with massive personnel changes in the agency that oversees Elizabeth's center, until finally Elizabeth was the only original employee left (except for the children's teachers). She saw how frightened Elizabeth was that she might lose her job, and when that was resolved, she watched Elizabeth have to struggle with a new executive director who knew nothing about minimum standards for child care, let alone accreditation standards. She watched Patience struggle in another agency's child care center annex that never got the material or equipment it needed to maintain a safe and healthy environment for the children who were enrolled there, and she watched as Patience's teachers left en masse after they had earned their CDA credentials in order to earn higher pay elsewhere.

Loretta made it clear that as she began to focus on helping her protégés identify their own strengths and to solve the problems that faced them, she had to use a different approach with each of them. As she compared them, she focused on the strengths of each of them.

They're two different people and that's what I've found in Patience and Elizabeth, that I have to approach each one of them differently. Real good relationships with both. Elizabeth, you just offer a suggestion, and she goes 150% with it. She seeks out a lot of her own answers. She's a very independent person. For Elizabeth, it's a lot of just reflecting back what she's thinking. "Am I on target?" But Patience was working real closely with her staff. Patience is hands on, 100%. She and Elizabeth are totally different. Patience comes from the classroom.

The reader will recall that Thelma initially resisted entering the DMP because she felt quite capable of achieving accreditation on her own. She said that the only way she would participate as a protégé would be if the Project Manager paired her with a mentor whose center was similar to her center (serving low-income families and part of a community agency). When the Project Manager called her on a "bad day," she agreed to be mentored. Thelma was very clear, however, about the areas where she needed help.

I told her I did not want to be matched with anyone that came from the affluent area. Because I had worked at [a church-based child care center]for about six months, and what I saw there, being two blocks apart, was totally, totally different. Although I knew I was going to a center that was poor, I did not know how poor it really was. And I did not understand all the time the things that I was seeing from the families.

Thelma says that having Barbara as her mentor

...was a perfect match. Because I did not understand all the family needs…because she was very familiar with us…and Barbara's very personable, you know. So I just asked her some of the real basic things about how do you stop stealing? How do you hire from the community within that you're supposed to be serving…? And so, talking with Barbara, trying to figure out, you know, because I just asked Barbara, you know, 'Why do they do these things?' It just really was, it was easy to trust Barbara. Barbara's very…just a very nice, and very casual, and very, you know…

Thelma faced quite a few problems, but she overcame them one by one with the help of her mentor, Barbara. Some of those problems included no previous experience working with families who lived and worked in poverty, working with staff that came from that same environment, an uneducated and minimally trained staff, not being familiar with CCDS, compensation, staff having forged CDA credentials and GEDs.

Thelma asked Barbara very specific questions, and Barbara told her exactly what to do.

For example, one of the criteria in the accreditation standards is the level of education of

the child care providers.

> You know, and they want to be accredited, but no one has any education. How do you get them to go? And so in talking with her she says, "Well, you have to have the executive director's support." I said, "I've got that." And she said, "And you have to be able to pay a little bit more." And I said, "I don't have that, but I'll work on that with him." And so that's really kind of how we got started.

Not only did Thelma act on Barbara's advice, she went beyond it with her own ideas

and methods.

> We had a meeting, she said, "Get together with 'em and have a meeting and talk to 'em about what you want to." So I did. But I got Paul to agree to give them a raise to 7 dollars an hour if they would get their CDA. So I talked him into giving everyone a raise; and bless his heart, he went out and raised the money so that we could do it. So, I raised everybody to 6 dollars and then we talked about if you'll go get your CDA, when you get your CDA completed at school, not necessarily finished with Washington D. C., but if you will do that part, the first ones, you will get 7 dollars an hour. And we started with two. And everyone has their CDA now except about three of 'em.

One of the things Thelma did not know about, because when she entered the program,

she had lived in San Antonio for only a few years, was CCDS (which was then called

CCMS).

> Well, then Barbara told me about CCMS at that time. Well, she told me about it at the same time that we had this child throwing chairs at the table to play. 'Cause there was nothing in the room. And so, you know, what are we going to do here? And the teacher said, "Well. CCMS was supposed to come out here and look at him." And I thought, "There's that name again. What is this about?" And so, anyway, of course Barbara helped me to reach them, and they came out and saw that there was nothing. We started working on being a 4-star vendor. Because I went to the luncheon, this brown-bag thing, and so I saw that as the place to get the things we needed. And if we could get to be a 4-star vendor, and they would be able to get the children in there, we would have good income, we would have equipment.

Thelma was able to identify her own needs without Barbara's input. She talked about

how she liked the programming that was presented in the earlier protégées' meetings as

compared to the more recent ones and why some of the new protégés might benefit from going back to the earlier programming.

> The programming they did then, and I guess maybe because so many of them are the same they feel like maybe they don't need them. But for me, it was just like soaking up new information, because it wasn't basic child guidance and that type of thing. It was really being able to connect to things and to people that could help these programs. And I've noticed that several of the programs in there are low-income centers. And I'm sure that they have the same problems.

Hannah had only been in the DMP for about six months when I interviewed her, so she had not had a long time to develop a relationship with her mentor, Barbara. However, even though she didn't know Barbara personally her Executive Director was close to Barbara, and so she was immediately comfortable with her. She said, "They were really good friends, so when she was given to me, I had not problem with it. She's a little doll, so…"

Hannah did not mention any barriers or problems. This was probably because her center had previously been accredited, and so they had worked through all the problems. Now that she was the director, she was very confident that she could achieve re-accreditation fairly easily. She viewed herself as competent and capable, in part because she had been with the agency for many years.

> I've never been the director for the daycare, but I've been very much involved with it. My job here at previously Victoria Courts, and now it's called Positive Beginnings. was mainly social services. I would bring in a lot of services to the children, implementing a lot of programs within our agency while doing that, but seeing the center being in trouble all the time, and me knowing what was quality because I'd been in the childcare field for so long.

Even before becoming center director, Hannah took the time to develop goals for herself. She had continued to focus on those goals in her new position.

As I developed my goals and wrote 'em down, it kinda, I put 'em in a bullet form and had 'em in front of me all the time. I think I've met all of 'em, except the accreditation. And my goal is to be accredited in one year. I don't know if that's possible.

She clearly felt comfortable asking Barbara for help; in fact, she asked her to devise a

timeline for accreditation that Hannah could review and propose to the staff. Barbara

actually brought things to Hannah's center that were missing in the classrooms, and

Hannah found this very helpful.

She's brought in some things that needed to be posted up that we didn't have, and that was done right away. We actually had that before, and Roger had questioned, "Why aren't they up?" I said, "Well, they've disappeared." But Barbara just happened to bring me a copy and it's up again.

