Concordia University St. Paul

DigitalCommons@CSP

Doctorate in Education

College of Education & Humanities

3-11-2021

Army Child and Youth Services Early Childhood Educators: A Mixed-Methods Assessment of the Association Between Workplace Wellbeing and Turnover

Tamara Nuttall tamara.j.nuttall@gmail.com

Follow this and additional works at: https://digitalcommons.csp.edu/edd



Part of the Early Childhood Education Commons, and the Educational Leadership Commons

Recommended Citation

Nuttall, T. (2021). Army Child and Youth Services Early Childhood Educators: A Mixed-Methods Assessment of the Association Between Workplace Wellbeing and Turnover (Dissertation, Concordia University, St. Paul). Retrieved from https://digitalcommons.csp.edu/edd/14

This Dissertation is brought to you for free and open access by the College of Education & Humanities at DigitalCommons@CSP. It has been accepted for inclusion in Doctorate in Education by an authorized administrator of DigitalCommons@CSP. For more information, please contact digitalcommons@csp.edu.

Army Child and Youth Services Early Childhood Educators:

A Mixed-Methods Assessment of the Association Between Workplace Wellbeing and

Turnover

A Dissertation SUBMITTED TO THE FACULTY OF CONCORDIA UNIVERSITY BY

Tamara Jeanne Nuttall

IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF DOCTOR OF EDUCATION (Ed.D.)

Dr. Laura Wangsness Willemsen, Dissertation Chair

March 2021

Abstract

The Department of Defense operates the largest employer-sponsored childcare system in the United States. Army Child and Youth Services is the largest component of the military childcare system, employing over 5,400 early childhood educators who care for and teach soldier and Department of Defense Civilian children aged six weeks to five years old in child development center settings. Early childhood educators' workplace wellbeing and turnover has long been the focus of researchers, practitioners, and policymakers alike. Despite extensive research examining these issues in the civilian childcare context, military-provided early education has heretofore been absent from the research literature. This globally situated, mixed-methods research rectifies this absence by exploring the workplace wellbeing and turnover intentions of 271 Army Child and Youth Services early childhood educators employed at 34 child development centers located on 15 Army installations in nine states, five countries, and one U.S. Territory. A primary contribution of this study is the formation of the Early Childhood Educator Workplace Wellbeing Theoretical Framework consisting of the interconnected domains of (a) organizational supports, (b) emotional wellbeing, (c) physical wellbeing, and (d) professional relationships. A confirmatory factor analysis verified the domains of the ECE Workplace Wellbeing Theoretical Framework as a robust construct of overall ECE workplace wellbeing. A logistic regression model predicted turnover intentions based on ECE workplace wellbeing, resulting in a 765% increase in the odds of planning to stay working in Army Child and Youth Services for each one unit increase in workplace wellbeing. These findings indicate workplace wellbeing is a strong predictor of turnover intentions, which is significant since 16.5% of participants report they plan to quit their job in the next 12 months. In addition, quantitative and qualitative data reveal findings specific to the organization that may be utilized to inform policy and practice.

Participants in the current study specify their relationships with children are the primary reason they continue to work in Army Child and Youth Services. They are proud of their work and find purpose by making a difference in the lives of military children and their families. Pay and benefits were reported as reasons to stay working in CYS, yet participants offer the recommendation to provide benefits to flex employees, specifically health insurance and sick leave. The consideration of workplace wellbeing and turnover intentions in this study prioritizes the needs and humanness of early childhood educators, which is a foundational element to providing quality care for young children.

Keywords

Early childhood educator, workplace wellbeing, military childcare, turnover

Acknowledgments

I extend my heartfelt gratitude to my own military family. To my husband Mike and children Liz and Lucas—thank you for your constant love and inspiration. I appreciate your patience and understanding as I spent evenings, weekends, and holidays working on my doctoral studies. I remember times I was not sure if I could keep going and you would just laugh and say, "We know you're going to finish!" Thank you for your unwavering support and for believing in me. I love you all to the moon and back!

To my dissertation committee, thank you for your selfless dedication to my scholarly growth. To my dissertation chair, Dr. Laura Wangsness-Willemsen, you became my confidant, encourager, and advocate. Thank you for sharing your knowledge and expertise with me throughout my studies, research, and writing. You have been instrumental in my advancement as a student, professional, and researcher. You pushed me to "take my rightful place in the research community" and for that I am forever grateful. My committee members, Dr. Bryan Bass and Dr. Peter Craig—thank you for your guidance throughout this process. To Dr. Bass who helped me frame the original research questions—thank you for your sound advice and helping me put my ideas into words. Dr. Craig, I value your support and push to "define wellbeing." My thanks also extend to Dr. Julio Caesar, research scientist extraordinaire! Thank you for your guidance on my quantitative research journey.

To Dorothy Vaught-Brown, IMCOM G9 CYS Programs Branch Chief, thank you for your encouragement, for pushing me when needed, and for lighting the path to my research completion. To Mr. Paul Burk, IMCOM G9 Director, thank you for your support and for granting the approval to conduct this research. I hope the findings from this study will contribute to the continual improvement of Army CYS programs.

Dedication

This dissertation research study is dedicated to the early childhood educators caring for military children around the world—the essential workers to Soldiers and DoD Civilians. Their dedication to the service of others often comes at the price of sacrificing their own wellbeing. Let this dissertation research be a reminder of their importance and ignite the conversation to support their workplace wellbeing.

Table of Contents

CHAPTER 1: INTRODUCTION	1
Introduction	1
Code of Ethics	3
Statement of the Problem	4
Statement of the Study Purpose	6
Presentation of Specific Research Questions	6
Significance of the Study	7
Brief Overview of Previous Research	8
Overview of the Research Sites	10
Position of the Researcher	11
Definition of Terms	12
Paradigm	14
Theoretical Framework	15
Limitations	25
Preview of Findings	26
Conclusion	28
CHAPTER 2: REVIEW OF LITERATURE	30
Introduction	30
History of Military Childcare	34

1930-1949	34
1950-1959	35
1960-1979	36
1980-1989	39
The Military Child Care Act of 1989	42
Military Child Care Today	47
Early Childhood Educator Wellbeing	49
Early Childhood Educator Wellbeing: The Influence on Children	50
Physical Factors Influencing Early Childhood Educator Wellbeing	54
Physical Demands of the Job	55
General Health	56
Organizational Factors Influencing Early Childhood Educator Wellbeing	57
Administrative Processes: Adult-Child Ratios, Paperwork & Meetings, and Sta	ff Schedules
	58
Professional Development	62
Compensation and Benefits	64
Emotional Factors Influencing Early Childhood Educator Wellbeing	67
Feelings of Value and Purpose	67
Stress and Emotional Exhaustion	69
Professional Relationships Influencing Early Childhood Educator Wellbeing	71

