QUALITY FOR WHOM?
Supporting Culturally and Linguistically Diverse Children and Workers in Early Childhood Quality Rating and Improvement Systems

By Julie Sugarman and Maki Park

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Executive Summary

With increasing numbers of immigrant and refugee families settling outside the handful of states that have traditionally been home to the majority of newcomers, the children of immigrants now make up more than 10 percent of the young child population (ages 0 to 5) in 37 states plus the District of Columbia. Across the United States, about one-third (32 percent) of young children live in homes where a language other than English is spoken. Access to quality early childhood education and care (ECEC) is particularly important for these Dual Language Learners (DLLs) and for children from immigrant families, as such programs can help build language and literacy skills and expose the children and their families to American culture and norms.

As states seek to utilize QRIS to create a unified vision of quality services, it is critical that the needs of culturally and linguistically diverse families be recognized.

At the same time, there has been a push among policymakers and education advocates to raise standards of care with the aim of providing consistently high-quality ECEC services to all children. Quality Rating and Improvement Systems (QRIS) are gaining prominence across a majority of states as an organizing framework for state oversight of the wide array of services available. Such systems work alongside state licensing requirements and a variety of accreditation systems by classifying ECEC programs along a continuum of quality, providing critical information to parents and other stakeholders about individual programs and the quality of ECEC in the state more generally. Participation in QRIS is mandatory in several states either for some or for all providers, especially those that receive public funding, and systems support participating providers with incentives such as training and additional funding. As states seek to utilize QRIS to create a unified vision of quality services, significantly affecting almost every aspect of ECEC policy and practice, it is critical that the needs of culturally and linguistically diverse (CLD) families be recognized and included in design and implementation efforts.

Immigrants make up a significant proportion (18 percent) of the ECEC workforce, and an even greater share of workers (23 percent) speaks a language other than English. These workers bring important skills to the ECEC field, and are key to helping children build skills in home languages and English and to bridging the divide between home and school cultures. However, immigrants are disproportionately concentrated in lower-skilled and lower-paid ECEC sectors, raising concerns about equity and potential barriers to advancement in the field, such as a lack of English proficiency and low levels of formal education.

Thus while immigrant and other CLD providers are well placed to serve the increasingly diverse young child population, such barriers may make it difficult for these workers to achieve higher ratings in QRIS. These systems presume a level of linguistic, financial, and systems-knowledge resources that not all providers have, particularly those that serve lower socioeconomic communities, and may thus unfairly penalize CLD workers for cultural differences or challenges unrelated to program quality. When those barriers prevent providers from participating in QRIS at all, they could be pushed out of the field entirely, depriving communities of the much needed cultural and linguistic skills they offer. Both the design and the implementation of QRIS can affect whether CLD communities are equitably served and supported in ECEC systems.
A. Designing QRIS Standards that Support Diverse Programs

Quality standards form the basis of QRIS design and architecture, defining a state’s vision of what constitutes a high-quality program. An analysis of QRIS rating documents from 11 sample states provides a variety of examples of indicators that reference language, culture, and/or diversity. These indicators have the potential to more accurately reflect CLD program quality and communicate valuable information to CLD families. Thematically grouped into six categories, these indicators are summarized in Table 1.

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<thead>
<tr>
<th>Category</th>
<th>Indicators</th>
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<tr>
<td>Culturally Responsive Environment and Practices</td>
<td>Curriculum, instruction, and/or activities are culturally responsive/appropriate</td>
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<td></td>
<td>Materials (e.g., books, posters) reflect diversity</td>
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<td></td>
<td>Screenings and assessments are culturally and linguistically appropriate</td>
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<td></td>
<td>Instruction fosters interactions between English learners and English-proficient students</td>
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<td></td>
<td>Instruction supports stages of second language acquisition</td>
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<td></td>
<td>Program collects and uses information related to home cultures</td>
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<td>Diversity Policies</td>
<td>Policy on commitment to staff diversity (ensuring that staff reflect the community)</td>
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<td></td>
<td>Policies on respect and value of culture</td>
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<td></td>
<td>Admissions policy that promotes awareness and respect for differences, including language and culture</td>
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<td></td>
<td>Policy to conduct self-assessment on cultural competence/appropriateness</td>
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<td></td>
<td>Policy on support for native-language and English development</td>
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<tr>
<td>Communication to Families and Staff</td>
<td>Oral and written communication in a language families understand (cultural appropriateness of communication also indicated in some states)</td>
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<td></td>
<td>Information about community resources in appropriate languages</td>
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<td></td>
<td>Culturally responsive information on health and safety</td>
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<td></td>
<td>Information about the program available in languages understood by prospective families</td>
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<td></td>
<td>Program updates to staff in their preferred language</td>
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<td>Bilingual Staff and Language Use</td>
<td>Staff speak children’s home languages</td>
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<td></td>
<td>Program makes efforts to hire staff that reflect the community</td>
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<td></td>
<td>Staff greet children and families in home languages</td>
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<td></td>
<td>Children encouraged to use home languages</td>
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<td></td>
<td>Program collects language information upon enrollment</td>
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<tr>
<td>Family and Community Engagement</td>
<td>Families share aspects of their language and culture in the program</td>
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<td></td>
<td>Family engagement strategies are inclusive</td>
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<td>Staff participate in community activities related to linguistic/cultural groups served by the program</td>
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<td></td>
<td>Linguistically diverse families are engaged in program development and improvement</td>
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<tr>
<td>Professional Development (PD)</td>
<td>PD on working with diverse children and families</td>
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<tr>
<td></td>
<td>PD on supporting second-language acquisition and/or dual language learners</td>
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Ultimately, while the inclusion of indicators relevant to CLD populations in QRIS standards is important, ensuring that such indicators accurately reflect program quality is equally critical. In many instances, QRIS provide little or vague guidance regarding the types of evidence that providers must furnish to receive points. Such imprecision can be particularly problematic for indicators meant to reward CLD practices as many are difficult to objectively measure or quantify and are subject to competing interpretations. Also of concern is the fact that CLD-related indicators are often merely one among several areas in which programs can perform well to earn points, meaning that some programs obtain high ratings without attending to language and culture at all. Similarly, when QRIS offer credit for CLD practices only at higher rating levels, this implicitly places a lower value on these program elements.

In spite of the presence of indicators specifically geared toward gauging services provided to CLD children and families, it is also important to acknowledge that QRIS instruments may in other ways not appropriately measure quality for DLLs and other CLD children. As an example, class size guidelines that are based on norms for native English speakers may not reflect the specific needs of language learners who often learn best in smaller groups. Few states have, as of yet, reviewed the validity of their QRIS to assess how all standards affect CLD providers and families.

Finally, the measurement systems some QRIS use to evaluate ECEC classroom and program practice, such as the Environmental Rating Scales (ERS) and Classroom Assessment Scoring System (CLASS), may not appropriately judge the quality of CLD classrooms. This can occur, for instance, when such systems fail to take cross-cultural differences in interpersonal relationships and behavior into account (e.g., that eye contact is a sign of respect in some but not all cultures). Recently developed instruments such as the Classroom Assessment of Supports for Emergent Bilingual Acquisition (CASEBA) or the Early Language and Literacy Classroom Observation Addendum for Dual Language Learners (ELLCO-DLL) that seek to assess quality with DLL-specific measures may more accurately evaluate a program's effectiveness in working with this population.

B. Implementing QRIS in Diverse Communities

In addition to standards and systems development, the implementation of QRIS represents an equally important opportunity to meet the needs of CLD providers and families. QRIS administrators and technical assistance providers can focus on these needs through outreach to prospective participants, technical assistance on enrollment and program improvement, professional development for staff, and ongoing stakeholder engagement. In the absence of targeted strategies, however, many states struggle to meet the needs of CLD providers and the children they serve.

A lack of translated materials represents one of the most significant challenges for Limited English Proficient (LEP) practitioners attempting to access QRIS materials and information. Strict enrollment deadlines can also disproportionately exclude CLD practitioners who may need additional time to register if they lack experience navigating bureaucratic systems. Interviews conducted for this study also revealed that technical assistance providers often struggle to adequately support practitioners who lack English proficiency and/or computer literacy. States and the providers they work with can mitigate some of these challenges by offering technical assistance and training in a manner that is linguistically and culturally relevant and conducted by trainers who are themselves from diverse communities; however, few states have prioritized such efforts.

