

Fragile Families

CHILD CARE STUDY

POST OBSERVATION FORM

NOTES:

This data file associated with this survey uses the naming convention, ffc_pof_*, where "*" denotes the question number (ex. "ffcc_pof_a1" for "a1").

The "-9 =missing" convention is used in this file to denote when a response is missing for a particular question/variable; the "-2=enforced skip"convention is used to indicate when the question was not required to be filled in based on a previous response.

DATE: |_|_|/|_|_|
 MONTH YEAR
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Conducted by
Mathematica Policy Research, Inc.

for

**Teachers College
Columbia University**

A.

INTRODUCTION

As you know, I will be observing (CHILD) this morning. I want to see what a typical morning is like for (him/her). I want to see how (he/she) acts around the other people in the room and how (he/she) pays attention to the things in the room. I want to find out what kinds of experiences (he/she) usually has. For the observations to be accurate, it is important that everyone act as naturally as possible and just do what they would be doing if I weren't here. I know this is easier said than done, but try to do what you would normally do. The purpose of these observations is really just to find out how children spend their time in child care. I will be following (CHILD)'s activities, and I may, therefore, need to go in and out of the room. I'll try not to be disruptive. If you just ignore me, I hope that the children will too.

INTRODUCCIÓN

Como Ud. ya sabe, voy a estar observando a (CHILD) esta mañana. Quiero ver lo que es una mañana típica para (él/ella). Quiero ver como actúa alrededor de otras personas en el (aula/cuarto) y como presta atención a las cosas en el lugar. Quiero averiguar que tipo de experiencias (él/ella) tiene, generalmente. Para que estas observaciones sean precisas, es importante que todos los presentes se comporten en la manera más natural que es posible, y que hagan lo que harían si yo no estuviera aquí. Yo sé que esto es más fácil decir que hacer, pero traten de hacer lo que normalmente hacen. El propósito de estas observaciones es ver como pasan los niños el tiempo mientras están bajo cuidado. Yo voy a estar observando a las actividades de (CHILD), y por lo tanto, quizás tendré que salir y entrar del (aula/cuarto). Trataré de no interrumpir. Si Ud. (ignora/pasa por alto) mi presencia, espero que los niños harán lo mismo.

A. OBSERVATION CHECKLIST

- A1. IS THERE GARBAGE, LITTER, OR BROKEN GLASS IN THE STREET OR ROAD, ON THE SIDEWALKS, OR IN YARDS?
- ALMOST NONE 01
 - YES, BUT NOT A LOT 02
 - YES, QUITE A BIT 03
 - YES, ALMOST EVERYWHERE..... 04
 - NOT OBSERVED..... -1
- A2. HOW WOULD YOU RATE THE GENERAL CONDITION OF MOST OF THE BUILDINGS ON THE BLOCK/OR WITHIN 100 YARDS OF THE PROVIDER?
- WELL KEPT WITH GOOD REPAIR AND EXTERIOR SURFACE..... 01
 - FAIR CONDITION 02
 - POOR CONDITION WITH PEELING PAINT AND NEED OF REPAIR 03
 - BADLY DETERIORATED 04
 - NOT OBSERVED..... -1
- A3. IS THERE GRAFFITI ON THE BUILDINGS OR WALLS OF THE BUILDINGS ON THE BLOCK OR WITHIN 100 YARDS OF THE PROVIDER?
- NONE 01
 - YES, BUT NOT A LOT 02
 - YES, QUITE A BIT 03
 - YES, ALMOST EVERYWHERE..... 04
 - NOT OBSERVED..... -1
- A4. ARE THERE VACANT, ABANDONED, OR BOARDED-UP BUILDINGS, ON THE BLOCK OR WITHIN 100 YARDS OF THE PROVIDER?
- NO 01
 - YES, ONE BUILDING FITS THIS DESCRIPTION..... 02
 - YES, 2-3 BUILDINGS FIT THIS DESCRIPTION 03
 - YES, 4 OR MORE BUILDINGS FIT THIS DESCRIPTION 04
 - NOT OBSERVED..... -1

A5. ARE THERE ABANDONED VEHICLES ON THE BLOCK OR WITHIN 100 YARDS OF THE PROVIDER?