Adriana fell midway on the continuum of an instrumental to a more personal and

developmental relationship with her mentor, Norma. She was clearly focused on

accreditation.

I ordered my box and actually opened it. I called Norma and said, "Norma, what do I do now?" She goes, "Read the green book, and then or go through the Anderson book."

Norma's perception, however, was that Adriana had a bit further to go to achieve

accreditation than Adriana realized. Norma also recognized that circumstances in

Adriana's personal life were impacting her ability to focus on accreditation at work.

And Adriana, she has a father who's an invalid, her mother takes care of him; but she works. So Adriana has to go over there and pitch in. Adriana, also, I'm not sure, but she was doing home health on weekends, because her pay is not that much. She has two children who live at home; she's a single parent.

About Norma, Adriana says, "Norma's wonderful. I love her. She's been great."

Elizabeth and Patience both fell well within the category of having a personal and

developmental relationship with their mentor, Loretta. Elizabeth said that she was

excited about being told there was a slot for her in the DMP, and that she would be paired

with a mentor. "Lo and behold, it was Loretta Dennison... it's been nothing but good."

Elizabeth faced a very difficult time when the agency under which the child care

functions got a new Executive Director. There was a lot of change in staff, and Elizabeth

feared that she would lose her job. Elizabeth talked about how Loretta helped her through

this stressful situation. She said,

> She made me…see things in just different ways and how to make things in a
> positive…I guess, and to feel like I wasn't alone. First of all, that I wasn't alone.
> And the support and to take things not in a personal level and always reassured me
> that I was doing a good job, and I needed that reassurance from her, and that was
> really good.

Elizabeth said about Loretta that

> She's been very resourceful, as well. And very knowledgeable and opened the
> doors for not only me but also the people that I work with. She's just so very well
> respected by everyone.

Elizabeth said that she and Loretta tried to see each other twice a month, either at

Loretta's center or at Elizabeth's center. Sometimes, however, they met for breakfast. In

addition, Elizabeth said, "…we're talking all the time, in between." She said that Loretta

helped her to learn to delegate rather than try to do everything herself.

Elizabeth encountered some major setbacks during the time she has been in the DMP.

At one time, she thought she was in danger of losing her job, and she decided to resign

before that could happen. The agency under which her child care facility operated

underwent an entire change in administrative personnel, and the new executive director

did not understand child care, let alone quality child care. This was a very difficult time

for Elizabeth, and she credits her relationship with Loretta for getting her through it

successfully. When I asked Elizabeth what she had learned from the experience, she

laughed and said,

Change is hard! Change is very hard! But just the support…She made me see things in just different ways and how to make things in a positive…I guess…and to feel like I wasn't alone. First of all, that I wasn't alone.

Once the crisis with the new administration was pretty much dealt with, Elizabeth

said the next hurdle was getting the staff to change.

I think my most difficult in all of this was the staff. Because they were just so used to…just the thought of being child-centered in itself took a lot of training and retraining. And the fact that…bringing a lot of culture, too, in into the facility. That took a lot of time. And just the training itself.

Patience said about her mentor, Loretta,

Whenever I need her … I ask her a question, she's always there for me. She calls and checks on me, because she knows I have bad days…she never comes and makes me…belittle me or anything like that.

In fact, Patience said that when her second licensing rep made her

feel very small…I called Loretta, and she made me feel a whole lot better. We talked about the issues that the licensing rep had talked about, and she just encouraged me not to give up.

It's clear that Patience did not wait for Loretta to call her. If she needed something from

Loretta, she called her. Patience said that she and Loretta met once a month and they sat

in Patience's office and talked about "our goals." Patience said that Loretta "always calls

me to see how I'm doing, or if I have something bothering me, she's always there for

me."

Of all the protégés that I interviewed, Patience probably faced the most problems.

The condition of the physical facility in and of itself probably would have prevented her

center from becoming accredited, even if they hadn't been closed down by the agency

administration. She also lost four teachers all at once, when they went to another

protégé's center because of compensation issues. So there you have turnover and

compensation problems! What hurt Patience most, however, was that finally the decision

was made to close the facility, because it wasn't cost effective to continue running it as

an annex to the main child care program. The fact that so many of the preschool children

had moved to the public school system (where this is no charge) had resulted in this

financial crisis. About moving to the main center, she said,

> I know it's gonna be hard for me to go over there, and I hope that I fit in and blend in. If not, I'm gonna have to make myself blend in. I'm just gonna do my best, and if they don't like it, I'm like, oh well!

The Discrepant Case

Previously, I stated that the protégé must be able and willing to view herself as a

"learner," and I explained how this is different from recognizing the need for help and

support. It means being able to admit that her knowledge base can be added to. The

protégé who views herself as already knowing everything there is to know is much like

the college student who enters the class on the first day of the semester convinced that

she already knows and understands the content of the course, and whose view of herself

never changes throughout the semester. That student, much to the frustration of the

professor, can earn an A on all class projects, pass all tests with flying colors, earn an A

for the course – all without ever having added to her knowledge base or changed her

behavior on the job or "in the world." This describes Nancy. This was my gut feeling

during the two interviews I conducted with her (the individual interview, which I

conducted at her center, and the triad interview, which I conducted at the mentor's

center). During a phone conversation with her mentor, Norma, subsequent to those

interviews, she confirmed my suspicions and stated her opinion that Nancy sees

accreditation as a piece of paper a center posts in the lobby. When Nancy told me about

reaching Rising Star status, she did not mention the benefits to the children, but instead focused on the center and the center's staff.

> I first was introduced to the mentoring program through Virginia Norton, because I was on trying to get on to the Rising Star. We made that, so we were very jubilant about that, because that gave us a better status for the center and for ourselves.

Once Nancy's center had reached Rising Star status, Virginia told Nancy she was going to introduce her to the Project Manager, so that she could find out about the DMP. Within a week, Nancy received a phone call from Donna. Nancy says,

> I got so excited, and I said 'yes!' So I told the girls, 'Guess what! They've asked me, I'm gonna get on this mentoring program to help us. They're gonna teach me how to work through this process so I can help y'all.'

Although Nancy seemed excited and enthusiastic about participating in the DMP, and this is the basis on which the decision was made to include her, it is possible that had a better screening protocol been in place, she might have been identified as someone who was not a good fit.

Nancy mentioned very few problems that she had encountered as she moved through the licensing plans and to Rising Star status and she was very confident about being able to reach accreditation status within the time frame she had established. Nancy believed that her center was ready to be accredited right now, which indicated to Norma that she did not truly know what quality "looks like." Norma told me that it was her opinion that the difference between Rising Star criteria and accreditation criteria may very well prevent Nancy's center from becoming accredited unless there was a substantial change in Nancy's attitude and understanding of the accreditation process and criteria.