Overall, while this study reports several innovative initiatives and strategies to assist CLD practitioners in accessing and fully participating in QRIS, such efforts often target certain provider populations or program types but are generally not supported systemwide. As a result, diverse practitioners—particularly those who work in relatively isolated home-based settings—may be less likely to be included in QRIS efforts.
C. Recommendations

The following top-line recommendations point to a number of strategies policymakers can use to support CLD practitioners and providers who may face obstacles in accessing and improving their rating level under the state QRIS, as well as to appropriately reward programs that provide culturally and linguistically responsive services.

1) **Ensure that QRIS standards explicitly support CLD children and families, reflect cross-cultural variation, and value the skills of CLD practitioners.**
   - Policymakers can review their state QRIS rubrics to ensure they include indicators of quality for program elements that contribute to successful outcomes for CLD children and families.
   - At the same time, states can review all QRIS indicators and the criteria used to measure alignment with them to ensure they are applicable to ECEC services that enroll CLD children.
   - In order to encourage immigrant and refugee individuals to enter or remain in the ECEC workforce, policymakers may structure QRIS indicators to reward programs for hiring workers who have linguistic and cultural skills.
   - States may consider creating a subscore for QRIS ratings based on select CLD-relevant indicators in order to better communicate to immigrant and refugee families which programs may best meet their needs.

2) **Ensure that the systems built around QRIS ratings are fair and equitable.**
   - States can provide training for ECEC practitioners and program evaluators to develop a common, cross-culturally appropriate set of definitions of the constructs measured by QRIS indicators (e.g., developmentally appropriate, culturally responsive).
   - Program observers who are rating adult/child interactions and instructional quality must be proficient in the language(s) being spoken or be provided with an interpreter.
   - QRIS administrators may find it useful to work with community partners to offer technical assistance and professional development opportunities that address the needs of CLD families.
   - As new observation tools for identifying quality environments for DLLs (such as CASEBA and ELLCO-DLL) are developed and validated by research, they can be adopted as alternative or supplementary measures to general tools such as CLASS or ERS.

3) **Provide sufficient resources to organizations that conduct outreach to and technical assistance for programs enrolling in QRIS and ensure that enrollment processes are equally accessible to all providers.**
   - Technical assistance providers need substantial time and financial resources to work with practitioners who are not yet licensed, are not familiar with U.S. business practices, have limited English proficiency, or do not have administrative managers to help gather the documentation required of both home- and center-based providers.
   - In order to ensure that all providers have equal access to QRIS, all documents related to enrollment and rating must be translated into commonly spoken languages, with jargon explained in culturally and linguistically appropriate ways.
   - States could consider reimbursing programs for the cost of translating materials (such as parent handbooks) into English.
   - States could consider contracting with companies that can verify foreign transcripts and certifications so that providers can receive credit for work completed outside of the United States.
Agencies and organizations that provide services to ECEC practitioners might find it helpful to partner with community-based cultural organizations to more effectively serve immigrant and other CLD providers.

4) Ensure that incentives for providers are commensurate with the requirements of participating in QRIS, and that those requirements do not disproportionately burden CLD providers.

In systems where QRIS participation is mandatory for all providers or for those who accept tuition subsidies, feedback from technical assistance providers and ECEC workers could help policymakers understand whether burdensome requirements are pushing practitioners into the unregulated market.

States should create clear pathways for low-educated and/or LEP ECEC workers seeking training and education aligned with QRIS.

States can ensure that practitioners are appropriately rewarded for costly and time-intensive education and training that are critical to meeting quality improvement objectives by introducing workforce supports, including scholarships and wage supplements.

5) Ensure that decisionmakers understand and address the needs of CLD families and providers when reviewing and revising QRIS standards.

The agency tasked with oversight of the QRIS rating system should create data systems to gather information on the cultural and linguistic background of practitioners and children. That information can then be used in annual reviews of QRIS participation rates and trends in rating levels.

This agency can also establish a mechanism to collect input on an ongoing basis from stakeholders, including representatives from diverse and underserved communities, to inform revision and review processes.

As states undergo the process of expanding, revising, or refining their QRIS, they face an important opportunity to examine ways in which these systems can take a more intentional approach to serving culturally and linguistically diverse ECEC providers and families. QRIS represent a critical entry point to the larger state early childhood system for many programs, and ensuring that these systems are relevant and responsive to the needs of diverse communities represents an important step toward integrating principles of equity and inclusion throughout all aspects of ECEC.

I. Introduction

The U.S. young child population has become increasingly diverse in recent decades—not just in states where immigrant and refugee families have traditionally settled, but across the country. Children of immigrants and refugees made up 25 percent of the U.S. population under age 6 in 2015, a notable increase from 14 percent in 1990.1 An even larger share of the U.S. young child population, 32 percent, lived in homes where a language other than English was spoken.2 The number of states with a relatively large share of children from immigrant families has also increased; while such children made up more

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than 10 percent of the young child population in 15 states plus the District of Columbia in 1990, by 2015 that was the case in 37 states and the District.³

Access to high-quality early childhood education and care (ECEC) is especially crucial for these children, for whom effective programs can lead to academic success and reduce achievement gaps.⁴ For Dual Language Learners (DLLs)—young children who speak a language other than English at home⁵—quality ECEC can help build language and literacy skills in the home language and prepare for English language and literacy development that will continue throughout their education.⁶ ECEC programs can also expose young children and families to American culture and norms in a welcoming environment before they enter the public school system, where personalized support is often less readily available.⁷

Meeting the needs of the increasingly diverse young child population and their families requires ECEC programs to be both linguistically and culturally responsive. Immigrant workers, who are well placed to meet this need, have a significant presence in the ECEC workforce; during the period 2011–13, 18 percent of ECEC workers were immigrants, compared to 17 percent of the total U.S. workforce, and 23 percent of ECEC workers spoke a language other than English at home.⁸ These workers bring valuable linguistic skills and cultural knowledge that can help programs better serve children and families in diverse communities.

Given the wide-ranging implications of QRIS, it is essential that the needs of ... diverse children and families be prioritized.

Nevertheless, for immigrant workers in this field, employment does not necessarily result in equity. Immigrants are over-represented in the lower-skilled and lower-paid sectors of the ECEC workforce.⁹ Many have limited English proficiency and/or lower levels of formal education, both of which can make it difficult to access the advanced training and credentials needed to obtain higher-paying positions.

Within the ECEC field, quality rating and improvement systems (QRIS) have emerged over the last 20 years as an organizing framework for improving outcomes for children and families by aligning policy and practice into a unified vision of high-quality services. This vision is implemented through a variety of state-level systems, such as rules on licensing and teacher qualifications, education and training priorities, and regulations on subsidy eligibility. Given the wide-ranging implications of QRIS, it is essential that the needs of culturally and linguistically diverse (CLD) children and families be prioritized in design and implementation efforts.

Considerable research has identified the elements of high-quality ECEC programs that serve students well overall—including appropriate class and group sizes, teacher competencies, and parental engagement—and this knowledge forms the foundation for QRIS that move programs from lesser to greater alignment with effective practices. However, few research studies have focused on what program elements could

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³ MPI analysis of data from the U.S. Census Bureau 2015 ACS. See MPI Data Hub, “Children in U.S. Immigrant Families.”
⁵ Because states include different types of programs in their Quality Rating Improvement Systems (QRIS), this report uses the term Dual Language Learner (DLL) to refer to a broad group of young children rather than to those within a specific age range.
⁸ These figures are based on pooled U.S. Census Bureau 2011–13 ACS data, analyzed in Park, McHugh, Zong, and Batalova, Immigrant and Refugee Workers.
⁹ Ibid.
define high quality for DLLs, such as how to develop first- and second-language skills and communicate effectively with CLD parents. As a result, researchers have only begun to examine whether QRIS are valid and reliable indicators of quality ECEC for CLD children—a topic that will be discussed in Section II. The main focus of this report is, however, how QRIS and the processes built up around them are accessed by and responsive to CLD providers. These workers are key to helping DLLs build skills in home languages and English, building bridges between home and school cultures, and fostering trusting and respectful relationships with families. It is therefore critical to understand how QRIS affect CLD workers and providers and, in doing so, potentially enhance or undermine the development of ECEC that help DLLs effectively build the desired academic and personal skills.