- NO 01
- ONLY ONE..... 02
- 2-3 03
- 4 OR MORE 04
- NOT OBSERVED..... -1

A6. HOW WOULD YOU RATE THE CONDITION OF THE STREET IN FRONT OF PROVIDER?

- VERY GOOD—RECENT RESURFACING, SMOOTH..... 01
- MODERATE—EVIDENCE KEPT IN GOOD REPAIR 02
- FAIR—MINOR REPAIRS NEEDED, BUT NOT ROUGH SURFACE..... 03
- POOR—POTHoles AND OTHER EVIDENCE OF NEGLECT..... 04

A7. DOES THE ENVIRONMENT IMMEDIATELY OUTSIDE PROVIDER (YARD, PATIO, ENTRYWAY OR PORCH AND STAIRS) HAVE ANY OF THE FOLLOWING?

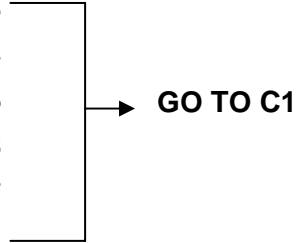
	YES	NO	NOT OBSERVED
A. UNLIT ENTRANCE OR STAIRWAY	01	00	-1
B. BROKEN STEPS	01	00	-1
C. BROKEN GLASS OR BROKEN TOYS	01	00	-1
D. LARGE DITCHES	01	00	-1
E. ALCOHOL OR DRUG PARAPHERNALIA	01	00	-1
F. STREWN GARBAGE/LITTER	01	00	-1

A8. DOES THE EXTERIOR OF THE BUILDING HAVE ANY OF THE FOLLOWING? (Consider condition of walls, paint, windows, lights, extent of needed repairs, and cleanliness.)

	YES	NO	NOT OBSERVED
A. PEELING PAINT, NEEDS PAINT JOB	01	00	-1
B. CRUMBLING OR DAMAGED WALLS	01	00	-1
C. BROKEN OR CRACKED WINDOWS	01	00	-1

A9. HOW WOULD YOU BEST DESCRIBE THE HOME OR BUILDING?

- CENTER—SEPARATE BUILDING OR STOREFRONT 01
 - APARTMENT BUILDING 02
 - ONE FAMILY (DETACHED) HOME 03
 - TWO FAMILY HOME, DUPLEX..... 04
 - MOBILE HOME, TRAILER..... 05
 - ROW HOUSE, TOWNHOUSE..... 06
 - OTHER (SPECIFY)..... 07
-



B. COMMON AREAS

FOR THESE QUESTIONS CONSIDER THE ENTRANCE, FOYER AND HALLWAYS OF THE BUILDING OR CENTER.

B1. DO THE INTERIOR COMMON AREAS OF THE BUILDING (*EXAMPLES: ENTRANCE, FOYER, HALLWAYS*) CONTAIN **OPEN CRACKS OR HOLES** IN WALLS OR CEILING?

- YES 01
- NO 00
- NOT OBSERVED -1

B2. DO THE INTERIOR COMMON AREAS OF THE BUILDING (*EXAMPLES: ENTRANCE, FOYER, HALLWAYS*) CONTAIN **HOLES IN FLOOR?**

- YES 01
- NO 00
- NOT OBSERVED -1

B3. DO THE INTERIOR COMMON AREAS OF THE BUILDING (*EXAMPLES: ENTRANCE, FOYER, HALLWAYS*) CONTAIN **BROKEN PLASTER OR PEELING PAINT** OVER 1 SQUARE FOOT?