Nancy made it clear that her goal from the beginning was for her center to become accredited. She said that when she and her staff were so happy and excited about having become a Four Star Vendor, Virginia Norton

> told me that she was going to introduce me to this lady that was doing the mentoring program, and she felt that if I really was serous about getting the school accredited through NAEYC, that this would be the program to go through.

When Nancy mentioned being paired with Norma, she didn't even refer to Norma as her mentor.

> The lady in charge of the mentoring program gave me a call, and she said that she would like to assign someone, a buddy, to help me out, and could we meet at [a local restaurant].

In fact, Nancy's perception was that this was to help her staff. "They're gonna teach me how to work through this process so I can help y'all."

> Nancy told her area supervisor about joining the project. He saw this as a plus for the business, and he did not mention the children or the quality of the program.

> I called him and I told him that Donna Bauer had called me and that she was through the City of San Antonio had gotten a grant, and she had started this mentoring program and all. And he says, "Well you know what? We have our mentors too, through [a for-profit chain of child care centers], but being this is local and all our mentors we have them in San Antonio through [this chain], learn through them and maybe we can start a mentoring program for other schools because you're going to be the first one and the only one to do the NAEYC right now."

Nancy's participation in the project was mentioned in the [for-profit chain of child care centers] newsletter.

> As a matter of fact, in our newsletter that we have that's nationwide, there was an article in there that I was applying for the NAEYC accreditation. I was gonna start the process and that San Antonio had a mentoring program and it talked about it, mentioned Donna's name.

Nancy was the only protégé who mentioned her mentor's other protégé, and I detected a sense that the way she does things is better than the way Adriana does them.

She softened her criticism of Adriana at the end, but the reality was that the two

protégées did not really work together with the mentor. They might have seen each other

at meetings, and some of the protégées had established supportive relationships, but

neither Adriana nor Norma had referred to a relationship between the three of them.

> I noticed the other protégé she was working with, Adriana. Adriana's very different
> from me. Adriana's like, "OK, you want it, I'll try and get it for you." And here is
> like, "You want it, you will have it. I will do whatever I have to do to get it to you by
> such a date." Adriana will be more, "I couldn't quite get it so give me another two
> days" or whatever. And with me it's like, "Oh no, no, no, no! It's done. I gave you
> my word I would do it, it's gonna be done." So the three of us are learning to get
> along.

When Nancy received the box of accreditation materials, she planned an elaborate

presentation. However, this was a surprise for Norma. Notice that Nancy referred to

Norma as her "protégé" rather than as her mentor.

> Oh, yeah, I made this big. And she's blushing because it's like, "You didn't tell me
> you were gonna…" And "This is my protégé, Norma Castro, and she's a director,
> and she's been a director for X amount, and she's working on her second degree, and
> she's going to school to do this and that."

The relationship between Norma and Nancy was definitely not personal and

developmental. It best fit into the instrumental category, but from Norma's point of

view, there was something not quite right. Despite the fact that Nancy said she was

always open to receiving help, her actions did not support that statement. According to

Norma, she was either resistant to suggestions Norma made, or she acted as though she

had already decided to do what Norma suggested.

One of the consequences of having this director participate in the DMP was the use of

time and money that could have been used on a protégé who might have been more

willing to learn and grow during the mentoring relationship. Another consequence was

the negative feelings that the mentor experienced when she realized that she was being duped by the protégé.

Summary

This study revealed the meaning that three mentors and six protégés made of their experience in the Director's Mentoring Project. Three major findings emerged during this study: the critical issue of identifying, screening, and selecting protégés; the model of mentoring that was adopted based on the participants' understanding of the primary goal of the DMP, and the nature of the mentor-protégé relationship.

Potential protégés can come from a variety of backgrounds and can work in a variety of child care settings. They may or may not have been exposed to quality child care centers. Some may have received only the required clock hours in training in child care, while some may have earned college credit in different areas of study.

The mentors and the protégés came into the program with the idea that the primary goal of the DMP was to gain NAEYC-accreditation status for the protégé's center. Only one mentor maintained this belief throughout her experience in the project, and the model of mentoring that she used was goal-oriented. The other two mentors developed a more close and empathic relationship with their protégés; while one of them maintained the idea of accreditation as primary and added support for the protégé, the other came to believe that support of the director was the primary goal of the DMP. This was reflected in the model of mentoring that they adopted, as well. One of them used a combination of the goal-oriented model and the affective model, and the other used the affective model.

Like the mentors, the protégés entered the program with the idea that accreditation was the primary goal. However, whether or not their center had a good chance of

attaining accreditation influenced whether they maintained that idea or whether they began to believe that the primary goal of the program was to support the center directors.

The nature of the mentor-protégé relationship was intertwined with their perception of the purpose of the project. Instrumental relationships occurred when the mentor and protégé maintained their belief that the primary goal of the program was accreditation and when the protégé saw herself as competent and capable. The more personal and developmental relationships occurred for those mentors and protégés whose belief that the primary goal of the program was accreditation was modified during the course of their relationship.

CHAPTER VI

SUMMARY AND CONCLUSIONS

I think the common denominator is the children. The people that I have met …the directors in this program, the amount of commitment and dedication that they have for the children -- it's unbelievable. You really, really have to have a commitment -- a bigger commitment -- to children to be in this field.

Norma Castro, 2003

This study presents a picture of directors of child care centers who participated in a local mentoring project, the only such program in the San Antonio, Texas, area. Similar programs are few and far between, and almost no research has been conducted on this type of program. There are over 700 licensed child care centers in the San Antonio area, and only 29 are accredited by The National Association for the Education of Young Children (NAEYC). The struggle that any child care facility director faces is unimaginable to those of us who have never held that position, but these women have accepted the extra challenge of ensuring that the children in their care receive *quality* care. This study explores these women's participation as mentors and protégés in the Director's Mentoring Project (DMP), including their understanding of the purpose of the DMP and the nature of the relationships that developed during their participation.

In this chapter, I discuss the study findings, referring back to the research on mentoring and early care and education. In the final section of the chapter, I discuss the implications of my findings, as well as recommendations for further research.

Discussion of the Findings

The study findings reveal the experiences these women have had in the DMP and the meaning they make of those experiences. The discussion of the findings is be divided in three sections: 1) the critical issue of identifying, screening, and selecting protégés,

2) models of mentoring within the DMP, and 3) the nature of the mentor-protégé relationship.

The Critical Issue of Identifying, Screening, and Selecting Protégés

A significant finding in this study is the critical issue of selecting protégés to participate in the program. Because time, energy, and money are spent on each protégé, there must be a reasonable expectation that protégés will not only stay in the program once selected, but that they will make significant progress towards providing quality care for young children.