The approaches taken by some states to raise the quality of ECEC programs have exposed a number of ways in which CLD children, families, and workers are particularly vulnerable to exclusion or marginalization within the sector. For example, seeking to increase quality by raising the level of qualifications or training workers are required to have could disproportionately disenfranchise lower educated and Limited English Proficient (LEP) workers, pushing them into the unregulated child-care sector—and, with them, families who rely on their bilingual and culturally competent care. This is particularly concerning at a time when the demand for such care is growing.

Overall, there are two primary ways QRIS risk disadvantaging CLD providers and workers. First, CLD providers may have greater difficulty achieving higher ratings due to cultural or other barriers unrelated to program quality and may not be appropriately rewarded for valuable cultural, linguistic, and other strengths. As a result, their programs could be unfairly penalized or unable to benefit from financial and other rewards, despite the value they bring the children and families they serve. Second, they may be unable to access and participate in QRIS at all, pushing them into the unregulated sector or out of the field entirely. In this scenario, the ECEC field loses valuable cultural and linguistic diversity, and the gap in quality between formal and informal programs will likely continue to grow—to the detriment of CLD providers and young children.

This report aims to provide an overview of these two sets of issues and their potential to affect CLD practitioners and families. First, the report explores standards that can capture the strengths of CLD practitioners as well as program elements that are valuable to CLD families, based on a review of select QRIS in states that have a diverse young child population. This is followed by a discussion of implementation issues, drawn from interviews with administrators, advocates, and practitioners who shared their insight on how the rollout of QRIS is affecting diverse communities. Finally, the report offers recommendations for ways states can ensure that QRIS meaningfully reflect and equitably serve CLD communities.

**Overview of QRIS Function and Design**

QRIS work in tandem with state licensing requirements to classify ECEC programs along a continuum of quality practice. Licensure represents a base level of quality; licensed ECEC programs demonstrate compliance with basic health and safety regulations, teacher qualifications, and teacher/student ratios. States began to develop quality rating systems (QRS) in the 1990s to increase the number of programs that could meet accreditation standards—a higher standard of quality than licensure alone. Behind the push for QRS was the theory that the ECEC arena could operate as a choice market; quality ratings could help parents compare programs and make informed decisions, and the competitive market would reward higher-quality programs. However, the high cost of ECEC meant that not all parents could exercise choice based solely or even primarily on quality. To widen the selection of high-quality programs, states began to
prioritize improvement, moving from QRS to QRIS. In recent years, a push at the federal level has made QRIS development a priority for many states. QRIS were a centerpiece of federal Race to the Top—Early Learning Challenge grants in 2011 through 2013 as a means of incentivizing states to design, implement, and improve their ECEC systems. Federal Preschool Development and Expansion Grants also required states to have or develop a QRIS.

As of January 2017, 38 states and the District of Columbia had statewide QRIS, and three states—California, Florida, and Kansas—had individual counties or localities that had implemented QRIS. Pilot projects were underway in Alabama, the Commonwealth of the Northern Mariana Islands, Puerto Rico, and the Virgin Islands. In addition, Alaska, American Samoa, Connecticut, Guam, Hawaii, Missouri, South Dakota, West Virginia, and Wyoming were in planning stages. Only Mississippi had no QRIS and had not begun to develop one.

QRIS are intended to have a broad reach and are used in many states to evaluate quality across ECEC settings, including Head Start, public preschool, family and home care, center-based programs, and school-age care. While some of these program types incorporate their own standards regarding CLD children and providers, QRIS standardize requirements across these settings— theoretically ensuring quality for all children, regardless of the program in which they are enrolled. Some states, however, have developed separate QRIS standards for different types of programs, and other states only have standards pertinent to some program types and not others. QRIS also have a broad reach in that they define quality practice for a variety of program functions, such as technical assistance and training, financial support, learning standards, relationships with institutes of higher education, resource and referral, accountability, and subsidy reimbursement.

All QRIS programs share five common elements:

- program standards (evidence-based policies and practices organized as two or more levels of quality ratings);
- training and technical assistance offered by the state and/or by agency, community-based organization, or university partners;
- financial support in the form of incentives to attain higher ratings or funds for practitioner education and training;
- quality assurance and monitoring through assessment of participating ECEC providers; and
- consumer education on quality ECEC practice and publication of program ratings.

13 These 38 states are: Arizona, Arkansas, Colorado, Delaware, Georgia, Idaho, Illinois, Indiana, Iowa, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Utah, Vermont, Virginia, Washington, and Wisconsin.
15 For example, Head Start has standards for cultural and linguistic responsiveness, state early learning guidelines often address the needs of culturally and linguistically diverse (CLD) children, and several states have incorporated requirements related to teaching CLD children in teacher certification programs.
16 Child-care resource and referral agencies serve as a point of access for parents and providers to seek information about early childhood education and care (ECEC) resources in their communities.
17 National Center on Child Care Quality Improvement, QRIS Resource Guide.
In almost all cases, QRIS are administered under state oversight, and states contract with institutes of higher education and nongovernmental organizations for functions such as outreach and enrollment, training and technical assistance, resource and referral, and monitoring and rating of programs. States also frequently contract with such organizations for validation studies and other research.

In terms of how each system rates programs, some states use a building-block approach, in which programs must demonstrate alignment with all standards in a certain level to be rated at that level. Others use a points system in which programs earn points for meeting individual standards, and these points are tallied up to determine the rating level. Still other states use a combination of the two approaches. Regardless of which approach is used, most states allow programs to demonstrate compliance in a range of ways, especially in the areas of professional development and family engagement. The number of levels that differentiate higher- and lower-quality programs also varies from state to state (generally between two and five). Much of the variation in how much effort is required to achieve each rung on the quality ladder stems from decisionmaker expectations for the characteristics of programs that fall into the very lowest and highest levels, as well as how much support and guidance practitioners need to increase from level to level. As these systems rely on external actors to evaluate program quality (through direct observation and/or document review), developers are also cognizant of how much different data-collection approaches cost—more elaborate systems are generally more time- and resource-intensive for both practitioners and raters than those with fewer or less complex indicators. Ideally, QRIS developers ensure that the indicators included and given the most weight represent the elements of policy and practice that are most closely aligned to high quality, as practitioners will focus their improvement efforts on the elements for which they will be most rewarded.

Once a QRIS has been established, states incentivize program participation through various means. Some states make participation mandatory as a prerequisite to receiving subsidy payments and/or offer participating programs access to special services, such as quality improvement technical assistance and professional development. Based on a study of 39 QRIS, one study found that almost all systems provide some financial incentives to participating programs; these can include higher subsidy reimbursement rates based on rating level (59 percent of systems), grants to proactively fund improvements (41 percent), quality bonuses to reward demonstrated progress (54 percent), financial support for training or coursework (51 percent), and access to other subsidies and free materials/supplies (38 percent). Yet despite incentives, many programs may be reluctant or unprepared to participate. Achieving a quality rating can be an expensive and time-intensive process—especially for programs entering the QRIS for the first time. As a result, participation in QRIS varies considerably across states, with some participation rates—particularly where QRIS are in the early stages of implementation—in the single digits. Generally speaking, even in states that have more comprehensive and well-established QRIS, participation rates are much lower for family-based child-care programs, where the majority of CLD providers work, than for center-based programs.

II. QRIS Indicators that Support Diversity

Of the five elements that make up a QRIS, quality standards are often the most visible. These standards define the state or local vision of program quality, from an acceptable minimum level through exemplary practice. The form and content of standards vary widely from system to system on a number of characteristics, including what indicators are included (such as health and safety, curriculum, and

18 Ibid.
20 This study sample included 36 states plus three regional QRIS in Florida.
21 Holod, Faria, Weinberg, and Howard, "Moving up the Ladder."
23 Ibid.
learning environment); whether and how indicators are differentiated by ECEC setting (including center-based, family/home child care, and school-age care); and the level of specificity in rating rubrics and guidance. Some QRIS documents spell out in great detail what should be observable in program policy, administration, and practice, whereas others set indicators that align with existing mechanisms, such as licensing requirements, published observation rubrics (e.g., the Environmental Rating Scales, ERS), or accreditation standards.