- YES 01
- NO 00
- NOT OBSERVED -1

B4. DO THE INTERIOR COMMON AREAS OF THE BUILDING (*EXAMPLES: ENTRANCE, FOYER, HALLWAYS*) CONTAIN **EXPOSED WIRES?**

- YES 01
- NO 00
- NOT OBSERVED -1

C. INTERIOR OF BUILDING

C1. ARE THERE ANY **BROKEN WINDOWS OR CRACKED WINDOWPANES?**

YES 01
NO 00
NOT OBSERVED..... -1

C2. IS THE **WIRING OPEN AND EXPOSED?**

YES 01
NO 00
NO ELECTRICAL WIRING -4
NOT OBSERVED..... -1

C3. DOES THE HOUSING UNIT/CENTER CONTAIN **OPEN CRACKS OR HOLES IN WALLS OR CEILING?**

YES 01
NO 00
NOT OBSERVED..... -1

C4. DOES THE HOUSING UNIT/CENTER CONTAIN **HOLES IN FLOOR?**

YES 01
NO 00
NOT OBSERVED..... -1

C5. DOES THE HOUSING UNIT/CENTER CONTAIN **BROKEN PLASTER OR PEELING PAINT OVER 1 SQUARE FOOT OR MORE?**

YES 01
NO 00
NOT OBSERVED..... -1

C6. IS INSIDE OF HOME/CENTER **DARK?** (*EXAMPLES: CLOSED DRAPES IN DAYTIME; POOR LIGHTING*)

YES 01
NO 00
NOT OBSERVED..... -1

C7. IS INSIDE OF HOME/CENTER **OVERCROWDED**? (EXAMPLES: many people in a very small space, difficult to find a private place to interview respondent, frequent interruptions and difficult for child too find a place to play or for people to avoid bumping into each other)

YES 01
NO 00
NOT OBSERVED..... -1

C8. ARE ALL VISIBLE ROOMS NOTICEABLY **CLUTTERED**? (EXAMPLES: visible rooms are messy or are cluttered with clothes, toys all over, children's schoolwork, shoes and socks, other objects)

YES 01
NO 00
NOT OBSERVED..... -1

C9. ARE ALL VISIBLE ROOMS **DIRTY OR NOT REASONABLY CLEANED**? (EXAMPLES: trash strewn around, dirty dishes in kitchen, floor, cubbies, table tops, and furniture have not been cleaned or dusted fairly recently)

YES 01
NO 00
NOT OBSERVED..... -1

C10. IS INSIDE **ENVIRONMENT UNSAFE** FOR YOUNG CHILDREN? ANSWER "YES" IF ONE OR MORE POTENTIALLY DANGEROUS HEALTH OR STRUCTURAL HAZARDS. (EXAMPLES: frayed electrical wires, mice or rats, broken glass, poisons, falling plaster, broken stairs, peeling paint, cleaning materials left out, flames and heat within reach of young children)

UNSAFE 01
SAFE 00
NOT OBSERVED..... -1

C11. DID YOU OBSERVE ANY CHILD'S **ARTWORK OR PHOTOGRAPHS OF HOUSEHOLD CHILDREN ON DISPLAY** IN THE HOME (EXAMPLES: ARTWORK OR PHOTOS ON REFRIGERATOR OR ON WALLS)

NO ARTWORK/PICTURES 01
ARTWORK/PICTURES..... 00
NOT OBSERVED..... -1

C12. **IS THIS OBSERVATION FOR A FAMILY-BASED PROVIDER OR CENTER?**

- FAMILY-BASED 01
- CENTER 02 → **GO TO SECTION D**

C13. **DOES THE HOUSE OR APARTMENT HAVE AT LEAST 100 SQUARE FEET OF LIVING SPACE PER PERSON?** (*This is roughly a 10X10 room*)

- LESS THAN 100 SQUARE FEET 01
- AT LEAST 100 SQUARE FEET 00

C14. **HOW NOISY IS THE HOUSE OR APARTMENT?** *Consider the sounds of television, shouts of children, radio, etc.*

- VERY NOISY—HARD TO HEAR CONVERSATIONS 01
- SOMEWHAT NOISY 02
- NOT VERY NOISY 03

C15. **HOW MUCH STREET NOISE COMES INTO THE HOUSE OR APARTMENT FROM THE OUTSIDE?** *Consider trains, cars, people, music.*

- VERY NOISY—HARD TO HEAR CONVERSATIONS 01
- SOMEWHAT NOISY 02
- NOT VERY NOISY 03

D. HOME SCALE

INTERVIEWER: ANSWER ON THE BASIS OF YOUR PERSONAL OBSERVATIONS OF THE HOME/CENTER AND THE FOCUS PROVIDER/FOCUS CHILD INTERACTIONS AT THE TIME OF YOUR VISIT.