Hall (1982) and Portner (2002) discuss the needs of the beginning teacher and the lack of support when they first enter the field; new directors face this lack of support, as well. Some new directors have minimal training and education as required by the state, and their work experience may have been exclusively in centers that meet minimum standards. Identifying and recruiting these directors into the DMP early in their career as directors may be an effective way to introduce them to the concepts of quality care and education. In other words, catching them before bad habits get started could be key in promoting quality in their child care centers as well as ensuring their success in the DMP.

Other new directors have completed some coursework in child development or child care administration. Unfortunately, too many times, students leave a top-notch training/educational program believing that in the "real world" they cannot utilize the knowledge and techniques they have learned. Participation in the DMP can be a way to reinforce what they have learned by helping them transfer it to real work in the "real world."

Central to successful participation in the DMP is that the protégé have an awareness of the gap between Texas state minimum standards for child care and NAEYC-accreditation standards, as well as some idea about the process through which a center must go to get accredited. It also seems to make a difference when the protégé chooses to participate in the project, rather than being told to by someone "above." In addition, the driving motivation for participation must be quality of care for children, rather than the prestige that accreditation bestows upon the director or the center. It is also important that protégés view themselves as professionals who are able to seek outside help in order to provide quality care to young children.

The study reveals that protégés who enter the program without understanding the large gap (Figures 1 and 2) between Texas state minimum standards for day care and NAEYC-accreditation standards are more likely to drop out of the program: those who do stay in are less likely than those who understand this gap to make significant progress towards accreditation.

Figure 2. The Gap Between Minimum Standards (on the left) and Quality Standards (on the right) is Wide and Deep

Protégés who were told by someone above them at their business or agency that they would participate in the DMP are less likely to cooperate with their mentors. For example, mentors and protégés are required to meet a certain number of hours per month. When the protégé is unwilling to meet that requirement, the development of a good working relationship between mentor and protégé is short-circuited.

As I was reviewing and revising this chapter, one of the newest mentors came to see me to get my advice about a protégé she has been working with for about six months. This protégé works for a national, for-profit chain of child care centers. Her supervisor had told her to become part of the project. For six months, the mentor attempted to meet with the protégé and to work with her, with no success. I recommended, based on my research, that this protégé be dropped from the program, and that decision was made (by the Project Manager) later that day. (I do not know if my recommendation influenced this decision.)

Models of Mentoring within the Director's Mentoring Project

Originally, the DMP was funded by the City of San Antonio as a pilot project. The project reached the end of the time allotted to function as a pilot project, and alternative sources of funding must be sought out. Actually, as I was interviewing and beginning to think about the interview data, I began to worry about how those who fund the project now and in the future might look at the project and at this study. Is it enough for directors to say how good the program makes them feel? Is it enough for them to claim that quality has been improved without objective evidence of that improved quality? I brought this issue up several times during the past year, and the discussion that ensued revealed that there was disagreement about the main purpose of the project.

Subsequently, I asked participants to talk about their view of this issue during the interviews.

As Patton (1990) points out "there are many aspects of program operations, including implementation activities and client outcomes, that can be measured in terms of relative quantity…There are many attributes of programs, however, that do not lend themselves to counting" (p. 108). This was certainly true of the DMP, in that so few centers reached accreditation status, and yet both the mentors and the protégés were convinced that quality of care for young children was impacted in the protégés' centers.

Because of the way the project was explained to them at the time they were recruited, protégés and mentors alike began the program with the idea that accreditation was the goal of the DMP and there was a clear expectation on all their parts that the protégés' centers could and would reach accreditation status. Some mentors and protégés never wavered from this initial belief. Other mentors and protégés underwent a transformation during the course of their participation in the project that resulted in their coming to believe that the purpose of the project included supporting the protégé as a person. Whether the initial belief was kept or changed was related to the nature of the relationship that developed between mentor and protégé; when the relationship was close and empathic, the primary purpose was seen as supportive.

The mentors and the protégés utilized a model of mentoring that was based on their understanding that the primary goal of the DMP was to either gain NAEYC-accreditation status for the center itself *or* to provide professional and personal support to the protégé directors. While all the mentors began the program with accreditation as their primary goal, those who developed a close and empathic relationship with their protégés came to

believe that support of the directors was primary. The former utilized a more goal-oriented model of mentoring; the latter utilized a more affective model of mentoring. The consequence of this was that there were in fact two models of mentoring in place. This may have resulted in a lack of focus and this could mean that resources were not used efficiently. It may also have lead to difficulties in convincing funding sources to fund the project.

Pavia et al. (2003) found that when mentors and protégés were not working from the same model, the relationship felt forced. In this study, the mentors and protégées seemed to evolve the model of mentoring simultaneously, so the relationship between mentor and protégé was not damaged. However, the program outcomes were quite different, depending on the model of mentoring used. When an affective model of mentoring was in place, and the focus of the DMP shifted from accreditation to support of the protégé on a more personal level, the mentor's resources were being "spent" on a protégé and a center that may not have had the potential to reach accreditation status.

Luckner and Nadler (1997) in Portner (2002) believe that rapport is crucial to the mentor-protégé relationship. I will return to this in the discussion of the third finding, but it appears to be relevant to discussing this finding as well, because good rapport between mentor and protégé means that the mentor is able to perceive the protégé's needs. When the rapport that the mentor developed with the protégéwas collegial and respectful, and there were no other issues, both the mentor and protégé stayed focused on accreditation, and they engaged in a goal-oriented model of mentoring (Figure 3).

Barbara, Thelma, Hannah

X_____X_____X
Goal-oriented mentoring model   Combination of goal-oriented and   Affective mentoring model
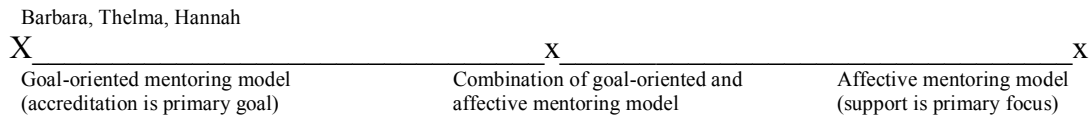(accreditation is primary goal)   affective mentoring model   (support is primary focus)

Figure 3. Goal-Oriented Model of Mentoring

When the rapport that the mentor developed with the protégé was collegial and respectful, but the mentor was also aware that there were issues that the protégé would have to overcome before that center could be accredited, the mentor utilized a model of mentoring that was a combination of goal-oriented and affective. In such a situation, the mentor encouraged the protégé to "speak up" and become involved in advocacy activities, either for her center or in the wider community. If the mentor had utilized a purely goal-oriented model of mentoring in this situation – or utilized a purely affective model of mentoring - the relationship might not have been fulfilling to the protégé (Figure 4).