Relationships with Children and Families	72
Relationships with Co-Workers and Leaders	74
Conclusion	76
CHAPTER 3: METHODOLOGY	77
Introduction	77
Research Design	77
Participants and Setting	79
Role of the Researcher	81
Research Ethics	82
Instrumentation	85
Procedures and Analysis	88
Sampling	89
Obtain Permissions	90
Data Sources	92
Data Collection	93
Data Analysis	94
Limitations	98
Conclusion	99
CHAPTER 4: FINDINGS	100
Early Childhood Educator Workplace Wellbeing Theoretical Framework	101

Findings Related to Each ECE Workplace Wellbeing Domain
Physical Factors Influencing Early Childhood Educator Wellbeing
Physical Requirements of the Job
General Health124
Illness Prevention
Organizational Supports Influencing Early Childhood Educator Wellbeing127
Administrative Processes: Adult-Child Ratios, Paperwork, Meetings, and Staff Schedules
127
Professional Development
Compensation and Benefits
Emotional Factors Influencing Early Childhood Educator Wellbeing
Feelings of Purpose136
Feelings of Value
Stress and Emotional Exhaustion
Professional Relationships Influencing Early Childhood Educator Wellbeing140
Relationships with Children and Families
Relationships with Co-Workers
Relationships with Leaders144
Conclusion
CHAPTER 5: DISCUSSION148

Implications and Recommendations for Scholarship	149
The "Dynamic State" of the ECE Workplace Wellbeing Theoretical Framework	150
Replication of Scholarly Research	150
Implications and Recommendations for Policy	151
Fair Pay and Benefits for All	151
Maintain Adult to Child Ratios in Accordance with NAEYC Guidelines	153
Implications and Recommendations for Practice	154
Show Care and Appreciation of ECEs	155
Provide a Consistent Staff Schedule and Breaks for ECEs	156
Prioritize the Health of ECEs	157
Conclusion	158
References	160
Appendix A: Acronyms	173
Appendix B: University IRB Approval	174
Appendix C: U.S. Army Human Research Protections Office (AHRPO) Administrative	
Review Approval	175
Appendix D: Army Records Management and Declassification Agency (RMDA) Survey	
Approval	177
Appendix E: ECE Workplace Wellbeing Participant Flier	178
Appendix F: Informed Consent	179

A 1' C	E 1 (21.11.11	1171	337 1 1	XX 7 111 '	O 4: .	10
Appendix G:	Early Childhoo	od Educator	workplace	wellbeing	Questionnaire	·181

List of Tables

Table 1: Early Childhood Educator Workplace Wellbeing Theoretical Framework References to
Previous Research
Table 2: Army Child and Youth Services Customized Childcare Solutions for the Military
Family
Table 3: National Association for the Education of Young Children Adult to Child Ratios 58
Table 4: Army Child Development Center Standardized Floorplan
Table 5: Relationship of Workplace Wellbeing Domains, Indicators, and Rating Scale Questions
87
Table 6: Implementation Matrix
Table 7: Dependent, Independent, and Categorical Variables
Table 8: Scaled Response Percentages, Mean, and Standard Deviation by Scale Item 105
Table 9: Intercorrelations Between Early Childhood Educator Workplace Wellbeing Domains
110
Table 10: Second-Order Confirmatory Factor Analysis Results
Table 11: Analyses of Early Childhood Educator Wellbeing Scale Items
Table 12: Demographic Results
Table 13: Summary of Logistic Regression Analysis for Variables Predicting Turnover 117
Table 14: Percent of Army Early Childhood Educators Responding to the Frequency of Each
Workplace Wellbeing Indicator
Table 15: Workplace Wellbeing Scale by Domain and Indicator

List of Figures

Figure 1:	Early Childhood Educator Workplace Wellbeing Theoretical Framework	7
Figure 2:	One-stage Cluster Random Sample Subgroups) 1
Figure 3:	Early Childhood Educator Workplace Wellbeing Theoretical Framework10)4
Figure 4:	Early Childhood Educator Workplace Wellbeing Confirmatory Factor Analysis	
Structural	Model)9
Figure 5:	Early Childhood Educator Workplace Wellbeing Codebook in NVivo	23

CHAPTER 1: INTRODUCTION

Introduction

I stay because of the impact I see I can make not only on military children, but on their families and the staff I work with. It may not be a job that people look at in a way that we are really making a difference, but if there were no CDCs [child development centers] currently, in the middle of the coronavirus, the rest of the Army community would suffer because of it. This is a very difficult job and what we've been asked to do through coronavirus is more than any other places of business we know. It has affected us physically, emotionally, and socially. Still, every day I believe we are making a difference and that the children need us, the families need us, and the staff I work with need support. This is why I stay. I stay because I believe in this program.

Army CYS Child and Youth Program Assistant—November 2020

The above response from an Army Child and Youth Program Assistant (henceforth this position will be identified as an early childhood educator, or ECE) provided an unexpected yet profound summary of this dissertation research study in the findings. Early childhood educators provide care and support to children, children's families, and co-workers with rare consideration of their own workplace wellbeing. They find purpose and meaning in their work with children, even if others may not fully recognize or appreciate their contribution. This research study explored workplace wellbeing and turnover intentions of early childhood educators working in Army child development centers (CDCs) during the coronavirus pandemic. The domains of workplace wellbeing that guide the examination of wellbeing within this dissertation are a) organizational supports, b) emotional wellbeing, c) physical wellbeing, and d) professional relationships. Combined, these wellbeing domains provide a robust construct of overall workplace wellbeing, central to this study.