While first-generation QRIS standards tended not to address race, culture, and language directly—though frameworks such as ERS and National Association for the Education of Young Children (NAEYC) accreditation do—over the last decade, many states have revised their QRIS to include standards explicitly related to serving CLD populations.24 In the coming years, states will have the opportunity to compare their QRIS to the 2016 update of the Head Start Program Performance Standards; these standards, which guide practices in federally funded Head Start programs, affirm the importance of native-language development, communication with children and families in a language they understand, and the need for training and community engagement to tailor services to the needs of the families they serve.25

Although QRIS are meant to represent a comprehensive vision of quality, it is important to note that accommodations for CLD practitioners and families may exist even in states that do not explicitly include them in QRIS program standards. According to 2015 state Child Care and Development Block Grant plans, support for CLD families was evident in 40 states that offered translated applications for child-care assistance and in 22 that accepted applications in a variety of locations convenient to communities. Additionally, 42 states reported having capacity to serve families in multiple languages. In terms of support for CLD providers, 44 states had bilingual caseworkers or translators and 35 offered training and technical assistance in multiple languages. When it came to the accessibility of written materials, 43 states provided translations for informational materials, 23 for health and safety requirements, 17 for contracts and other agreements, and 19 had websites in languages other than English.26

In light of the fact that a number of states are building their QRIS or have processes in place for regular review and revision, the analysis in this section offers decisionmakers a critical look at the variety of approaches that states and localities have taken to incorporate standards related to CLD issues.

A. **Examples of Diversity-Related Indicators**

This analysis of QRIS indicators that support CLD providers and families is based on an examination of a sample of state QRIS rating rubrics. The authors drew on two previously published papers to identify 18 states that asserted they had or intended to have QRIS standards related to DLLs.27 Among those 18 states, 11 were found to have at least one QRIS indicator explicitly related to DLLs.28 For these 11 states,
indicators that affirmed culture and diversity more generally (but did not target immigrant or DLL students specifically) were also considered.

The documents developed by these states evince a variety of indicators referencing language, culture, and diversity, and the authors have grouped these thematically into six areas. Table 2 summarizes the selected indicators, listing which state(s) addressed each topic and—where information was available—the types of evidence programs can furnish to receive credit for each practice (many states indicated several types of evidence that could be submitted for each indicator).

Table 2. Summary of QRIS Indicators Related to Cultural and Linguistic Diversity, Select States

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<tr>
<th>Indicator</th>
<th>State(s)</th>
<th>Evidence*</th>
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<tr>
<td><strong>Culturally Responsive Environment and Practices</strong></td>
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<tr>
<td>Curriculum, instruction, and/or activities are culturally responsive/appropriate</td>
<td>Georgia, Illinois, Maryland, New Mexico, New York, Wisconsin</td>
<td>Accreditation, ERS, lesson plans, program observation, sample materials, self-evaluation, student activity schedules</td>
</tr>
<tr>
<td>Materials (e.g., books, posters) reflect diversity</td>
<td>Maryland, Massachusetts, New Mexico, New York, Wisconsin</td>
<td>ERS, lesson plans, self-evaluation</td>
</tr>
<tr>
<td>Screenings and assessments are culturally and linguistically appropriate</td>
<td>New York</td>
<td>Self-evaluation</td>
</tr>
<tr>
<td>Instruction fosters interactions between English learners and English proficient students</td>
<td>New Mexico</td>
<td>Lesson plans</td>
</tr>
<tr>
<td>Instruction supports stages of second language acquisition</td>
<td>New Mexico</td>
<td>Not specified</td>
</tr>
<tr>
<td>Program collects and uses information related to home cultures</td>
<td>New Mexico, Wisconsin</td>
<td>Interview, lesson plans</td>
</tr>
<tr>
<td><strong>Diversity Policies</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Policy on commitment to staff diversity (ensuring that staff reflect the community)</td>
<td>New York</td>
<td>Self-evaluation</td>
</tr>
<tr>
<td>Policies on respect and value of culture</td>
<td>Michigan, Wisconsin</td>
<td>Self-evaluation</td>
</tr>
<tr>
<td>Admissions policy that promotes awareness and respect for differences, including language and culture</td>
<td>Massachusetts</td>
<td>Accreditation, ERS, self-evaluation</td>
</tr>
<tr>
<td>Policy to conduct self-assessment of cultural competence/appropriateness</td>
<td>Illinois, New York</td>
<td>Accreditation, ERS, self-evaluation</td>
</tr>
<tr>
<td>Policy on support for native language and English development</td>
<td>New Mexico</td>
<td>Self-evaluation</td>
</tr>
<tr>
<td><strong>Communication to Families and Staff</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oral and written communication in a language families understand (cultural appropriateness of communication also indicated in some states)</td>
<td>Colorado, Illinois, Massachusetts, Michigan, Minnesota, New Mexico, Wisconsin</td>
<td>Accreditation, ERS, self-evaluation</td>
</tr>
</tbody>
</table>
Table 2. Summary of QRIS Indicators Related to Cultural and Linguistic Diversity, Select States (continued)

<table>
<thead>
<tr>
<th>Information about community resources in appropriate languages</th>
<th>Colorado, Washington</th>
<th>Program observation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Culturally responsive information on health and safety</td>
<td>Georgia</td>
<td>Sample materials</td>
</tr>
<tr>
<td>Information about the program available in languages understood by prospective families</td>
<td>Massachusetts</td>
<td>ERS</td>
</tr>
<tr>
<td>Program updates to staff in their preferred language</td>
<td>Massachusetts</td>
<td>Accreditation, self-evaluation</td>
</tr>
</tbody>
</table>

**Bilingual Staff and Language Use**

<table>
<thead>
<tr>
<th>Staff speak children’s home languages</th>
<th>Colorado, Massachusetts, New York</th>
<th>ERS, list of languages, resume/credential/transcript, self-evaluation, staff survey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program makes efforts to hire staff that reflect the community</td>
<td>New Mexico</td>
<td>Not specified</td>
</tr>
<tr>
<td>Staff greet children and families in home languages</td>
<td>New York</td>
<td>List of languages, self-evaluation</td>
</tr>
<tr>
<td>Children encouraged to use home languages</td>
<td>Illinois</td>
<td>Accreditation, ERS, self-evaluation</td>
</tr>
<tr>
<td>Program collects language information upon enrollment</td>
<td>New Mexico, New York</td>
<td>Copies of enrollment forms</td>
</tr>
</tbody>
</table>

**Family and Community Engagement**

<table>
<thead>
<tr>
<th>Families share aspects of their language and culture in the program</th>
<th>Massachusetts, New Mexico, Wisconsin</th>
<th>ERS, self-evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family engagement strategies are inclusive</td>
<td>Colorado, Georgia, New Mexico</td>
<td>Event announcements, family survey, self-evaluation</td>
</tr>
<tr>
<td>Staff participate in community activities related to linguistic/cultural groups served by the program</td>
<td>Massachusetts</td>
<td>Self-evaluation</td>
</tr>
<tr>
<td>Linguistically diverse families are engaged in program development and improvement</td>
<td>New Mexico</td>
<td>Not specified</td>
</tr>
</tbody>
</table>

**Professional Development (PD)**

<table>
<thead>
<tr>
<th>PD on working with diverse children and families</th>
<th>Georgia, Illinois, Massachusetts, Michigan, Minnesota</th>
<th>Professional learning plan, registry of practitioner qualifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>PD on supporting second language acquisition and/or dual language learners</td>
<td>Georgia, Massachusetts, New York</td>
<td>Registry of practitioner qualifications</td>
</tr>
</tbody>
</table>

*Notes:* * In the evidence column, accreditation refers to credit given through formal means outside the QRIS (e.g., Head Start or National Association for the Education of Young Children, NAEYC); ERS refers to one of the Environmental Rating Scales published by the Frank Porter Graham Child Development Institute (see Frank Porter Graham Child Development Institute, “Environmental Rating Scales,” accessed July 20, 2017, [http://ers.fpg.unc.edu/](http://ers.fpg.unc.edu/)); and self-evaluation represents any kind of self-reporting, including a program self-assessment or improvement plan, an excerpt from existing policy documentation, or a response to a questionnaire. 

*Sources:* see Appendix for a list of sources by state.
The indicators in the first category of culturally responsive environment and practices reward programs that use practitioners’ knowledge of the cultural and linguistic backgrounds of the children in their care; the aim of these indicators is to ensure that what the children see and experience in the classroom is relevant to them based on their home and community experiences. This category also covers practices that support students’ individual needs, such as developing first- and second-language proficiency or reinforcing their identity with visuals that depict people who look and act like them. Evidence of these practices may include a statement by the program (e.g., a self-assessment or response to a questionnaire), documentation of activities (e.g., lesson plans or schedules), or report by an outside observer.