Norma, Adriana

X_____X_____X
Goal-oriented mentoring model   Combination of goal-oriented and   Affective mentoring model
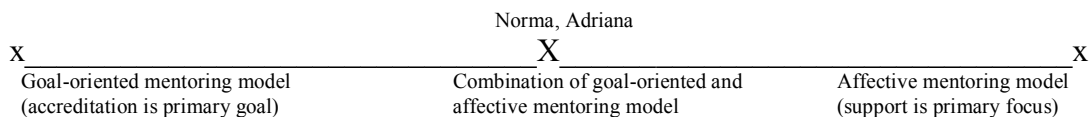(accreditation is primary goal)   affective mentoring model   (support is primary focus)

Figure 4. Combination of Goal-Oriented and Affective Model of Mentoring

The mentor that developed a deep, emotional rapport with the protégé and who came to view her role as truly supportive of the person rather than getting the center accredited, did not abandon her commitment to quality; instead, she came to believe that helping directors learn to speak up and to solve problems indirectly affected quality of care. She therefore engaged an affective model of mentoring (Figure 5).

Loretta, Patience, Elizabeth

X_____X_____X
Goal-oriented mentoring model   Combination of goal-oriented and   Affective mentoring model
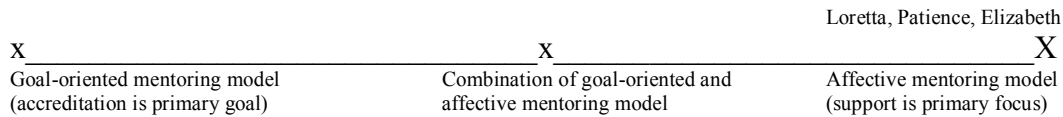(accreditation is primary goal)   affective mentoring model   (support is primary focus)

Figure 5. Affective Model of Mentoring

This last scenario is supported by Turner's finding that the mentoring project she studied in Great Britain had "the potential to create work-place cultures of a more developmental and professional nature" (2001, p. 321). Turner points out that not addressing the support needs of those in high stress jobs can have serious consequences not only for those individuals, but for those who depend on the quality of the services (p. 238).

Nature of the Mentor-Protégé Relationship

As I stated earlier, rapport is an essential ingredient in the mentor-protégé relationship. Luckner and Nadler (1997) in Portner (2002) state that the key to establishing rapport is to "make others feel accepted, supported, and comfortable" (p. 6 in Portner). All the protégés that I interviewed clearly indicated they had a high comfort level with their mentors. (The discrepant case may not have been expressing genuine feelings, however.)

Pavia et al. (2003) reported that the use of the term "protégé" appeared to inhibit the development of rapport in the program she studied. This did not seem to be a problem for the protégées in the DMP, and that is very likely because accreditation is at least initially the goal for all DMP participants. There was no clear cut goal for the mentor-protégé relationship in the program that Pavia et al. investigated.

Carruthers (in Caldwell & Carter, 1993) discusses the issue of matching protégées and mentors. He asserts that the most effective mentoring relationships are those in

which the mentor and the protégé choose each other freely, rather than being assigned by someone else, as is done in the DMP. The fact that the protégés who stayed in the project and developed such passionate feelings about its value had prior knowledge of or relationships with their mentors substantiates this assertion.

Baird (in Caldwell & Carter, 1993) described the role of the mentor as "Helper + Sharer + Carer" (p. 55). He goes on to discuss the role of the mentor in terms of cognitive (advising and guiding) and affective (caring and sharing) aspects. Dingman (2002) wrote about the "mentoring connection." This study reveals that the nature of the mentor-protégé relationship in the DMP tended to be instrumental or personal and developmental, or in between. Caruthers (in Caldwell & Carter, 1993) touches on this when he states that there are two categories into which most mentor relationships fall: those in which the focus is on the professional development of the protégé only, and those in which the focus is on both the professional and the personal development of the protégé (p. 11).

Pavia et al. (2003) point out that "while much has been written to guide professionals in the development of mentoring programs, limited studies have investigated the implementation and evolution of such efforts" (p. 251). This study adds to our understanding of those issues.

Walker and Stott (in Caldwell & Carter, 1993) describe five stages in the mentor-protégé relationship: formal, cautious, sharing, open, and beyond. Whether or not all mentor-protégé pairs go through all of these stages may be affected by the protégé's circumstances in combination with the ability of the mentor to develop rapport with her protégé. Although this did not emerge as a finding of this study, it is my judgment that

Barbara and her two protégés stayed within the first three stages, and yet Barbara successfully mentored the director of the first center to be accredited in the project. I believe that during this study, Norma and Adriana stayed within the first four of the stages, and it is very clear that Loretta and her two protégées experienced all five stages (Figure 6).

Formal	Cautious	Sharing	Open	Beyond

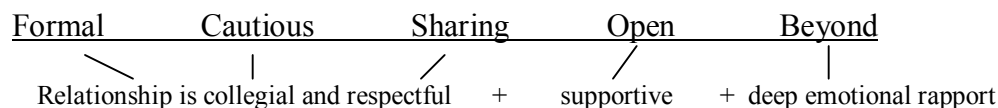Relationship is collegial and respectful   +   supportive   + deep emotional rapport

Figure 6. Stages in the Mentor-Protégé Relationship

One of the mentors stated that the typical child care center director experiences burnout within three years. Although I was unable to substantiate this claim, I did find two things: 1) most of the research that has been conducted on burnout looked at professionals in fields other than early care and education, and 2) the bulk of the research that has been conducted on early childhood professionals has focused on the child care workers who provide care in the classrooms, not on the director of the child care facility or program (Goelman & Guo, 1998, Townley et al., 1991; Wisniewski & Gargiulo, 1997). One investigation of burnout in child care personnel that did include directors as well as teachers and assistant teachers (Stremmel et al., 1993) found that engaging in frequent discussions about professional development was linked with job satisfaction for directors. This substantiates this study's finding that mentors can help a protégé feel competent and capable. The mentor who provides this support for her protégé is also providing a model so that director can engage in those kinds of discussions with her staff.

In this study, the nature of the relationship that developed was intertwined with one of the other findings, that of the participants' understanding of the purpose of the DMP.

When the mentor and protégé maintained their belief that the primary goal of the program was accreditation <u>and</u> when the protégé saw herself as competent and capable, the mentor and protégé developed an instrumental relationship. This relationship allowed the protégées to maintain their view of themselves as competent and capable while accepting help.

When the belief that the primary goal of the program was accreditation was not maintained, the mentors and protégés developed more personal and developmental relationships. In these relationships, the mentors helped the protégés identify their own strengths, and through reflection, begin to be able to articulate the problems they faced as well as the solutions to those problems. Reciprocally, these protégés constructed a relationship with their mentor that helped them begin to view themselves as competent and capable.