The workplace wellbeing of early childhood educators directly relates to the quality of their relationships, interactions, and attachments with young children, all of which affect how young children develop and learn (Castle et al., 2016). Furthermore, research from the civilian sector indicates low levels of workplace wellbeing influences ECEs' desire to leave the profession, resulting in high percentages of ECE turnover and decreased consistency for the children they care for (Grant et al., 2019; Kwon et al., 2020). Although consistency in childcare is likely to be especially valuable for military children due to the frequent life changes military families endure, ECE turnover nevertheless remains an issue within Army child development centers (CDCs). This is puzzling considering Congress passed the Military Child Care Act of 1989 over 30 years ago, which off-set many of the same factors civilian ECEs most commonly identify as negatively impacting their wellbeing today: low pay and benefits; high staff to child ratios; and lack of training. Concern regarding turnover suggests the need to better understand the wellbeing of ECEs working in military childcare to potentially reduce the current issue of turnover in Army CDCs.

Military childcare, available to children of soldiers and Department of Defense (DoD) Civilians, is based on the mission to "enhance readiness by decreasing the conflict between parental responsibilities and mission requirements" (Zellman et al, 2009, p. 439). The military considers childcare a critical element to combat readiness since if soldiers are concerned about the safety and care of their own children, they are unable to focus on their mission. Deterred mission focus of soldiers has the potential to result in injury or death. The Department of Defense has invested significant time and resources to ensure military childcare is nationally accredited, high-quality, and based on best practices in child development research to bridge the gap between parental responsibility and the military mission. Today's high-quality military

childcare programs have been recognized by many as the best and President Bill Clinton, the Carnegie Corporation, the National Research Council, and the Institute of Medicine have all called the Department of Defense (DoD) childcare system "The Model for the Nation" (Floyd & Phillips, 2013, p. 80). This prestigious designation for childcare programs instills pride across the Army Child and Youth Services (CYS) workforce.

While research into the factors that influence ECE wellbeing in civilian and university early childhood programs is currently a high-interest topic (Cumming, 2015, Cumming & Wong, 2019, Kwon, 2020), this study is the first to explore the factors that impact the workplace wellbeing and turnover of ECEs working in Army CDCs. In response to this limited research, the purpose of this exploratory mixed-methods dissertation research study was to assess workplace wellbeing factors that influence the wellbeing of ECEs working in Army CDCs and how these factors relate to the ECE's intentions to leave the profession.

Code of Ethics

Consideration of ethical conduct informs my work with young children and early childhood educators and thus, was prioritized as an initial and ongoing examination throughout this dissertation research study. The National Association for the Education of Young Children (National Association for the Education of Young Children [NAEYC], 2019) Code of Ethical Conduct is the ethical framework that guides early childhood professionals and is at the core of my practice and research. The Military Child Care Act of 1989 requires Army Child and Youth Services child development centers to achieve and maintain national accreditation. Army CYS utilizes the NAEYC accrediting body, the gold standard of early childhood programs, and CYS early childhood educators follow the NAEYC Code of Ethical Conduct, which defines the core values of the field. While the primary commitment of the NAEYC Code of Ethics is to adhere to

the ethical responsibilities to children, the Code also includes an ethical commitment and responsibility to early childhood educators themselves. The NAEYC Standard 6 "Staff Competencies, Preparation, and Support" sets forth ethical guidelines that "encompass program policies and procedures that support staff wellbeing, empowerment, and overall quality of work life" (NAEYC, 2019). The ethical commitment to a supportive work environment for early childhood educators is the foundation of the current research study into the workplace wellbeing factors associated with early childhood educator turnover, and centers specifically around the following NAEYC quality indicator:

1-3.1—To create and promote policies and working conditions for early childhood educators that are physically and emotionally safe and foster mutual respect, cooperation, collaboration, competence, wellbeing, confidentiality, and self-esteem. In a caring, cooperative workplace, human dignity is respected, professional satisfaction is promoted, and positive relationships are developed and sustained. (NAEYC, 2019)

Findings from the current dissertation research study provide insights into the workplace wellbeing and turnover intentions of CYS ECEs that may be used to promote the caring and cooperative workplace NAEYC describes.

Statement of the Problem

The problem of ECE turnover is prevalent in civilian and military childcare programs and has a detrimental impact on children, families, teachers, and the organization, such that "25-50% of ECEs leave their position annually" (Kwon et al., 2020, p. 1). When examining problems, military agencies frequently conduct a root cause analysis to determine the underlying cause, not just the deficiencies or symptoms of an issue (10 U.S. Code § 2438 - Performance Assessments and Root Cause Analyses, n.d.). But what is the root cause of ECE turnover in military childcare

programs? This dissertation research explored workplace wellbeing as a possible "root cause" of ECE turnover within Army Child and Youth Services.

Understanding the work factors that influence ECE wellbeing may be a critical element to supporting increased quality childcare and consistency since teacher wellbeing impacts the relationships, attachments, and interactions teachers experience with children along with their intentions to leave the profession (Grant et al., 2019). Previous research on civilian childcare organizations indicated factors such as pay and benefits, organizational and social devaluing of the profession, physical and emotional demands of the job, and relationships with leaders, coworkers, children, and families all influence ECE wellbeing (Cumming, 2017). Early childhood educator turnover in military childcare is exacerbated by the extensive amount of time it takes to recruit and onboard new employees and receive the required background check clearances to begin work. The replacement of CYS ECEs who quit can take up to a year, and sometimes longer, causing staffing shortages and additional strain on the program (Kamarck, 2020, p. 23). The negative impact of turnover on children, families, teachers, and the organization is farreaching since the bonds and relationships between children and ECEs are broken, comradery and esprit de corps among co-workers is jeopardized, and the financial cost of hiring and training new employees is extensive.

Despite running the largest employer-sponsored childcare program in the United States, there is limited research on the wellbeing of ECEs working in military programs and how wellbeing is associated with turnover. The Military Child Care Act of 1989 established policy to improve military childcare and support the military childcare workforce in ways such as: pay requirements, benefits, training, adult-child ratios, parent advisory boards, and accreditation and inspection processes (Byron, 1989). These interventions changed the landscape of military

childcare and set it apart from civilian programs. The issues in military childcare that were improved over 30 years ago are many of the same concerns current research on civilian childcare providers of today report as contributing to their lack of workplace wellbeing.

Statement of the Study Purpose

The purpose of this questionnaire based mixed-methods research study was to assess workplace wellbeing factors that influence the wellbeing of early childhood educators working in Army child development centers and how these factors are associated to the ECE's intentions to leave the profession. The results of this study are intended to assist Army CYS policymakers in the development of policy and practices that support the wellbeing of the military childcare workforce and reduce turnover. The factors used to conceptualize ECE workplace wellbeing were informed by previous research on the topic, NAEYC indicator 1-3.1, and Cumming's (2018) holistic definition of ECE work-related wellbeing. This study explored ECE organizational supports, emotional wellbeing, physical wellbeing, and professional relationships to form the ECE Workplace Wellbeing Theoretical Framework employed in this study.