A second category of indicators includes explicit diversity policies (in terms of language, culture, or otherwise). Policies that fall into this grouping cover a variety of topics such as staff ethnic/linguistic diversity, support for language development, and valuing and respecting different cultures. Also in this category are indicators that two states (Illinois and New York) include to specify that programs should have a policy on conducting self-assessment of cultural competence and appropriateness, and use the results of these assessments to inform program improvements.

Program communication with parents and staff was another common area of focus. Eight of the 11 states had at least one indicator about providing information to parents and families in a language they understand, and Colorado and Washington specify that materials about community resources (e.g., materials from health-care providers) be translated. Massachusetts also requires linguistically appropriate communication to prospective families and to staff.

In terms of program staff communication with the children in their care, a handful of states have indicators that address practitioner and child language use. Out of the 11 QRIS studied, only Colorado, Massachusetts, and New York award points for having staff that speak the home languages of their students. New Mexico requires that programs make an effort to hire staff who reflect community linguistic and cultural diversity and—along with New York—requires programs to collect information on the languages spoken at home.

A related set of indicators addresses family and community engagement beyond communication strategies. These indicators emphasize that programs should ensure families can participate in the life of the initiative in ways that take their diverse backgrounds, talents, and capacities into account.

In the final category, six states include indicators that require providers to receive professional development on working with linguistically and culturally diverse populations and/or on supporting the language development of DLLs. Several of these states track such training in registries that record the professional qualifications of individual practitioners.

Research has demonstrated the value of implementing many of the individual practices listed in Table 2 in programs that enroll CLD children; however, future research will be needed to examine whether the inclusion of such indicators in QRIS increases program uptake of these practices and whether these practices are sufficient to ensure positive student outcomes.


B. Establishing Evidence of Practice

Including one or more indicators that supports CLD populations in QRIS standards is a first step, but does not guarantee success. Whether QRIS have the desired positive impact on the education and care students receive depends to a great extent on how the indicator is measured and what types of evidence are used to demonstrate alignment with each practice. Many of the indicators in Table 2 refer broadly to linguistic and cultural appropriateness or to a general body of knowledge related to working with CLD children and families, but do not always explicitly lay out the associated measurements or evidence requirements.

On the one hand, it is altogether appropriate not to create overly specific requirements around, for example, how the curriculum should reflect culture since that will depend on the context in which it is used. However, the open-ended language of many indicators means that effective implementation of any given practice relies on the program staff being able to recognize the various ways that a curriculum can be culturally relevant and—in cases where a self-evaluation is used as evidence—to describe those practices and why they fit the indicator. In turn, persons conducting program observations or reviewing providers’ self-evaluations must have background knowledge about the context in which children are being served and the range of culturally relevant activities that are appropriate if they are to accurately evaluate the programs on this kind of indicator. For subjective indicators, it is particularly important for observers and practitioners to have a common understanding of the underlying concepts the indicators are trying to measure, such as a culturally sensitive curriculum or a welcoming environment.

Whether QRIS have the desired positive impact on the education and care students receive depends to a great extent on how the indicator is measured.

In addition to flexibility around the quality of evidence, most QRIS documents examined for this analysis were vague about the quantity of evidence required. Many did not specify, for example, the number of multicultural books in a classroom, the percent of staff that ought to reflect the community, or the share of communications that must be available in families’ home languages. However, some states did provide specific guidance. For example, the Wisconsin indicator on family engagement describes one of the evidence options as: “The program has at least three pictures, three books, and three learning materials that reflect diversity accessible to children. Each of the following diversity categories must be represented at least once: race, abilities, age, culture, gender in nonstereotyping roles.” Even with some amount of specificity in evaluation guidance, observer judgment will still come into play, for example, when interpreting what images represent diversity or whether communication is linguistically and culturally appropriate.

Another concern is that in many systems, CLD-related indicators are one of a number of options programs can choose to demonstrate to receive points. This means that some programs can achieve a high rating without attending to language and culture at all. In Georgia, for example, indicators related to professional development enumerated five potential areas for training: “inclusion, cultural responsiveness, supporting dual language learners, family engagement, and/or implementation of the Georgia Early Learning Development Standards (GELDS).” A program could receive up to six points for indicator 1.2 if a director completes training in just one of these areas, and an equivalent number of points for indicator 1.5 if at least 50 percent of lead and assistant teachers complete training in three or more areas. For the latter

indicator; even with a greater number of topics required, the program could still receive full points even if teachers do not attend training on cultural responsiveness and supporting DLLs. Similarly, in Wisconsin, programs can choose from among dozens of activities that count toward indicators for family involvement, family communication strategies, and family support strategies; practitioners could easily complete the required number of activities to get points in these areas without completing one of the six activities related to CLD children and families.\textsuperscript{33}

Furthermore, QRIS may be interpreted as placing a lower value on cultural and linguistic diversity if receiving credit for CLD practices only becomes possible at higher levels of implementation—seeming to signal that such practices are secondary or inessential, rather than core program elements. For example, the single indicator in the Minnesota QRIS that is specific to serving CLD children and families (which can be met either by communicating with parents in their primary language or by sending lead teachers to six hours of diversity training) is only awarded to programs that are applying for the two highest rating levels.\textsuperscript{34} Likewise, in Illinois' tiered system, at the bronze level (the lowest tier above licensing), providers must complete "training on diversity that addresses the relationship between culture, race, and language development and usage,"\textsuperscript{35} whereas practices such as encouraging children to use their native language and communicating with families in their home language are not mentioned until the silver level; a deep dive into CLD practices is not part of the rating system but is available through the Award of Excellence for Linguistically and Culturally Appropriate Practice that a program can apply for after reaching the gold level. According to a technical assistance provider who works with programs applying for this award, because of the intense nature of the process most of the programs working toward the award in 2016 were state-funded preschool programs connected to public school districts that were already engaged in CLD work. Because so little is expected of programs with regard to CLD practice through the bronze, silver, and gold tiers, she noted, it can be very difficult for practitioners without such groundwork to start from scratch and accomplish everything required for the award in the time allotted.\textsuperscript{36}

C. How Valid Are QRIS Overall for CLD Providers and Families?

Although some QRIS—such as those discussed in the previous section—include CLD-specific indicators, the majority of points in these rating systems are based on what is considered quality service provision for all students. These include standards for class size, curricular components, program management, and family engagement, among many others. Although the inclusion of diversity indicators signals a certain level of recognition among state decisionmakers of the unique needs of DLLs, when considering how responsive a QRIS is to CLD providers and families, it is important to look at the whole rubric. For example, class size guidelines may be based on norms for native English-speaking children and may not take into consideration whether language learners need smaller class or group sizes (especially in programs where staff do not speak their home languages).

As part of the development of QRIS under the Race to the Top—Early Learning Challenge initiative, states commissioned validation studies to establish that program rating levels correlated to quality services and to positive outcomes for students. Overall, studies have found that most ECEC programs are in the mid-range of quality and that there is some evidence of correlations between quality of care—as defined in QRIS—and student outcomes, especially for low-income children.\textsuperscript{37} However, few states have examined the validity of their QRIS specifically for CLD children, providers, and families. Further, some studies, such

\textsuperscript{33} Wisconsin Department of Children and Families, "YoungStar, Group Evaluation Criteria," 58–70.

\textsuperscript{34} Minnesota Department of Human Services, "Parent Aware. Indicators and Scoring: Full Rating for Child Care Centers" (rubric, Minnesota Department of Human Services, St. Paul, MN, April 26, 2016), 3–4, http://parentaware.org/content/up- loads/2016/05/PA-035-Indicators-and-Scoring-for-CCC-JULY-2016-FINAL.pdf.


\textsuperscript{36} Author interview with QRIS technical assistance provider in Illinois, August 9, 2016.

as those for Washington State’s Early Achievers and Wisconsin’s YoungStar, included proportionately far fewer Latino or DLL children and providers than participate in ECEC in the state, meaning that evidence of quality practice and positive outcomes disproportionately reflects the experiences of non-CLD children and providers; the findings of such studies may thus not hold true—or not to the same extent—for CLD communities. A related concern is whether the outcome measures QRIS rely on to distinguish between high- and low-quality programs (such as kindergarten readiness) are capturing the full range of desired outcomes for ECEC and are valid and reliable for CLD populations.