Conclusion

Most working parents who have children in child care must trust that the care their child receives is supportive of their child's development and that it is not harmful, dangerous, or neglectful. Most parents, however much they love their children and want the best for them, are unaware of where Texas ranks among the 50 states in caring for its youngest citizens. And even when parents are aware of the difference between care that meets minimum standards and care that meets quality standards, choices about child care arrangements are more often based on convenience (proximity to work or home) and affordability (Ehrlich, 2001).

The fact that fewer than 4% of licensed child care centers in San Antonio are accredited means that an unacceptably large percentage of children in child care are at

risk, especially those children who suffer from other risk factors. These other factors include, but are not limited to, poverty, teenaged parents, parents with little or no education, violence in the family or neighborhood, and over-exposure to television.

This study illustrates the untapped potential for improving quality care for young children by showing how directors of accredited centers can "give a leg up" to centers that do have the potential to become accredited. In addition, this study reveals the struggles and heartaches of those directors who know how important the early years are and how crucial quality care is, but who work at centers that may never be accredited because of circumstances beyond their control.

Today, there are several similar mentoring projects in existence in other states. However, at the time that the DMP was started, the few programs that did exist had not received much publicity and no studies had been conducted to assess them. It was very difficult to find a model that could be replicated here in San Antonio. Instead, the Project Manager and the Advisory Council had to make it up as they went along.

Recruiting directors to be protégés in the DMP has proven to be a complex task. Early in the project, too much time and money was spent on protégés who, were they to apply today to participate, would not be accepted or would be terminated after a trial period. Based on my analysis of the data, today we have a profile for the protégé who is likely to successfully move her center towards accreditation:

- Is aware of NAEYC-accreditation standards
- Is aware of the gap between Texas minimum standards for licensed child care centers and accreditation standards

- Is aware of the process through which the director, staff, and parents must go to reach accreditation status

- Is not faced with barriers that will absolutely prevent reaching accreditation status (i.e., the facility is unsafe; staff are not qualified; turnover rate is unacceptable, etc.)

- Sees herself as competent and capable and is willing to accept help and advice.

We also know that circumstances can affect the protégé personally and professionally. These complications can result in a shift in how both mentor and protégé view the primary goal of the project.

Based again on my analysis of the data, we also have a profile for the director mentor:

- Has successfully led a center through accreditation and has maintained that status through at least one re-accreditation process

- Is able to develop a relationship with the protégé that is unique and specific to that protégé

- Is able to balance accreditation as the primary focus of the relationship with support of the protégé as a primary focus of the relationship

By allowing these women to tell their story about their participation in the DMP, we have begun to explore the range of relationships that can develop and the effect of those relationships on both the mentors and the protégées.

Implications of Findings for Theory and Practice

This study is one of few qualitative studies focusing on the experiences of child care center directors in a state whose child care regulations are consistently ranked among the

lowest of the 50 states. By exploring the perceptions and experiences of director mentors and protégés, this study adds to the literature base on theories of mentoring.

Because so little research has been conducted on early care and education professionals, information on the lives of center directors has been neglected. This study, however, provides insight into these directors' views of quality child care, revealing how they deal with the sociopolitical reality of child care in the U.S. today and how that reality plays out in child care centers in San Antonio, Texas. This study, therefore, has implications for practice as well as theory. Mentoring programs for child care center directors work best when protégés have a clear understanding of the task(s) with which they are faced, when protégés request participation in the mentoring program, when the protégé has some prior knowledge about her mentor, and when mentors and protégés agree on the goal of the mentoring relationship. When these four criteria are in place, an appropriate mentor-protégé relationship develops, ranging from instrumental to personal and developmental.

Apter and Carter (2002), discuss the relevance of reversal theory to mentoring. Reversal theory focuses on "motivation, emotion and personality" (p. 292). The basis of this theory is the idea that there are four pairs of "opposing fundamental motives" (p. 292), and that people normally alternate between states in each pair. There are several ways that the authors see this theory applying to the mentor-protégé relationship. One of the most salient is that the mentor "must be in the other-oriented state while mentoring" (p. 294). However, people who spend too much time in the other-oriented stated are prime candidates for burnout; burnout is already an issue for child care center directors, so this has implications for the mentors in the DMP.

As stated previously, Carruthers (in Caldwell & Carter, 1993) states that there are two categories into which mentor relationships fall: those in which the focus is on the professional development of the protégé only, and those in which the focus is on both the professional and the personal development of the protégé (p. 11). Rather than viewing the relationships as either/or, as Carruthers does, I postulate that there is a continuum that combines the goal of the mentoring situation with the nature of the mentor-protégé relationship that evolves over time.   On the far end of this continuum, the goal of the mentoring relationship, in fact, becomes that of supporting the personal development of the protégé. I suggest that the ability of the mentor to successfully move back and forth between the other-oriented state and the self-oriented state may combine with the nature of the relationship and the focus of the relationship such that potential burnout can be anticipated and either prevented or handled appropriately (Figure 7).
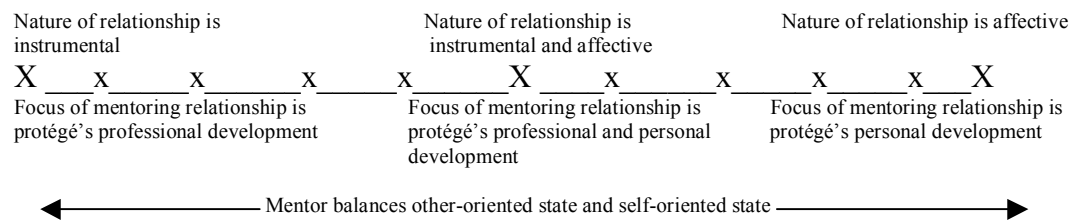

Figure 7. Nature of the Mentor-Protégé Relationship in Relation to Reversal Theory

Carruthers (in Caldwell & Carter, 1993) discusses matching protégés and mentors. He cites Dodgson's identification of three ways that this usually happens: the protégé initiates the relationship, the mentor initiates the relationship, or the relationship is established by serendipity. Carruthers, however, simplifies the identification by saying it is either formal (from a higher authority) or informal (initiated by either the mentor or the

protégé). Furthermore, the most effective mentoring relationships are those in which the mentor and the protégé choose each other freely. This has not been the way the DMP paired mentors and protégés. Instead, the Project Manager did the pairing. Interestingly, it turns out that, some previous relationships already existed between some mentors and their protégées. I postulate that when there is a specific goal to be accomplished, as in the DMP, there should be a preliminary step in matching mentors and protégés, and that would be a screening process that would get at some crucial issues, such as attitudes, beliefs, knowledge base, and commitment to the goal of the program.