Presentation of Specific Research Questions

Four overarching research questions focused on early childhood educator workplace wellbeing and intentions to leave the profession guided the work of this dissertation. The first two research questions specifically align with the early childhood educator wellbeing theoretical framework used in this study and the relationship of these factors to intentions to leave the profession. The third and fourth questions are specific to Army CYS and the reasons why early childhood educators continue to work for CYS along with their recommendations for organizational improvements to better support educator wellbeing and reduce turnover.

RQ1: What influence do wellbeing factors (that is, organizational supports, emotional wellbeing, physical wellbeing, and professional relationships) reported by ECEs working in Army CDCs have on their workplace wellbeing?

RQ2: Do these workplace wellbeing factors have an effect on the turnover intentions of ECEs working in Army CDCs?

RQ3: What do early childhood educators identify as their reasons to continue working with CYS (retention)?

RQ4: What do early childhood educators working in Army CDCs recommend to better support the wellbeing of ECEs and reduce turnover?

These research questions were answered through mixed methods utilizing a questionnaire variant composed of scaled, demographic, and open-ended responses. A confirmatory factor analysis was utilized to answer research question one to determine the validity of the four-domain construct as overall workplace wellbeing. Research question two was answered through the use of a logistic regression analysis to assess the predictive quality of the workplace wellbeing construct to intentions to stay or leave working in CYS. Research questions three and four were answered through the use of open-ended questions. The data generated from the open-ended questions were structurally coded in NVivo to mirror the domains and indicators of the workplace wellbeing theoretical framework guiding this study. These qualitative data were triangulated with the quantitative data to further test the validity of the model and also hear the voices of early childhood educator participants.

Significance of the Study

This study is significant since understanding the factors that impact ECE wellbeing and turnover implications within the largest employer-sponsored childcare system in the U.S. has the

potential to: (a) improve ECE retention, thereby improving program consistency and child wellbeing, and (b) inform organizational decision makers in the development of programs that best support workforce wellbeing. The findings from this research study have the potential to make a direct impact on improving high quality programs and reducing turnover, which benefits the workforce, military children, soldiers, family members, and Army readiness. Since the Army CYS workforce consists of a high percentage of military spouses, further understanding ECE workplace wellbeing has the potential to influence a soldier's willingness to stay in the Army, which impacts the retention of soldiers.

Brief Overview of Previous Research

The extensive review of literature surrounding ECE workplace wellbeing and turnover in this dissertation resulted in the development of the ECE Workplace Wellbeing Theoretical Framework guiding the current research study. The four main ECE workplace wellbeing factors, or domains include: ECE physical wellbeing, ECE emotional wellbeing, ECE professional relationships, and organizational supports. The development of indicators for each ECE workplace wellbeing domain were also established and used as sub-categories. The organization of this dissertation, review of literature, theoretical framework, and questionnaire follow these four domains and underlying indicators. A more in-depth examination of previous research supporting each of these domains and indicators is explored further in the Chapter 2 literature review.

The first body of literature is focused on the physical factors influencing ECE wellbeing.

The ECE Physical Wellbeing domain of the theoretical framework which guided the current study includes the following indicators: physical demands of the job, general health, and illness prevention. Previous research indicated the physical demands and exposure to the communicable

diseases of children is a common issue in childcare programs (McGrath, 2007) and many ECEs do not have employer sponsored health insurance (Otten et al., 2019, p. 710). The combination of physically demanding work, illness exposure, and lack of healthcare benefits presents a workplace wellbeing concern for many ECEs.

The second body of literature examines the organizational supports influencing ECE wellbeing. The Organizational Supports domain in the theoretical framework which guided the current study includes the following indicators: administrative processes (adult-child ratios, paperwork and meetings, and staff schedules), professional development, and compensation/benefits. Many researchers pose a call to action for childcare programs to implement organizational supports that better support the workplace wellbeing of ECEs. "We must go beyond training and reforms to practice by modifying psychosocial working conditions (i.e., increasing financial security, social support, and respect) in the early childhood system" (Corr et al., 2015, p. 76). Organizational supports are tangible practices and policies that contribute to the workplace wellbeing of ECEs.

The third body of literature includes the emotional factors influencing ECE wellbeing. The ECE Emotional Wellbeing domain in the theoretical framework which guided the current study includes the following indicators: feelings of value and purpose, stress, and emotional exhaustion. Childcare has historically been a devalued profession and viewed by some as simply "babysitting" (Harwood & Tukonic, 2016). While research into the rapid brain development in the early years has increased the importance of childcare, the value of ECEs as professionals has not (Phillips et al., 2016). The emotional wellbeing of ECEs is influenced by the systemic and historical devaluing of the profession. A more in-depth consideration of these influences on emotional wellbeing are presented in the Chapter 2 literature review.

The final body of literature is centered on the professional relationships influencing ECE wellbeing. The ECE Professional Relationships domain in the theoretical framework which guided the current study includes the following indicators: relationships with children and families, relationships with co-workers, and relationships with leaders. Previous research indicated professional relationships with internal and external individuals impact an employee's desire to stay with an organization. Cumming (2017) described strong workplace relationships as building a "sense of community and creates a work environment that builds employee wellbeing" (p. 52). While positive relationships often serve as a buffer or relief to work stress, conversely, negative, or strained relationships are reported as reasons for quitting.

Previous research on ECEs working in civilian childcare programs indicated a link between workplace wellbeing to quality interactions and turnover (Cumming, 2017; Cumming & Wong, 2019, Grant et al., 2019; Hall-Kenyon et al., 2014; Hamre & Pinata, 2004; Jeon et al., 2016; Kwon et al., 2020). This study aimed to contribute to this growing body of research surrounding the implications of ECE workplace wellbeing on turnover by assessing the workplace wellbeing and quitting intentions of ECEs working in Army Child and Youth Services.

Overview of the Research Sites

This dissertation research study was conducted at 34 Army CYS child development centers located on 15 Army installations in 9 states, 5 countries, and one US. Territory. Soldiers and DoD Civilians are authorized to receive care for their children aged six weeks to five years old at Army CDCs. According to the Army CYS FY20 Annual Report, CYS employed 5,465 early childhood educators located at one of the Army's 187 CDCs.