- D1. PROVIDER **HAD 2 CONVERSATIONS WITH CHILD**. (*needs to be two separate conversations. Conversations includes asking questions, talking about things of interest. For infants, the provider can talk, have eye contact with the child and have the child attend to the talk.*)

CONVERSED 01

DID NOT CONVERSE 02

- D2. PROVIDER **RESPONDED VERBALLY** TO CHILD'S VOCALIZATIONS (*sounds or words, important point is that focus provider did not ignore child. If child never vocalized to focus provider: Score as automatic "did not respond"*).

RESPONDED 01

DID NOT RESPOND..... 00

- D3. PROVIDER **TOLD CHILD THE NAME OF AN OBJECT OR PERSON** DURING VISIT (*provider's sensitivity to child's search for names of objects around (him/her)—need not be as direct as "this is an apple", but the focus provider's statement must clearly label some object or person, not just use the word in a sentence. For example, "go get x" should not count because focus provider is not teaching child the name of anything.*)

INTERVIEWER: INCLUDE BABY WORDS AS "01".

TOLD CHILD 01

DID NOT TELL CHILD 00

- D4. PROVIDER USES **CORRECT GRAMMAR AND PRONUNCIATION**. (*Speech was distinct and audible. Score positive if you could understand and communicate with focus provider—do not score negatively for dialects. Not distinct includes slurred, mumbling or trouble articulating words or severe speech impediments.*)

CORRECT/DISTINCT 01

NOT CORRECT/DISTINCT 00

D5. PROVIDER **INITIATED VERBAL EXCHANGES** WITH VISITOR (*Should have spontaneously made a few comments or asked a few questions or been a little wordy at times.*)

INITIATED 01

DID NOT INITIATE 00

D6. PROVIDER USES **COMPLEX SENTENCE STRUCTURE AND VOCABULARY** (*Refers to characteristic speech pattern during visit—if typically spoke in one word sentences or headshakes, score as “00”.*)

COMPLEX 01

NOT COMPLEX 00

D7. PROVIDER SPONTANEOUSLY **PRAISED CHILD AT LEAST TWICE** (*Any achievement noted with pride (e.g., can dress himself, has a good disposition. Important that you read the focus provider’s affect, sometimes negative comments are really positive remarks.)*)

INTERVIEWER: PRAISE MAY BE DIRECT TO CHILD OR TOLD TO YOU ABOUT CHILD.

PRAISED 01

DID NOT PRAISE 00

D8. PROVIDER’S VOICE CONVEYS **POSITIVE FEELINGS** TOWARD CHILD (*was tone of voice animated, or flat and/or irritated?*)

POSITIVE 01

NOT POSITIVE 00

D9. PROVIDER **CARESSED OR KISSED** CHILD AT LEAST ONCE (*e.g., can include hugged, stroked hair, patted arm or leg, affectionately reaching out, blowing a kiss.*)

CARESSED 01

DID NOT CARESS 00

D10. PROVIDER **HELPS CHILD DEMONSTRATE SOME ACHIEVEMENT** DURING VISIT. (*For example, tried to get the child to do something to impress the visitor or to show off.*)

HELPED DEMONSTRATE ACHIEVEMENT 01

DID NOT HELP DEMONSTRATE ACHIEVEMENT 00

D11. PROVIDER **DID NOT SHOUT AT CHILD** (*e.g., did not raise voice above level required by distance between focus provider and child*).

INTERVIEWER: DO NOT CODE FOCUS PROVIDER SHOUTING TO WARN CHILD OF DANGER OR STOP CHILD FROM BEING IN DANGER AS “SHOUTED.”