Earlier, I listed the four components that Portner (2001) claims must be included for a mentor program to be more than just adequate. Portner states that the program must be tailored to local culture and beliefs, have buy-in (commitment) from all stakeholders in the community, have a formal structure for collaboration and decision-making, and have access to ongoing support and resources (p. 2). Although this study supports this claim, what I found was that there must be a mechanism in place for these four components to be successfully addressed.

First, all stakeholders must be *willing* to examine local cultures and beliefs. Although this did not emerge as a finding, one mentor felt strongly that this issue was by-passed early in the program. She refers to herself as a person of color (she is Hispanic), and her belief is that people who are not minorities are not likely to see the need to examine such issues. I agree with her that unless stakeholders are forced to look at local cultures and beliefs, it very likely will not happen.

I also agree that all stakeholders must be committed to the project, but there must be a way to assess and monitor the commitment of mentors and protégés so that time and

money are not spent on those who are not fully committed. Portner believes that there are three criteria or factors necessary for commitment to be present -- these are beliefs, expectations, and rewards. These factors combined with the four criteria I listed on page 97 may very well result in a model for identifying and screening protégés to ensure a higher rate of success in this or similar programs.

The formal structure for collaboration and decision-making is in place; there is a Program Manager and an Advisory Council. As noted earlier, the Advisory Council is made up of individuals who represent several agencies and institutions in the San Antonio area, including the City of San Antonio (Children's Resources Division). There is no protocol in place, however, to make determinations about what problems or situations are best handled by one or two people and which are best handled by the entire Advisory Council, along with the Program Manager.

Last, in order to have access to ongoing support and resources, key stakeholders must be savvy about what the program must to do satisfy those who can provide support and resources.

As Patton (1990) says, "Implementation evaluations tell decision makers what is going on in the program, how the program has developed, and how and why programs deviate from initial plans and expectations. *Such deviations are quite common and natural* (italics in original), as demonstrated in the findings of Rand's 'Change Agent Study' of 293 federal programs supporting education change" (p. 105). The findings that I have discussed can inform the Project Manager, the Advisory Council members, the mentors and protégés, and the funding agencies about the successful components of the projects as well as the components that need to be improved.

Recommendations for Further Research

Limited funding at all levels means that we cannot waste money on protégés who are not likely to move their centers towards quality, whether that quality is measured by attainment of NAEYC accreditation or whether another measure of quality is adopted. *I recommend that the use of a pre-assessment tool for potential protégées be used and that the usefulness of such a tool be studied.* A pre-assessment of the protégé that includes a measure of her awareness of the criteria for attaining NAEYC-accreditation as well as her ability to accept advice and help from her mentor might be a useful tool to assure improved selection of protégées. Portner (2002) has developed an Assessment of Knowledge and Confidence (p. 35) for use by the (teacher) protégé to conduct a self-assessment with a follow-up assessment by the mentor. There is an NAEYC-accreditation pre-assessment tool available on the NAEYC website, and recently, based on this study, the decision was made that new protégées will use this within the first few months of being in the program. Although the decision to use this tool was primarily to obtain baseline information on each protégé with a follow up at the end of the first year, this pre-assessment tool in conjunction with Portner's Assessment of Knowledge and Confidence could be a powerful means to select protégées who are likely to succeed in the DMP.

Because NAEYC-accreditation is based on a large body of research that supports the concept of developmentally appropriate practices (DAP), it is essential that the potential protégé have knowledge of DAP, *and* that her theories and beliefs about teaching young children support the implementation of that knowledge. As Charlesworth, Hart, Burts, Thomasson, Mosley, and Fleege (1993) explain, "Implicit theories are the ideas about

instruction that teachers develop from their personal experience and practical knowledge. Implicit theories differ from the explicit theories that are taught in college courses and are included in college texts and other professional literature" (p. 256). She concluded that the use of her questionnaire combined with a classroom observation can be a valuable tool to assess and compare the reported beliefs and practices of kindergarten teachers. *Adapting the questionnaire and observation to assess and compare the reported beliefs and practices of child care center directors may yield helpful information that could be used to make decisions about potential protégées. I recommend further study be conducted to determine the usefulness of such an adaptation.*

In addition, *progress towards accreditation should be carefully monitored, and there should be early intervention if a center is not making significant progress*. This doesn't necessarily mean the protégé should be dropped from the program, but an assessment should be made for why progress is so slow. I also believe the Advisory Council should have more input into some of these decisions. The collective expertise of those on the Advisory Council may be able the assist the Project Director, the mentor, and the protégé to come up with a plan of action that can more effectively move that center towards accreditation. An appropriate protocol should be developed and studied.

There is no problem with assessing quality of care in those centers that are clearly moving towards, and even attain, accreditation. My concern is for those centers that are having difficulty reaching Rising Star and accreditation status but who claim there has been an increase in quality care. During a mentor appreciation luncheon, I actually said to several mentors, "Tell me what you see that convinces you that the quality of care in the classroom for individual children has improved," and they responded with hesitation

and with statements such as, "Well, I just know it," or "My protégé feels strongly the quality is better." I suggested that the Early Childhood Environment Rating Scale, Revised Edition (ECERS-R) (Harms & Clifford, 1980) and the Infant/Toddler Environment Rating Scale, Revised Edition (I/TERS-R) (Harms, Cryer, & Clifford, 2002) be used to quantify the perceived increase in quality, but the majority of the mentors felt strongly that their job is not to go into the classrooms. Instead, they clearly expressed their perception that their role is to develop a relationship with the center director (their protégé) and follow her lead in regard to her stated needs.

Despite this, *I highly recommend that the further research be conducted on the centers in the DMP, using either the ECERS-R or the I/TERS-R; these scales have been validated and are widely accepted as reliable indicators of quality*. Earlier research has revealed that there may be a discrepancy between a teacher's belief in developmentally appropriate practices and her actual implementation of those practices (Charlesworth et al., 1993). A more objective assessment would reveal whether or not there is actual improvement in quality in the children's classroom.

One of the aspects of mentoring that Huling and Resta (2001) discuss is the value to the mentor, not just the protégé. *Exploring this issue further and shedding light on how these mentors gained from their experience would give us valuable information* and it would also help us to recruit other mentors into the program.

In my discussion of the history of early care and education in Chapter II, I referred to the birth of the two-tier child care system in this country. This two-tier system definitely exists in Texas, but few in the field of child care are aware of this history. I can use myself as an example – much of my knowledge of the history of early care, I learned

while teaching courses that included an historical overview of attitudes and beliefs about children and childhood. Such an overview generally includes a discussion of early philosophers, educators, and ways of educating young children. The portion that covers the history in the United States commonly starts with World War II. The research I did for Chapter II of this dissertation was a real eye-opener for me. Without an understanding of the roots of today's system, there is a tendency to view the minimum standards as "normal" and the accreditation criteria as "elitist." It is easy to lose sight of what all young children need and the consequences of so many children being in centers that meet the low standards that Texas puts forth.