Army installations resemble cities and have homes, apartments, office buildings, airstrips and heliports, post exchange (shopping mall), commissary (grocery store), shoppettes (gas stations), schools, and CDCs. The CDCs located on Army installations worldwide are inspected and regulated by Installation Management Command (IMCOM) Army Child and Youth Services and receive their certification to operate from the Department of Defense (DoD).

Position of the Researcher

When considering my position as researcher, my mind immediately reflects on the term "raison d'être." Raison d'être is defined as the "most important reason or purpose for someone or something's existence" (Dictionary by Merriam-Webster, n.d.). My reason for existence, or raison d'être, is clear: to care for military children. This includes my own two children, children of friends, children in the various Family Readiness Groups (FRG) I have participated in and led, and the children in CYS programs. I started working with Army Child and Youth Services in 2000 and have served in several capacities and locations (Fort Campbell, KY; Fort Rucker, AL; Fort Hood, TX; Fort Bliss, TX, and now Fort Sam Houston, TX). The positions I have held in CYS include Training Specialist, Lead Training Specialist, and my current position as the Installation Management Command (IMCOM) Headquarters CYS Child Development Program Specialist. My current position entails providing installation CYS support in the areas of National Association for the Education of Young Children (NAEYC) accreditation, curriculum, child development best practices, and staff training. The Army CYS organizational mission is to "support soldiers and their families by reducing the conflict between parental responsibilities and mission readiness." My role in supporting and advancing the CYS mission is to ensure CYS employees receive the most relevant, research-based training, programming, personnel

development, and support so they are equipped to provide the highest quality childcare for military children.

Definition of Terms

Army Child Development Center (CDC): Department of Defense operated, facility-based child care facility primarily for children aged six weeks to five years old (Kamarck, 2018, p. 6).

Attachment: Attachment is a deep and enduring emotional bond that connects one person to another across time and space (Mooney, 2009). Attachment theory explains how the parent-child relationship emerges and influences subsequent development. This research study extends attachment to the strong bond between the child and early childhood educator.

Child and Youth Program Assistant (CYPA): The official position title of all Army CYS direct-care personnel providing care for children and youth aged 6 weeks to 18 years old. The current dissertation research study includes CYPAs working only in Army child development centers with children six weeks to five years old. The term early childhood educator (ECE) is used throughout this study to differentiate the CYPAs to those working with young children.

Department of Defense Installation: A facility subject to the custody, jurisdiction, or administration of any Department of Defense component. This term includes, but is not limited to, military reservations, installations, bases, posts, camps, stations, arsenals, vessels/ships, or laboratories where a Department of Defense component has operational responsibility for facility security and defense (JP 3-26 US DoD).

Early Childhood Educator (ECE): The U.S. Department of Education defines early childhood educators as "any professional working in early learning and development programs,

including but not limited to center-based and family child care providers, infant and toddler specialists, early intervention specialists and early childhood special educators, home visitors, related service providers, administrators, teachers, teacher assistants, family service staff, and health coordinators" (U.S. Department of Education, 2020). The early childhood educators in the current research study care for and teach young children aged six weeks to five years old in Army child development centers.

Military Readiness: The Congressional Research Service refers to military readiness "in a broad sense to whether U.S. military forces are able to do what the nation asks of them. In this sense, readiness encompasses almost every aspect of the military" (Rumbaugh, 2017, p. 1). Military childcare is one aspect that supports military readiness since soldiers must receive care for their children while they perform their duty and serve the nation.

Military Retention: According to the Congressional Research Service Primer for Active Duty Enlisted Retention, "The term retention refers to the rate at which military personnel voluntarily choose to stay in the military after their obligated term of service has ended" (Kapp, 2020, p. 1).

Military Spousal Hiring Preference: Military Spouse Preference (MSP) is a special federal hiring authority that allows spouses to be noncompetitively considered for federal positions (Executive Order Enhancing Noncompetitive Civil Service Appointments of Military Spouses, May 2018).

Turnover: The rate at which employees leave a workforce and are replaced (Dictionary.Com, n.d.).

Paradigm

Making sense of knowledge is one of the purposes of research, and this holds true in this exploratory research study. This study aligns at the intersection between the pragmatic paradigm which is "outcome-oriented and interested in determining the meaning of things" (Baker, 2018, p. 322) and the constructivist paradigm where "meaning making activities themselves are of central interest" (Guba & Lincoln, 2018, p. 197). There are many ways to make meaning of wellbeing. My construction of "wellbeing" is only one lens through which this phenomenon can be viewed. I have attempted to construct one "agreement about truth" by accepting the realities and work of the ECE workplace wellbeing research community and the Army early childhood educator study participants (Guba & Lincoln, 2018, p. 204). These "camps" (previous researchers and ECEs themselves) informed the construction of the theoretical framework, or meaning making activity, of ECE workplace wellbeing. "The pragmatist is free to study what interests you and is of value to you, study it in different ways that you deem appropriate, and utilize the results in ways that can bring about positive consequences within your value system" (Tashakkori & Teddlie, 1998, p. 30). This pragmatic acceptance of the flexibility of research topic and methodology supports the mixed methods employed in this study along with the aim to understand the association between workplace wellbeing and turnover, which is outcome based.

Both the constructivist and pragmatic paradigms involve the researcher's activity of making meaning of words and concepts. Guba and Lincoln (2018) further discussed the importance of meaning making activities "because it is the meaning-making/sense-making/attributional activities that shape action (or inaction)" (p. 197). Much of this exploratory dissertation research was focused on the activity of making meaning of ECE workplace wellbeing itself to then study the connection between wellbeing and turnover. The definition and

conceptualization of ECE workplace wellbeing has different meanings for different researchers, and no one lens is absolute.

The following section describes this pragmatic-constructivist "meaning making activity" of ECE workplace wellbeing into the formation of the ECE Workplace Wellbeing Theoretical Framework. This framework draws upon the work of previous researchers, participant data from the current study, and my own experience as an early childhood educator and researcher to make sense of and organize ECE workplace wellbeing. "There is no theory-free perception of the world, because we can only relate to the world by applying our own mental categories, words and frameworks" (Reiter, 2013, p. 4). As previously identified, this is one lens to view ECE workplace wellbeing. Wellbeing is a term with no absolute parameter. Shared meaning making was my priority.