DID NOT SHOUT 01

SHOUTED 00

D12. PROVIDER **DID NOT EXPRESS ANNOYANCE WITH OR HOSTILITY TOWARD CHILD** (*Should score as “00” if focus provider complained about child in a manner that did not suggest an affectionate joke. Could have told child to stop doing something several times and still receive a positive score if general tone was positive.*)

DID NOT EXPRESS ANNOYANCE 01

EXPRESSED ANNOYANCE 00

D13. PROVIDER **NEITHER SLAPPED NOR SPANKED** CHILD DURING THE VISIT (*If uncertain about a particular action, note child’s behavior—if [he/she] whimpered or cried or frowned score as “00.”*)

DID NOT SLAP 01

SLAPPED 00

D14. PROVIDER **DID NOT SCOLD OR CRITICIZE** CHILD DURING THE VISIT (*Provider made negative comment directly to child [e.g., “you are a bad boy/girl.”]*)

DID NOT SCOLD 01

SCOLDED 00

D15. PROVIDER **DID NOT INTERFERE OR RESTRICT** CHILD (*Restrictions can be verbal [“stop that”] as well as physical [slapped hand, took toy away, put crawling child in crib or play pen] do not count as negative action taken to prevent child from harming [him/her]self.*)

DID NOT INTERFERE 01

INTERFERED 00

E. POST VISIT RATING BY INTERVIEWER

E1. DURING THE ENTIRE VISIT, HOW AT EASE DID THE FOCUS PROVIDER APPEAR?

- VERY UNCOMFORTABLE..... 01
- SLIGHTLY ILL AT EASE..... 02
- MODERATELY COMFORTABLE 03
- COMPLETELY COMFORTABLE AND
AT EASE 04

E2. DURING THE ENTIRE VISIT, HOW DISRUPTIVE DO YOU THINK YOUR PRESENCE WAS?

- NOT AT ALL DISRUPTIVE 01
- MINIMALLY DISRUPTIVE 02
- MODERATELY DISRUPTIVE..... 03
- HIGHLY DISRUPTIVE 04

E3. DURING THE ENTIRE VISIT, HOW MUCH DID THE FOCUS CHILD TRY TO INTERACT WITH YOU?

- DIDN'T NOTICE YOU AT ALL..... 01
- A FEW GLANCES OR SMILES ONLY 02
- QUITE NUMEROUS GLANCES, SMILES,
VOCALIZATIONS 03
- PROLONGED WATCHING AND
NUMEROUS ATTEMPTS TO INTERACT 04

E4. RATE THE OVERALL POSITIVE RELATIONSHIP OF THE FOCUS PROVIDER WITH THE FOCUS CHILD.

- NO EVIDENCE OF A SPECIAL LOVING
RELATIONSHIP** 01
(NO SPECIAL ATTENTION, NO PREFERENCE BY CHILD FOR PROVIDER)
- HINTS OF A POSITIVE RELATIONSHIP** 02
(SOME DEVELOPING BUT MINIMAL)
- MODERATE POSITIVE RELATIONSHIP** 03
(NOT STRONG OR UNIFORMLY POSITIVE; AMBIVALENT)
- STRONG POSITIVE RELATIONSHIP** 04
- DON'T KNOW/NOT OBSERVED** -1

EXAMPLES OF POSITIVE = SOURCE OF COMFORT, SHARES EXPERIENCE, AFFECTIONATE, MUTUAL ATTENTIVENESS, CLOSE PHYSICAL CONTACT, RESPONSIVENESS.

E5. RATE THE ADULT- OR CHILD-CENTEREDNESS OF THE CARE

- ADULT-CENTERED/INADEQUATE** 01
(CARE IS INADEQUATE OR BARELY ADEQUATE—STAFF
CONVENIENCE IS FOCUS)
- ADULT-CENTERED/ADEQUATE** 02
(CARE NOT MARKED BY SPECIAL GENTLENESS, RESPECT,
OR INTEREST IN CHILDREN, ADULT GOALS, DRIVE CARE)
- SOMETIMES/SOMEWHAT CHILD-CENTERED** 03
(SOMETIMES OR SOME CHILDREN GET GOOD CARE)
- CONSISTENTLY CHILD-CENTERED** 04
(ADULT TALK ABOUT CHILDREN, CARE AIMED AT IMPROVING
CHILD'S COMFORT, GENTLENESS, EFFORT TO PROVIDE
NURTURING AND SIMULATING EXPERIENCES)

E6. YOUR OVERALL IMPRESSION OF THE CHILD CARE

- EXCELLENT 05
- GOOD 04
- FAIR 03
- POOR 02
- TERRIBLE 01