



Can center-based childcare reduce the odds of early chronic absenteeism?



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ABSTRACT

This study was the first to position itself in the intersection on research on center-based care and on chronic absenteeism. Given the growth in the utilization of center-based care and given the recent vocalized policy concerns of the detrimental effects of chronic absenteeism in early school years, this study inquired as to whether attending center-based care predicted differential odds of early absence patterns. Using a newly-released national large-scale study of children (the Early Childhood Longitudinal Study – Kindergarten Class of 2010–2011), the findings indicated that children who attended center-based care in prekindergarten had lower odds of being chronically absent in kindergarten. The conclusions were consistent even after employing multiple methodological approaches (fixed effects, propensity score matching) as well as exploring multiple definitions of chronic absenteeism, though were not differentiated by socioeconomic status. Additional noteworthy findings are discussed, including the significance of children's internalizing symptoms and parental mental health.

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Introduction

When considering the short-term effects of attending center-based childcare, research has predominantly focused on achievement and socioemotional outcomes (Claessens, 2012; Crosnoe, 2007; Loeb, Bridges, Bassok, Fuller, & Rumberger, 2007; Magnuson, Rhum, & Waldfogel, 2007; Turney & Kao, 2009). Research generally supports that attending center-based care boosts achievement (Burger, 2010; Loeb et al., 2007; Loeb, Fuller, Kagan, & Carrol, 2004; National Institute of Child Health and Human Development [NICHD], 2006). Research mostly links attending center-based care to null or lower socioemotional development and null or higher behavioral issues (Baker, Gruber, & Milligan, 2008; Belsky et al., 2007; Herbst & Tekin, 2010; Loeb et al., 2007; Magnuson et al., 2007; NICHD, 2006; Yamauchi & Leigh, 2011).

Early academic and socioemotional outcomes are certainly critical to examine, particularly as they signal school readiness. However, in the discourse surrounding the influence of attending center-based childcare, research has not considered how going to center-based care may be linked to early patterns of chronic absenteeism. Although no absolute definition exists, chronic absenteeism is defined here as missing at minimum two or more weeks of school

for any reason in a given year (Balfanz & Byrnes, 2012; Gottfried, 2014).

This gap in examining school absences as outcomes is critical to address: The short- and long-term negative consequences associated with excessive school absences cannot be overstated, including lower achievement, increased behavioral issues, lower social development, greater chances of grade retention, higher odds of school dropout, increased risk of the use of drugs and alcohol in young adulthood and adulthood, and lower employment prospects (Alexander, Entwisle, & Horsey 1997; Broadhurst, Patron, & May-Chahal, 2005; Chen & Stevenson, 1995; Connell, Spencer, & Aber, 1994; Ekstrom, Goertz, Pollack, & Rock, 1986; Finn, 1993; Gottfried, 2009, 2010, 2014; Hallfors et al., 2002; Kane, 2006; Morrissey, Hutchison, & Winsler, 2014; Newmann, 1981). It is estimated that somewhere between 10% and 15% of young school-aged children are chronically absent and thus susceptible to these negative consequences (Balfanz & Byrnes, 2012; Romero & Lee, 2007). This estimate is larger for students of lower socioeconomic status (SES) (Ready, 2010), thereby exacerbating these risks.

In elementary school, chronic absenteeism is highest in kindergarten (Balfanz & Byrnes, 2012; Romero & Lee, 2007). The notion of 'chronic' absenteeism is fairly nascent in both policy and research, and therefore most research in early school absences have not considered the effects of chronic absenteeism per se (as opposed to greater/fewer school absences) (Gottfried, 2014). The few research studies in the area of early chronic absenteeism found negative effects. Chang and Romero (2008) linked chronic

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absenteeism in kindergarten to lower first grade academic performance. [Connolly and Olson \(2012\)](#) linked chronic absenteeism in kindergarten to lower achievement, grade retention, and future chronic absenteeism. [Gottfried \(2014\)](#) linked chronic absenteeism in kindergarten to lower academic and socioemotional development.

Given that negative consequences of chronic absenteeism emerge in kindergarten, research has attempted to identify the drivers of school absences. Most research has focused on individual- and family-level factors. At the individual level, significant factors include educational disengagement or alienation from school ([Harte, 1994; Reid, 1983](#)). Family factors include family structure, father's occupation, mother's work status, household size, parental involvement, mother's age, mother's depression and socioeconomic status (SES) ([Catsambis & Beveridge, 2001; Claessens, Engel, & Curran, in press; Fan & Chen, 2001; Jeynes, 2003; McNeal, 1999; Muller, 1993; Ready, 2010; Reid, 1983; Romero & Lee, 2007; Sampson & Laub, 1994](#)). Little work has been conducted outside of identifying individual and family factors.