Theoretical Framework

The theoretical framework guiding this study was constructed based on previous research examining ECE workplace wellbeing, NAEYC quality indicator 1-3.1, and Cumming and Wong's (2019) early childhood educator wellbeing definition of early childhood educator workplace wellbeing. Cumming and Wong (2019) acknowledged the difficulty of defining ECE wellbeing due to the multitude of factors influencing wellbeing and focused their research on specifically defining ECE wellbeing for this reason. "The conceptualization of this definition includes the philosophical perspectives, psychological perspectives, physiological wellbeing, and work related wellbeing factors" (Cumming & Wong, 2019, p. 276). The Cumming and Wong definition of early childhood educator wellbeing, which the current study followed, is:

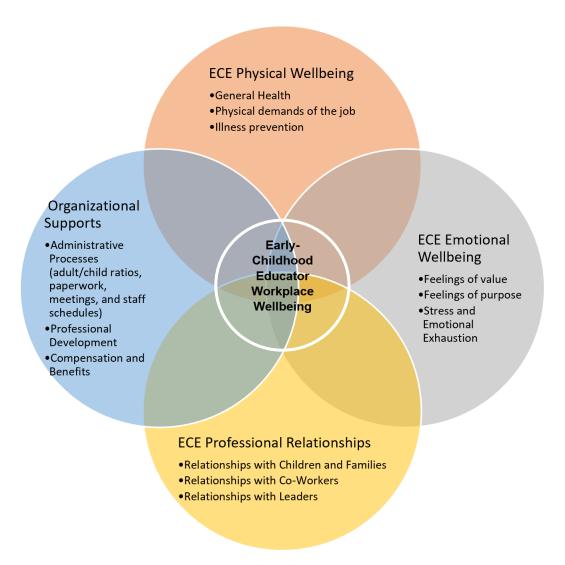
A dynamic state, involving the interaction of individual, relational, work-environmental, and sociocultural—political aspects and contexts. Educators' wellbeing is the

responsibility of the individual *and* the agents of these contexts, requiring ongoing direct and indirect supports, across psychological, physiological, and ethical dimensions. (p. 276)

This definition considers the many internal and external influences on ECE wellbeing while recognizing the shared responsibility between the individual and the organization. Cumming and Wong (2019) encouraged future researchers to use this definition to base their research and provide a holistic perspective of ECE wellbeing. The current study aligns with this idea since it looked at the multi-dimensional and "dynamic" aspects of the wellbeing of ECEs working in Army CDCs. The early childhood educator theoretical framework guiding the current research study is depicted in Figure 1 below which incorporates overlapping domains that influence each other, reflecting the dynamic human experience of wellbeing.

Figure 1

Early Childhood Educator Workplace Wellbeing Theoretical Framework



As shown in Figure 1, this theoretical framework has four domains which are used to examine the wellbeing of ECEs working in military childcare programs. One of the most important considerations of the ECE Workplace Wellbeing Theoretical Framework is that the workplace wellbeing domains overlap to demonstrate that wellbeing factors are influenced by each other and together form the central, overall ECE workplace wellbeing. This process aligns with the definition of ECE wellbeing from Cumming and Wong (2019) in that "wellbeing is a

dynamic state" to develop the theoretical framework of wellbeing in the current dissertation research study.

Beyond the Cumming and Wong (2019) definition of early childhood educator wellbeing, the theoretical framework which guided the current research study was also influenced by previous researchers examining ECE workplace wellbeing. Much of the previous research is centralized on one factor of wellbeing, such as the impact of pay and benefits or depression on wellbeing. Other researchers, such as the Kwon et al.'s (2020) "Happy Teacher Project" conceptualize ECE wellbeing by domains. The ECE Workplace Wellbeing Theoretical Framework in this study includes domains and indicators that overlap and influence each other. This represents the "dynamic" nature of wellbeing that Cumming (2019) described. Further, the selected domains and indicators utilized in the current study consider the military culture and boundaries. For example, mental health issues such as depression are not included in this framework. Instead, emotional wellbeing is included with underlying indicators directly impacted by the workplace environment. The following sections are intended to give credit to the researchers who have informed the foundation for the current study.

The "ECE Physical Wellbeing" domain of the theoretical framework which guided this study was drawn from previous research examining the physical wellbeing of ECEs (Hendricks, 2015; Kwon, 2019; McGrath & Huntington, 2017; Otten, 2019). McGrath & Huntington's (2017) research contributed to the general health and physical demands of the job indicators of the physical wellbeing domain in this study's framework. Hendricks (2019) and Otten et al.'s (2019) research contributed to data regarding illness prevention and access to health care of ECEs. Kwon (2019) identified physical wellbeing indicators as general health, obesity, ergonomics, and cardiovascular exercise in the Oklahoma University and John's Hopkins

"Happy Teacher Project: Supporting Early Childhood Educator Wellbeing." The ECE physical wellbeing domain in this research study's theoretical framework includes general health, physical demands of the job, and illness prevention as the indicators. As the literature review explains further, research indicated many ECEs working in the civilian sector identify health concerns such as exposure to communicable diseases and constant physical demands such as bending, stooping, lifting, and sitting on the floor as negatively influencing their workplace wellbeing.

The "Organizational Supports" domain in the theoretical framework which guided this study includes administrative processes such as adult to child ratios (Torquati et al., 2007), paperwork (Faulkner et al., 2016; Ylitapio-Mantyla et al., 2012), and meetings (Travis et al., 2014). Organizational supports also include the professional development of ECEs related to workplace wellbeing (Boyd, 2013; Phillips et al., 2016; Torquati et al., 2007; Travis et al., 2014), and compensation and benefits (Corr et al., 2014; Corr et al., 2015; King et al., 2016; Kwon et al., 2019; Modigliani, 1986; Phillips et al., 2016). As previously mentioned, Cumming and Wong's (2019) definition of ECE wellbeing indicates "wellbeing is the responsibility of the individual *and* the agents of these contexts" (p. 276). The literature review provides a comprehensive examination of the previous research surrounding the organizational supports of ECEs and it is proposed that organizational supports are the responsibility of the "agents" of the childcare organization.