I recommend that research be conducted to find out how aware parents are of this system, and how it plays out in Texas in terms of the extremely low state minimum standards versus the much higher NAEYC-accreditation standards. We know that a state's minimum standards set the tone for quality in that state and that states with higher licensing standards have fewer poor-quality centers (Cost, Quality & Child Outcomes Study, 1995). Parental awareness may very well be the key to raising the standards for child care in the state of Texas (Hemphill, 2002). According to the Cost, Quality and Child Outcomes Study (1995), "Ninety percent of parents rated the programs in which their children were enrolled as very good, while the ratings of trained observers indicates that most of these same programs were providing care that ranges from poor to mediocre" (p. 325).

Tied in with this is the amount and quality of training and education to which child care workers are exposed. For example, there seems to be perception that CDA training is high level training, when, in actuality, it is entry level training. The training, in fact,

can be conducted by just about anyone who declares him or herself a CDA trainer. In the near future, NAEYC is expected to recommend that lead teachers who are responsible for groups of children age three and above hold a minimum of a baccalaureate degree with emphasis on child development and early childhood education. This is based on the National Research Council report, *Eager to Learn* (2001).

Although very little was brought out in the interviews regarding gender equity and the role quality child care plays, clearly the political landscape of child care issues directly impacts women, both as working mothers who must make crucial decisions about child care, and as child care providers who provide child care for children other than their own. Child care professionals struggle with issues of quality versus state standards as well as with the issue of fair wages. According to the Cost, Quality and Child Outcomes in Child Care Studies (1995), while the cost of child care is high, it is actually held down by "the use of primarily female employees (97% were women in this sample) who earn even less in child care than they could in other female-dominated occupations. In this study, *the mean foregone earnings given up by teachers was $5,238 per year; assistant teachers gave up $3,582 per year"* (p. 322). (Italics added.) It is difficult to name a job or career in which men so heavily subsidize their clients.

Traditionally, people in the field of early childhood have tended to be naïve about the society's attitude towards young children, child care, and child care providers. They have assumed that people will just naturally want to do what is right for children. Because of this assumption, early childhood practitioners have been slow to develop advocacy skills. Their silence along with an unwillingness to discuss accountability has left a void that is

too easily filled by those who claim to be speaking on behalf of young children, but are in fact representing their own interests.

During my interviews, most of the protégés mentioned some of the same people and credited them with participating in the DMP. These appear to be key people in the early childhood community. *A study of the relationships that exist and how those relationships could be used to increase quality of care in San Antonio should be conducted.*

The last recommendation I would make is that the relationship between the mentor and the protégés' staff be studied. Some mentors seem to work mainly with the protégé, and others seem to establish a relationship with the staff, including conducting workshops and giving them feedback about their individual classrooms. Further research can reveal if developing a supportive relationship with the center staff has an impact on achieving accreditation.

An issue that must be addressed by the Advisory Council and the Project Manager is whether or not accreditation truly is the goal of the DMP. If it is, then protégés who centers have very little chance of reaching accreditation status should either not be included in the project, or they should be given a probationary period to assess whether or not progress towards accreditation is possible. If, however, the Advisory Council and the Project Manager agree that "improved quality" is the goal of the DMP, then that should be articulated and methods for measuring such an improvement should be put in place (ECERS-R and ITERS-R, for example).

Last Words

During the last legislative session, lawmakers decided to divert Texas Workforce Commission monies that had been previously earmarked for extensive training of child

care providers (through the CCDS Rising Star program) to instead train child care licensing representatives throughout the state. This training was deemed necessary so that these representatives can enforce new standards that went into effect on September 1, 2003.

Some of these licensing changes are good, but many of these changes mean that things are even worse for young children in child care settings in Texas. For example, instead of using the age of the youngest child in a group to determine group size and staff-child ratios, the age of the median child is now used. This means that very young children can be cared for in larger groups and by only one adult instead of two! Did the required training for caregivers improve in order to offset this new standard? No!

There is more bad news: As of February, 2004, the Director's Mentoring Project was called to a halt due to a lack of funding. For many of those involved in the project since its inception, this was a very sad event, indeed. What happened? Could this have been prevented if things had been done differently? Sadly, the answer is "no." Until we, the citizens of the State of Texas, insist that we will not stand for being ranked in the bottom five of all fifty states when it comes to how we care for our children in child care centers, even a program as admired and appreciated as the DMP will have little effect in raising the overall quality of child care in this community or any other in Texas. Until the citizens of the State of Texas insist that workforce dollars be spent to ensure that all children of working families are being cared for in quality centers, a program such as the DMP will have little impact on the care provided to the majority of children in our community. We must change the public's attitudes and perceptions about child care in the state of Texas.

Now is the time to begin to organize so that when the minimum standards that regulate child care settings come up for revision in five and half years, we can do more than respond during the public comment period. Instead, we must act now to shape those new standards, and that will mean educating parents as well as the general public. It will also mean educating legislators and voting for those candidates who "get it." Then a program such as the DMP can have a chance of making a difference – a real difference!

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VITA

Cathleen F. Castillo
547 E. Craig Place
San Antonio, Texas 78212

EDUCATION

Texas A & M University
Ph.D., Educational and Human Resource Development

The University of Texas at San Antonio
Master of Arts, Bicultural-Bilingual Studies (Early Childhood Education)

Drake University
Bachelor of Arts, Psychology

HONORS/AWARDS

Recipient of the SAAEYC Norma L. Ziegler Higher Educational Professional of the
Year Award (2002)

Teaching Excellence Award (San Antonio College, 2002)

EXPERIENCE

1999 to present   Chairperson, Child Development Department, San Antonio College
Duties include supervising faculty, adjunct faculty, clerical staff, and
child care center staff. Plan and implement course scheduling.
Coordinate departmental advisory and faculty committees. Oversee
child development building, which includes Child Development Center
(87 children). Budget manager of department and center.

1980 to 1999   Faculty, Child Development Department, San Antonio College
Taught a wide variety of courses. Supervised students in on-campus
lab and at off-campus sites. Served as coordinator of district and
college committees.

1976 to 1978   Bilingual Homebound Educator, La Paz Early Intervention Program,
Chicago, Illinois
Coordinated educational activities for physically and mentally
handicapped children (birth to three) and their mothers

1974 and 1976   Lead Teacher, Princeville Migrant Head Start Center
Taught three- and four-year old Mexican-American and Mexican
Spanish-speaking migrant children.