Both independent research and state validation studies have also examined the standardized measurement systems QRIS use to observe and evaluate ECEC classroom and program practice, such as the ERS and the Classroom Assessment Scoring System (CLASS). While a 2014 research review indicated that those tools operated similarly for DLLs and non-DLLs in terms of their measurement properties and their correlation to student outcomes, the authors cautioned that their conclusion was drawn based on only ten studies that met their criteria for inclusion, none of which were specifically designed to test this comparison. More research is needed to ensure that these tools are valid for a variety of child populations.

**Cross-cultural differences in interpersonal relationships and behavior may result in inappropriate judgments of the quality of diverse classrooms.**

Furthermore, some researchers have raised concerns about the use of CLASS and ERS to rate programs serving CLD children. Although their developers claim these tools are appropriate for use in such programs, cross-cultural differences in interpersonal relationships and behavior may result in inappropriate judgments of the quality of diverse classrooms.

Broad measures of quality may also ignore program elements that are critical for CLD children, such as the use of home languages for a variety of purposes. In addition to resulting in inaccurate assessments of quality, by omitting these indicators a QRIS fails to give CLD consumers the information they need to choose a program that is not just high-quality but that will attend to the needs of their children.

Additionally, CLD providers face unique barriers to achieving a fair rating based on standardized program evaluation tools. For example, although the ERS rating scale is available in several languages, the guide that helps practitioners understand how to prepare for and perform well in observations is only in English. As another example, CLASS considers maintaining eye contact to be one example of how mutual respect is shown between students and teachers, but fails to acknowledge that not all cultures interpret eye contact as a respectful practice. Finally, while learning environment, health, and safety standards are important, some are easier to achieve in wealthier contexts than in low-income contexts, yet all programs are rated against a single assumption about what is sufficient (for example, the square footage of each classroom or the number of books per child). Instruments that are meant to measure and define quality across a wide range of programs—as ERS and CLASS are—may also skew toward favoring center-based as opposed to home-based environments, where many CLD providers work. State QRIS that offer separate sets of standards for family-based and center-based programs may, as a result, more fairly reflect the quality of CLD and other home-based providers.

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Several recently developed instruments, such as the Classroom Assessment of Supports for Emergent Bilingual Acquisition (CASEBA) or the Early Language and Literacy Classroom Observation Addendum for Dual Language Learners (ELLCO-DLL), seek to assess ECEC environmental quality with measures specific to DLLs. Tools such as these, which are grounded in research on the development of young DLLs, can inform classroom practices and teacher preparedness for working with CLD children and their families and can aid in tracking program progress in working effectively with this population.

III. Implementation

The establishment of QRIS standards and the development of rating systems are, as discussed in the previous section, two opportunities for QRIS to be responsive to CLD providers and families. A third and equally important opportunity is present in choices about how states and their partners implement QRIS. Implementation varies from state to state in how the authorizing agency (usually the state department of education or human services) partners with nonprofits and universities, as well as the degree to which QRIS are intertwined with other state functions (such as licensing or resource and referral). However, there are certain common tasks that fall under the umbrella of QRIS implementation, such as outreach to prospective enrollees, technical assistance on enrollment and program improvement, professional development for staff, and ongoing stakeholder engagement. Each of these provides an opportunity for decisionmakers to adapt the system to meet the needs of diverse practitioners.

This section describes some of the challenges practitioners face when participating in QRIS, as well as ways some QRIS have been made more accessible for CLD providers. It is based on interviews with 14 professionals in seven states, each of whom provide QRIS technical assistance to practitioners, coordinate implementation services, and/or participated in the development of QRIS in their state. Their collective observations about how QRIS have been implemented in different states offer both cautionary lessons for states in the planning stages as well as some potential solutions for those struggling to make their QRIS meet the needs of CLD providers and communities.

A. Inclusive Outreach to and Enrollment of Practitioners

A number of barriers can hinder CLD practitioner participation in QRIS if those systems are not designed with a diverse group of ECEC providers in mind. For example, some states have set program registration and rating deadlines without attention to the fact that some types of programs might need more time based on their starting point (including whether they are even licensed), or the level of experience administrators have with bureaucratic systems. Similarly, as states and employers increasingly require providers to have additional credentials and levels of training, they may find it difficult to navigating institutions of higher education and to pay associated costs (even where training is state subsidized). It is not just CLD providers, however, who are likely to experience these difficulties; rather, a wide range of ECEC providers, many of whom are low-income and have limited education, are likely to encounter such challenges.

For LEP providers, the lack of English proficiency is one of the biggest barriers to accessing QRIS documentation, such as applications, business guidelines, rating rubrics, and information about best practices. Some states have invested in providing translations—at least for key documents and in the most

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frequently spoken languages—whereas others, such as Maryland, have no information for practitioners on their QRIS website in any language other than English, and only a one-page flyer in Spanish for parents.46 And even when providers have adequate English skills or documents are translated into languages other than English, the formal language used in such texts can make them impenetrable for individuals without higher education or experience working with state bureaucracies.

Several interviewees noted another major challenge: even if the system is mandatory for all practitioners, or for those who accept public money, participation incentives can be insufficient compared to the effort and resources it would take a provider to comply with the many requirements. These professionals fear that ECEC practitioners who cannot spend the money to attend trainings or get advanced degrees, or who do not see the program as beneficial to their career or business, will withdraw to the unregulated sector, stop accepting children who qualify for tuition subsidies, or leave the field altogether. Whereas some states, such as Maryland and New Mexico, provide higher per-pupil reimbursement to programs with higher quality rating levels, a respondent in California worried that her county’s voluntary QRIS will not be successful as long as programs only receive a modest one-time bonus (not large enough to raise pay) based on a quality rating rather than a sustained higher reimbursement rate based on their level.47 Another Californian noted misperceptions among practitioners; some believed that QRIS participation would naturally result in more clients, or that the local resource and referral agency would be able to increase the number of referrals to them once they attained a certain rating, and were displeased when they realized they would have to engage in marketing on their own to draw in more families.48 Even in a state with a tiered reimbursement rate, a Maryland respondent indicated that ECEC providers do not believe that the state system will do much to improve quality or to improve their practice; rather, it seemed to them that the mandatory program consisted of “unfunded mandates.”49

Even when providers have adequate English skills or documents are translated ... the formal language used in such texts can make them impenetrable.

Despite these widespread concerns and barriers, some states are taking steps to be more responsive to the needs of CLD practitioners, often after hearing communities' pressing concerns and recognizing the shortcomings of the initial QRIS rollout. In the state of Washington, the Department of Early Learning has begun to address barriers CLD communities face; one respondent noted that the state has been increasing its multilingual staff and has taken an interest in developing new models of working with community-based organizations to make QRIS enrollment more linguistically, culturally, and technologically accessible.50

B. Linguistically and Culturally Relevant Technical Assistance and Professional Development

Regardless of state involvement, technical assistance providers can do a lot to make QRIS accessible to CLD practitioners in the quality improvement process. A respondent who manages technical assistance providers in California explained that—although it is not a formal job function—coaches work

47 Author interview with former QRIS professional development coordinator in California, October 10, 2016.
48 Author interview with administrator for resource and referral agency in California, September 28, 2016.
49 Author interview with administrator in a county health and human services department in Maryland, September 29, 2016.
50 Author interview with policy director of ECEC advocacy organization in Washington State, May 25, 2016.
with providers to help them learn to manage a formal business and navigate paperwork demands. As she explained:

*Even though that was not supposed to be our focus, and it probably impacted how much time we spent coaching, we did it anyway, because we’re not ones to turn away a provider who is frustrated or having a hard time dealing with it. So we assisted them with paperwork, budgets, ordering, submitting and resubmitting paperwork, and explaining regulations and requirements of the contract. For this population, it doesn’t suffice to just hear it one time. It’s one time at our orientation—here’s your packet of paperwork, [then] your coach talks to you about it a second time and even a third time. And then we have to troubleshoot.*

Additionally, the coaches in this organization connect providers to each other to provide peer support and to share lessons learned about the QRIS process as well as other aspects of ECEC practice—and to do it in a culturally and linguistically relevant way. Similarly, in one Maryland county, staff from the agency that helps to implement QRIS spend a great deal of time working with ECEC providers to overcome technical and linguistic barriers, especially for those who have only a license and are working to reach Tier 1. One task that some practitioners experience as a big barrier to reaching Tier 1 is the requirement to create a parent handbook. The state has detailed criteria for what should be included in the handbook and key terminology that must be used, which coaching staff explain in small group sessions and then again by providing one-on-one assistance. They also help practitioners write, translate, scan, and upload documents to include in the QRIS application portfolio. These technical assistance providers have worked with Maryland state authorities to create templates for these types of documents to make creating and translating them easier. Recently, the state began to allow practitioners to upload to their portfolios documents (including handbooks) that are written in Spanish, though documents in other languages must still be translated to English due to limited linguistic capacity in the state office—another function that technical assistance providers assume without specific compensation.