A significant lapse in the research on both the effects on center-based care and the drivers of chronic absenteeism is the intersection between the two. On the one side, the research on the effects of center-based care has generally remained limited to achievement and socioemotional development. Other critical early indicators of early school success or risk of failure, such as absenteeism, have largely been ignored. On the other side, research into the drivers of chronic absenteeism have generally been limited to studying individual and family factors. In fact, altogether little is known about what programs and practices in early childhood might influence early chronic absenteeism. Additional research on the drivers of absenteeism beyond these factors will develop a more robust agenda around how to reduce this negative behavior at the onset of school entry, when the frequency of this behavior is highest.

Center-based care and early chronic absenteeism

Aside from one descriptive study linking attending prekindergarten care to lower rates of chronic absenteeism in kindergarten ([Connolly & Olson, 2012](#)), no large-scale study exists in the overlap of childcare and chronic absenteeism. Given the positive link between center-based care and early achievement, it is reasonable to expect that center-based care is linked to lower chronic absenteeism. There are four potential ways by which center-based care might be linked to lower chronic absenteeism in kindergarten: child transitions, family logistics, health, and timing.

Child transitions

Childhood is filled with ecological transitions that require adaptation to new environments ([Bronfenbrenner, 1979](#)), and school entry represents a significant ecological transition in early childhood ([Ladd & Price, 1987](#)). Kindergarten entry requires children to face many new demands including academic challenges, adaptation to institutional expectations, and socialization ([Bensen, Haycraft, Steyaert, & Weigel, 1979; Bogart, Jones, & Jason, 1980; Holland, Kaplan, & Davis, 1974](#)). Unsuccessful transition into kindergarten correlates with children feeling less secure about their environments and increased stress, thereby leading to school avoidance and negative feelings about school ([Ladd & Price, 1987](#)). These negative feelings materialize as absences ([Ekstrom et al., 1986; Newmann, 1981](#)) through refusal to attend school or pretending to be sick ([Giallo, Treyvaud, Matthews, & Kienhuis, 2010](#)).

Children who attend formal preschool often have better mastery of this transition into kindergarten ([Ladd & Price, 1987](#)). No single explanation exists. However, one reason may be that center-based care provides a structured learning environment that mirrors what

school will be like. Children are formally assigned to a classroom, taught by a specific set of teachers, and have regulated schedules with established times for instructional activities. In contrast, children who are cared for in informal settings may not gain the same experience of participating in a formal school-like schedule ([Claessens, 2012](#)). Second, children in center-based care get an early start on adapting to long periods of parental separation ([Ladd & Price, 1987](#)). Third, center-based instructors are often more academically qualified than guardians in informal care alternatives such as relatives in home-like settings ([Barnett, Carolan, Fitzgerald, & Squires, 2011](#)). Therefore, in formal care, children have greater exposure to adults who more closely mirror school teachers in classrooms. Fourth, children in center-based care are often in environments with many peers, and this provides them with early opportunities to socialize, understand individual differences, and adapt to group behavior. Finally, attending center-based care provides children with an early opportunity to adapt to a routine of regularly leaving the home ([Ladd & Price, 1987](#)).

It is thus theorized that going to center-based care in prekindergarten facilitates the transition into kindergarten, either by providing children with an early school-like routine or with additional opportunities to adapt to interacting with adults who are similar in characteristics to schoolteachers and to interacting with other children in a classroom setting. Hence, when entering kindergarten, they have fewer adjustment demands and are more equipped to cope with new environments. This may actualize as having positive feelings about school and less anxiety about attending school; feelings such as these are linked to lower odds of being absent.

This framing of transitions fits into the larger literature on preparatory socialization. As described by [Germain and Bloom \(1999\)](#), preparatory socialization exists when spending time in one setting allows the individual to learn the processes and roles required in a future setting. Early in education, this entails learning how school demands differs from those at home, which, as described above, might facilitate children learning how to develop a school-going routine or how to interact with teachers and peers in a classroom-like setting. In young adulthood, this may surface as preparing for the requirements of the working world ([Golde, 1998](#)). The concept of transitions from setting-to-setting certainly has implications beyond this study to the extent which experiences in one environment leads to successful functioning in a future environment.

Family logistics

Going to center-based care may also influence parents' behavior as it relates to chronic absenteeism in kindergarten. First, a direct-effects hypothesis suggests that parents are also adjusting to the routine of sending their children to a formal non-home setting. Thus, center-based care may be putting both children and their families in the mindset of regularly attending school, even before starting formal schooling ([Ehrlich et al., 2014](#)). Through the actions of sending their children to center-based care, parents have an extra year to adapt to school-going logistics, such as determining transportation options, shifting work schedules, instituting early-morning wake up, preparing/packing children's breakfasts and lunches, buying appropriate school attire – all of which are significant factors of good attendance once in school ([Chang & Romero, 2008](#)). Moreover, this extra year of school-going practice may be particularly crucial for working parents, who may not have the capacity to accommodate absenteeism.

Second, there may be an indirect mechanism. Once kindergarten begins, parents may hold more positive feelings and attitudes about their child's transition to kindergarten due to the previous period of adjustment to a school-like setting via center-based care ([Margetts, 2000](#)). Hence, not only is it possible that attending center-based

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