The current theoretical framework includes "ECE Emotional Wellbeing" rather than "psychological wellbeing" and specifically "depression" as a workplace wellbeing factor, as several previous research studies have utilized (Hamre & Pinata, 2004; Jeon et al., 2014; Papero, 2005, Roberts et al., 2016). The use of "emotional wellbeing" as a primary domain was

determined due to the mental health connection to psychological wellbeing. Evaluating psychological wellbeing in terms of mental health concerns, such as depression, is a direction the current study does not approach. Emotional wellbeing in this study includes feelings of value (Boyd, 2013; Faulkner et al., 2016; Harwood & Tukonic, 2016; Modigliani, 1986; Phillips et al., 2016), feelings of purpose (Boyd, 2013; Faulkner et al., 2016; Travis et al., 2014;), stress (Carson et al., 2017; de Schipper et al., 2009; Faulkner et al., 2016; Grant et al., 2019; McGrath & Huntington, 2007; Nislin et al., 2016; Travis et al., 2014), and emotional exhaustion (Jeon et al., 2017; Faulkner et al., 2019) in the workplace. These indicators of emotional wellbeing, as part of the ECE Workplace Wellbeing Theoretical Framework which guided this study, were focused on the emotions supported or not supported in the workplace. Additionally, I felt more qualified to request responses from participants regarding their emotional workplace wellbeing rather than requesting responses from participants regarding their psychological wellbeing, mental health, or depression which may be perceived as an intrusive practice by some, especially in the military.

Designating a specific workplace wellbeing domain for professional relationships is supported by research indicating the importance of positive relationships with children and families (Cadwell & Gandini, 1997; Faulkner et al., 2016; Hall-Kenyon et al., 2014; Hamre & Pinata, 2004; Travis et al., 2014;), co-workers (Cumming, 2015, 2017; Hur et al., 2016; Kwon et al., 2019; Liu et al., 2018; Travis et al., 2014), and leaders (Cumming, 2015, 2017; Kwon et al., 2019; Liu et al., 2018; Travis et al., 2014) and the influence of these factors on an ECE's intentions to leave the profession (Cumming, 2017; Faulkner et al., 2016; Kwon et al., 2020; Travis et al., 2014). As further explained in the literature review, professional relationships that

are positive often give ECEs the support they need to continue working. Alternatively, negative relationships with children, families, and leaders can impact an ECE's decision to quit.

Valuing the work from previous researchers was central to the development of the ECE Workplace Wellbeing Theoretical Framework. Huffman and Tracy (2018) support this focus by stating "without seriously considering what a particular community considers credible, it is all but impossible to engage in scholarship that draws together diverse communities to think and act together" (p. 559). The current dissertation research study is intended to join the military community of ECEs to the current body of research. The ECE workplace wellbeing research community is outlined in Table 1:

 Table 1

 ECE Workplace Wellbeing Theoretical Framework References to Previous Research

Domain	Indicator	Previous Research
Physical Wel	lbeing	
	General Health	(McGrath & Huntington, 2007) (McGrath, 2007): health and safety (Kwon, 2019) (Kwon, 2020): Excess weight, insufficient physical activity, ergonomic injuries. (Cumming, 2020) Child Care Aware of America (Hendricks, 2015) (Otten et al., 2019): food insecurity of ECEs—lacked the ability to consistently access enough food for an active and healthy life.
	Physical Demands of the Job	(McGrath & Huntington, 2007): physical demands of the job. (McGrath, 2007): physical demands and occupational hazards.

(Kwon, 2019) (Cumming, 2018) (Kwon, 2020): physical demands of the job

Illness prevention and access to health care

Child Care Aware of America (Hendricks, 2015)
(Otten et al., 2019): "workers generally did not have the luxury of staying home when sick."
(McGrath, 2007): bloodborne infections and illnesses (McGrath & Huntington, 2007): Exposure to infectious disease. Teachers are compelled to return to work after illness because of a lack of staff to cover, lack of leave, and loss of income.

Emotional Wellbeing

Feelings of value

(Modigliani, 1986) (Faulkner et al., 2016) (Phillips et al., 2016) (Faulkner et al., 2016): public perception as a babysitter. (Boyd, 2013): value as a professional. (Harwood & Tukonic, 2016) (Cumming, 2018): Reacknowledge the value of ECEs. (Cumming, 2020) (Gerstenblatt & Faulkner, 2013): Undervalued and high expectations (Kwon et al., 2020): Feeling valued and recognized. (Otten et al., 2019): Workforce whose members feel undervalued by society. (Yarrow, 2015)

Feelings of purpose

(Faulkner et al., 2016): Meaning and pride in work.

	Stress	(Boyd, 2013) (Travis et al., 2014) (Bullough & Hall-Kenyon, Spring 2012) (Bullough & Hall-Kenyon, June 2012) (Grant et al., 2019): Intrinsically motivated. (Smith, 2019) (McGrath & Huntington, 2007) (McGrath, 2007): Occupational stress (King et al., 2016) (Faulkner et al., 2016) (Carson et al., 2017) (de Schipper et al., 2009) (Nislin et al., 2015) (Nislin et al., 2016) (Grant et al., 2019) (Travis et al., 2019) (Travis et al., 2019) (Cumming, 2020) (Cumming, 2020) (Gerstenblatt & Faulkner, 2013) (Grant et al., 2019) (Hur & Jeon, 2015) (Jeon et al., 2017) (Jeon et al., 2018) (Jeon & Hur, 2016)
	Emotional Exhaustion	(Faulkner et al., 2016) (Grant et al., 2019) (Jeon et al., 2017) (Jeon et al., 2018) (Jennings, 2014) (Carson et al., 2017)
Professional Relat	ionships	
	Relationships with children and families	(Hamre & Pianta, 2004) (Travis et al., 2014) (Faulkner et al., 2016) (Cadwell & Gandini, 1997) (Hall-Kenyon et al., 2014) (Kwon et al., 2020) (Cumming, 2020) (Bullough & Hall-Kenyon, 2012)