A number of states are working to ensure that training is linguistically and culturally relevant. For example, the Maryland State Department of Education approves the content of trainings for ECEC practitioners that its QRIS partners run, and each training must have a component related to cultural competency as well as one related to working with children with special needs. Oregon is tracking the number of quality improvement specialists who provide trainings in Spanish, in addition to tracking the funds provided directly to Spanish-speaking child-care programs for continuous quality improvements as a means of promoting equity and bolstering the linguistic competence and diversity of their ECEC system.

*Coaches show practitioners who engage in oral storytelling how they can gain points for interaction by asking questions.*

One organization in Washington State has created a model of culturally responsive training and individual supports for East African family child-care providers with funding from the community itself. Voices of Tomorrow provides coaching and technical assistance focused on making connections between practitioners’ strengths and the requirements of the QRIS. For example, where QRIS indicators suggest that practitioners should increase adult/child interaction during read-alouds, coaches show practitioners who engage in oral storytelling how they can gain points for interaction by asking questions while they tell a story. Coaches also use their insider knowledge of the community to address issues that outsiders might not see, such as fear among some practitioners that the state intends to use its QRIS to drive away immigrant providers or reluctance to ask for translators in state-run trainings because they do not want to see themselves as needing help.

51 Author interview with professional development coordinator for resource and referral agency in California, September 28, 2016.

52 Author interview with director of child-care resource and referral agency in Maryland, September 29, 2016.
The successful implementation of QRIS in diverse communities depends to a large extent on the expertise and relationships local agencies and community-based organizations have developed over decades prior to QRIS. Respondents in Florida and California stated that their success as technical assistance providers was due at least in part to their history of listening to and working with diverse ECEC providers and their ability to meet practitioners where they are, literally and figuratively. Sustained follow-up with practitioners has also proven key in this respect. For example, an agency in Florida recently changed its model so that the same person who provides professional development to practitioners follows up with them with observations, rather than having two different professionals carry out these functions. The same model is used in California, where the same coach stays with particular practitioners for as long as they are working toward a QRIS rating. Coaches speak the languages of the practitioners and are knowledgeable of their culture; their approach includes home visits and frequent follow-ups to see if practitioners have any questions about the information they previously received.

Another common area of focus for interview respondents was the need to build capacity within the ECEC field to provide more support for CLD practitioners. In Illinois, some programs already operating at the highest level of quality are applying for an Award of Excellence for Linguistically and Culturally Appropriate Practice. An experienced trainer working with those programs said she hoped that over time, a set of award recipients could become statewide models of best practice. In order to overcome what she described as “absolutely insufficient training” of Illinois practitioners in serving DLLs, she said she hoped that the training associated with applying for the award could continue to be used as a way to develop peer coaches. She also said that her organization was looking into how hiring staff who earned the state Seal of Biliteracy—a credential given to high school graduates who have advanced proficiency and literacy in a language other than English—could be used toward points on the QRIS.

Finally, one of the explicit goals of the organization Voices of Tomorrow—which provides technical assistance to East African ECEC providers in the Seattle area—is to increase the number of culturally diverse providers whose services are eagerly sought by community members. One of the ways they do this is by targeting East African ECEC practitioners who have gotten to QRIS Level 3 (the lowest level at which programs can accumulate points for quality practices) and students completing university degrees in ECEC to complete training to become professional developers and mentors. With leadership development as a focus, the organization can begin to expand the capacity of trainers with linguistic and cultural knowledge and who already have the trust of fellow members of their community.

C. Ongoing Stakeholder Engagement

Many of the strategic adjustments discussed in this section to how QRIS are implemented arose in response to direct feedback from CLD communities themselves. Creating a stakeholder engagement process that includes voices from diverse communities is a critical step toward ensuring that QRIS are not unintentionally biased against certain groups.

The Washington State Department of Early Learning, for instance, has established a review subcommittee to provide ongoing input on the implementation and improvement of Early Achievers, the state QRIS. This subcommittee includes key stakeholders from CLD communities, including representatives of organizations such as Voices of Tomorrow and leading immigrant advocates. The committee applies a racial equity lens to its deliberations and closely examines issues of cultural and linguistic responsiveness. The creation of this group transformed the previously closed-door process of making QRIS policy changes into a more transparent and inclusive undertaking.

53 Author interview with administrator for resource and referral agency in California, September 28, 2016; author interview with professional development coordinator for resource and referral agency in California, September 28, 2016; author interview with director of QRIS technical assistance provider in Florida, August 4, 2016.

54 Author interview with QRIS technical assistance provider in Illinois, August 9, 2016.

55 Author interview with CEO/Cofounder of Voices of Tomorrow in Washington State, October 27, 2016.
Similarly, the Oregon Department of Education recognized that several communities were not represented in the initial planning process of their QRIS and that diversity was lacking in their own administrative staff. In response, the department introduced intentional and robust community engagement efforts and began to apply a racial equity lens across all aspects of design and planning as they prepared for the rollout of version 2.0 of their system.

Overall, examination of strategies that have been undertaken to support CLD practitioners and programs in the process of QRIS implementation has revealed several successful initiatives and innovative strategies—some of which are supported by system resources, but many others that are being undertaken in the absence of formal guidance or devoted resources. Establishing such promising practices and providing targeted resources to organizations that are effectively engaging with CLD providers to facilitate their access to QRIS could contribute significantly to the promotion of diversity in state ECEC systems.

IV. Conclusion and Recommendations

As QRIS increasingly become the means through which states provide a unified framework for quality across all ECEC settings, these systems must meaningfully reflect the needs of CLD families and practitioners to ensure that programs serving diverse communities are accurately evaluated for quality and appropriately assisted in improving their practices. Key elements in both QRIS design and implementation can play a critical role in ensuring equitable access to program improvement resources, which—more than the rating system itself—are the driver of improving outcomes for children.

Indeed, a number of states are working toward streamlining QRIS to focus on fewer but more impactful standards by using community feedback, findings of validation studies, and continuously evolving theories of change.56 In the context of an underfunded ECEC system, this process will be critical to target resources to areas where they will do the most good.

Key elements in both QRIS design and implementation can play a critical role in ensuring equitable access to program improvement resources.

The following recommendations outline some of the strategies states can use to support CLD practitioners and providers who may face obstacles in accessing and progressing upward in QRIS. They also highlight ways states can appropriately reward programs that are providing culturally and linguistically responsive services that are critical for diverse families and the long-term outcomes of their young children.

1) Ensure that QRIS standards explicitly support CLD children and families, reflect cross-cultural variation, and value the skills of CLD practitioners.

- Policymakers can review their state QRIS rubrics to ensure that they include indicators of quality that contribute to successful outcomes for CLD children and families, such as those described in Table 2. Indicators that represent the state vision of what practices constitute a baseline of acceptable services for CLD children should be mandatory in points systems or required to achieve even the lowest level (e.g., one star) in building block systems.

56 Diane Schilder, Iheoma Iruka, Harriet Dichter, and Debi Mathias, Quality Rating and Improvement Systems: Stakeholder Theories of Change and Models of Practice (Boston: Build Initiative, 2015), http://qrisnetwork.org/sites/all/files/resources/2016-02-10%20%09%3A21/QRIS%203.0%20Report%20%11%202016.2.5%20FINAL.pdf.
At the same time, states can review all QRIS indicators and the criteria used to measure alignment with them to ensure they are applicable to ECEC settings that enroll CLD children; for example, that maximum class or group size takes into consideration the needs of language learners, especially where staff do not speak the same home language as their students.

In order to encourage immigrants and refugees to enter or remain in the ECEC workforce, QRIS indicators may be structured to reward programs for hiring workers who have linguistic and cultural skills that support the academic and socioemotional development of children in their care. Indicators should also include multiple ways for staff to demonstrate competencies or experience.

States may consider creating a subscore for QRIS ratings based on the indicators that specifically support CLD populations and are of particular interest to immigrant and refugee families seeking insight on how well a program will meet their needs. Such information will also be critical for research and evaluation purposes to ensure that QRIS are valid and reliable across diverse settings and to set technical assistance and professional development priorities.

2) **Ensure that the systems built around QRIS ratings are fair and equitable.**

- States can provide training for ECEC practitioners and program evaluators to develop a common, cross-culturally appropriate set of definitions of the constructs measured by QRIS indicators (e.g., developmentally appropriate, culturally responsive). This process and these definitions can also indicate where evaluators should expect to see cross-cultural variation.

- Program observers who are rating adult/child interactions and instructional quality must be proficient in the language(s) being spoken or be provided with an interpreter.

- QRIS administrators may find it useful to work with community partners to offer technical assistance and professional development opportunities that specifically address the needs of CLD families.

- As new observation tools, such as CASEBA and ELLCO-DLL, are developed and validated by research to identify quality environments for DLLs, they can be adopted as alternative or supplementary measures to tools such as CLASS or ERS.

3) **Provide sufficient resources to organizations that conduct outreach to and technical assistance for programs enrolling in QRIS and ensure that enrollment processes are equally accessible to all providers.**

- Technical assistance providers need substantial time and financial resources to work with practitioners who are not yet licensed, are not familiar with U.S. business practices, have limited English proficiency or literacy in any language, or do not have administrative managers to help gather the documentation that is required of both home- and center-based providers. When establishing funding levels and targeting criteria for technical assistance, states should take into consideration the additional costs of working with CLD populations, including time spent with home practitioners to help them establish business practices and assist as they create and translate required program materials (such as parent handbooks) and QRIS application documentation.

- In order to ensure that all providers have equal access to QRIS, all documents related to enrollment and rating ought to be translated into commonly spoken languages, with jargon explained in culturally and linguistically appropriate ways. Likewise, materials such as best practice guides, observation rubrics, and rating criteria will be of greatest utility to practitioners if they are translated and written in such a way that practitioners with low levels of education can understand them. When such materials include examples of best practices, these should reflect a variety of programmatic and demographic contexts.
- States could consider reimbursing programs for the cost of translating program materials (such as parent handbooks) into English in cases where there are no QRIS evaluators who speak providers' languages and providers have no English-speaking families for whom they would otherwise develop English-language materials.

- States could consider contracting with companies that can verify foreign educational transcripts and certifications so that providers can receive credit for work they have completed outside of the United States.

- Agencies and organizations that provide services to ECEC practitioners might find it helpful to partner with community-based cultural organizations to leverage their experience, expertise, and relationships to more effectively serve immigrant and other CLD providers who may otherwise be hard to reach.

4) **Ensure that incentives for providers are commensurate with the requirements of participating in the QRIS, and that those requirements do not disproportionately burden CLD providers.**

- In systems where QRIS participation is mandatory for all providers or for those who accept tuition subsidies, feedback from technical assistance providers and ECEC workers could help decisionmakers understand whether requirements are being experienced as prohibitively expensive or time-consuming, pushing practitioners into the unregulated market.

- States should create clear pathways for low-educated and/or LEP ECEC workers seeking training and education aligned with the QRIS. Such pathways may include integrated English as a Second Language (ESL) and adult basic education supports or the creation of articulation agreements among institutions of higher education to facilitate degree attainment for CLD and other ECEC workers.

- States can ensure that practitioners are appropriately rewarded for costly and time-intensive education and training critical to meeting quality improvement objectives by introducing workforce supports, including scholarships and wage supplements.

5) **Ensure that decisionmakers understand and address the needs of CLD families and providers as they review and revise QRIS standards and systems.**

- The agency tasked with oversight of the QRIS rating system should create data systems to gather information on the cultural and linguistic background of practitioners and children. That information can then be used in annual reviews of QRIS participation rates and trends in rating levels. Currently, only California, Oregon, Tennessee, and Wisconsin collect information regarding race and ethnicity as part of child participation data. Absent this data, necessary adjustments cannot be made to ensure that diverse programs and providers are being served equitably by QRIS.

- This agency can also establish a mechanism to collect input on an ongoing basis from stakeholders, including representatives from diverse and underserved communities, to inform revision and review processes.

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*Widely varying state and local contexts present a spectrum of unique challenges that require tailored solutions and approaches.*

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57 Build Initiative and Child Trends, “QRIS Compendium.”
While these recommendations offer practical considerations for QRIS design and implementation, widely varying state and local contexts present a spectrum of unique challenges that require tailored solutions and approaches. Ultimately, an intentional and regular stakeholder engagement process that meaningfully includes the voices of all communities that may be affected by QRIS-related decisions is critical to ensure that decisionmakers recognize their concerns and understand their needs.

Many states are in the process of expanding, revising, or refining their QRIS. This presents an important opportunity to examine ways in which each of these systems can take a more deliberate approach toward serving diverse providers and families. While QRIS are only one piece of the structure underpinning state ECEC systems, they represent a critical entry point and can play a gatekeeper role for programs that serve CLD young children. Designing systems that are relevant and responsive to these communities is therefore crucial to enable all providers to participate in technical assistance and quality improvement opportunities, ultimately to the benefit of the young children in their care. Including indicators of quality that are appropriate for a diverse pool of providers and ensuring programs have the tools they need to improve are important steps toward integrating principles of equity and inclusion throughout all aspects of ECEC systems.

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Appendix

Sources for Table 2, By State

Arizona


Arkansas


California


Colorado


Florida


Georgia

Idaho


Illinois


Iowa


Louisiana


Maryland


Massachusetts

Michigan


Minnesota


New Mexico


New York


Washington


Wisconsin


Works Cited

Note: The sources that informed Table 2 are listed by state in the Appendix.


Schilder, Diane, Iheoma Iruka, Harriet Dichter, and Debi Mathias. 2015. *Quality Rating and Improvement Systems: Stakeholder Theories of Change and Models of Practice*. Boston: Build Initiative. [http://qrisnetwork.org/sites/all/files/resources/2016-02-10%2009%3A21/QRIS%203.0%20Report%20V11%202016.2.5%20FINAL.pdf](http://qrisnetwork.org/sites/all/files/resources/2016-02-10%2009%3A21/QRIS%203.0%20Report%20V11%202016.2.5%20FINAL.pdf).


About the Authors

**Julie Sugarman** is a Policy Analyst at the Migration Policy Institute (MPI) National Center on Immigrant Integration Policy, where she focuses on issues related to immigrant and English Learner (EL) students in elementary and secondary schools. Among her areas of focus: policies, funding mechanisms, and district- and school-level practices that support high-quality instructional services for these youth, as well as the particular needs of immigrant and refugee students who first enter U.S. schools at the middle and high school levels.

Dr. Sugarman came to MPI from the Center for Applied Linguistics (CAL), where she specialized in the evaluation of educational programs for language learners and in dual language/two-way immersion programs. At CAL, she directed comprehensive program evaluations of instruction for ELs in K-12 and contributed to numerous research and evaluation projects, including studies of biliteracy development in two-way immersion programs and the evaluation of the STARTALK program that funds teacher training programs and language instruction for students in grades K-16 in critical languages.

Dr. Sugarman earned a B.A. in anthropology and French from Bryn Mawr College, an M.A. in anthropology from the University of Virginia, and a Ph.D. in second language education and culture from the University of Maryland, College Park.

**Maki Park** is a Policy Analyst and Program Coordinator at the MPI National Center on Immigrant Integration Policy, where she works on domestic and comparative issues affecting children of immigrants in early childhood and K-12 education.

Previously, Ms. Park worked as Director of Outreach and Program Manager at WorldTeach, based at Harvard’s Center for International Development, where she oversaw recruiting and admissions operations and managed the organization’s program in Guyana. She has also worked as an education consultant in Malawi and served as a Peace Corps Volunteer in Turkmenistan.

Ms. Park holds a master’s in international education policy from Harvard University's Graduate School of Education, and earned her bachelor’s degree with a double major in French and government with a concentration in international relations from Cornell University.
The Migration Policy Institute is a nonprofit, nonpartisan think tank dedicated to the study of the movement of people worldwide. MPI provides analysis, development, and evaluation of migration and refugee policies at the local, national, and international levels. It aims to meet the rising demand for pragmatic and thoughtful responses to the challenges and opportunities that large-scale migration, whether voluntary or forced, presents to communities and institutions in an increasingly integrated world.

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