	(Cumming, 2018)
	(Hur & Jeon, 2015)
	(Kwon, 2020a, 2020b) Happy
	Teacher Project
	(Lang et al., 2020)
	(McGrath & Huntington, 2007)
	(Nislin et al., 2015)
Relationships w	rith co-workers (Travis et al., 2014)
•	(Cumming, 2015)
	(Cumming, 2017)
	(Liu et al., 2018)
	(Kwon et al., 2020)
	(Hur et al., 2015)
	(Corr et al., 2015)
	(Nislin et al., 2015)
Relationships w	•
I	(Cumming, 2016, 2017, 2018,
	2020)
	(Liu et al., 2018)
	(Kwon et al., 2020)
	(Corr et al., 2015)
	(Kwon et al., 2020)
	(Corr et al., 2014)
Organizational Supports	(======================================
Administrative	processes: adult/child (Torquati et al., 2007): Ratios
	<u> </u>
	<u> </u>
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012):
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016):
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care (Kwon et al., 2020):
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care (Kwon et al., 2020): Administrative tasks and
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care (Kwon et al., 2020): Administrative tasks and continuity of care
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care (Kwon et al., 2020): Administrative tasks and continuity of care (Cumming, 2020): Burden of
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care (Kwon et al., 2020): Administrative tasks and continuity of care (Cumming, 2020): Burden of paperwork
ratios, paperwo	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care (Kwon et al., 2020): Administrative tasks and continuity of care (Cumming, 2020): Burden of paperwork (Jeon et al., 2015): Ratios
ratios, paperwo and staffing Professional De	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care (Kwon et al., 2020): Administrative tasks and continuity of care (Cumming, 2020): Burden of paperwork (Jeon et al., 2015): Ratios evelopment and (Boyd, 2013)
ratios, paperwo	(Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care (Kwon et al., 2020): Administrative tasks and continuity of care (Cumming, 2020): Burden of paperwork (Jeon et al., 2015): Ratios (Boyd, 2013) (Travis et al., 2014)
ratios, paperwo and staffing Professional De	rk, meetings, schedules, (Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care (Kwon et al., 2020): Administrative tasks and continuity of care (Cumming, 2020): Burden of paperwork (Jeon et al., 2015): Ratios (Boyd, 2013) (Travis et al., 2014) (Phillips et al., 2016)
ratios, paperwo and staffing Professional De	(Ylitapio-Mäntylä et al., 2012): Administrative tasks and paperwork (Faulkner et al., 2016): Paperwork/curriculum/planning (Travis et al., 2014): Meetings (Madill et al., 2018): Schedule and staffing (Papero, 2005): Continuity of care (Kwon et al., 2020): Administrative tasks and continuity of care (Cumming, 2020): Burden of paperwork (Jeon et al., 2015): Ratios (Boyd, 2013) (Travis et al., 2014)

	(Jeon et al., 2015) (Kwon, 2020b)
Compensation and Benefits	(Phillips et al., 2016)
Compensation and Benefits	(Boyd, 2013)
	(Modigliani, 1986)
	(Kwon, 2019)
	(King et al., 2016)
	(Corr et al., 2014)
	(Corr et al., 2015)
	(Kwon, 2020b)
	(Cumming, 2018)
	(Bullough & Hall-Kenyon,
	June 2012)
	(Faulkner et al., 2016)
	(Gerstenblatt & Faulkner,
	2013)
	(Hall-Kenyon et al., 2014)
	(Hendricks, Child Care Aware,
	2015)
	(Jeon et al., 2015)
	(King et al., 2016)
	(Kwon et al., 2020)
	(Phillips et al., 2016)
	(Torquati et al., 2007)

This section outlined the ECE Workplace Wellbeing Theoretical Framework guiding this study. It is also important to recognize that each early childhood organizational environment has their own culture and systems that impact employee wellbeing. To understand the wellbeing of ECEs working in Army CDCs, it is imperative to also understand the history and culture behind military childcare, which is addressed in the Chapter 2 literature review.

Limitations

An unexpected limitation that existed within this study was the outbreak of the COVID-19 pandemic that caused the rapid shut-down and reopening of many Army CDCs around the world. The disruption in operations that ensued meant multiple procedural concerns had to be

resolved, which resulted in additional training and protocols. Although strict health and safety procedures were implemented, the fear of contracting the virus weighed heavily on CYS staff, families, and leadership. The concerns surrounding the pandemic are therefore reflected in findings and present data under atypical circumstances. It is acknowledged that findings from this research study are specific to ECE workplace wellbeing and turnover intentions during a global pandemic.

The ECE Workplace Wellbeing Theoretical Framework and corresponding questionnaire were designed specifically for the current study and therefore have not been previously tested. This limitation is acknowledged since repetition of survey instruments increases the validity of the tool. This study sought to overcome this limitation by including multiple research methods to test the theoretical framework construct, as outlined in the Chapter 3 methodology and Chapter 4 findings.

Preview of Findings

The findings from this dissertation research study are presented in Chapter 4 by first examining the structure of the ECE Workplace Wellbeing Theoretical Framework and predictive quality of turnover to answer research questions one and two. Findings are then presented by each workplace wellbeing domain: organizational supports, physical wellbeing, emotional wellbeing, and professional relationships to answer research questions three and four. The following preview of findings will follow the same format.

The ECE Workplace Wellbeing Theoretical Framework developed for this study includes a corresponding questionnaire rooted in the holistic conceptualization of wellbeing that can be replicated in multiple contexts. A confirmatory factor analysis (CFA) was used to analyze the internal structure of overall workplace wellbeing that included the following domains of

workplace wellbeing: (a) organizational supports, (b) emotional wellbeing, (c) physical wellbeing, and (d) professional relationships. A confirmatory factor analysis verified the domains of the ECE Workplace Wellbeing Theoretical Framework as a robust construct of overall ECE workplace wellbeing.

A logistic regression model was then used to determine the predictive quality of overall workplace wellbeing on intentions to stay or leave the profession, taking into account demographic variables (size of the CDC, years working in CYS, spousal preference, and training level). The results of the logistic regression showed the log of the odds of a participant planning to stay in the workplace in the next 12 months was positively associated to the overall ECE workplace wellbeing, holding the demographic variables constant. The data results indicated the demographic variables and individual domains had no predictive value to turnover when considered individually; however, the overall workplace wellbeing of ECEs had a high association to turnover. In fact, for every one-unit increase in wellbeing factor score, findings indicate a 765% increase in the odds of planning to stay working in CYS.

Quantitative and qualitative data were then triangulated to answer research questions three and four in relationship to each domain of the ECE Workplace Wellbeing Theoretical Framework. The wellbeing mean score for each domain is based on a 1-4 scale indicating 1-2 as low workplace wellbeing, 2-3 as moderate workplace wellbeing, and 3-4 as high workplace wellbeing. The "professional relationships" domain resulted in the highest mean score of 3.16, indicating a high level of workplace wellbeing in this domain among CYS ECEs. Early childhood educators revealed their relationships with children as their main reason to stay working in CYS and they also reported feeling respected by the children's families. Further,

ECEs recommended improvements in the area of relationships with supervisors but found support and encouragement from their relationships with co-workers.

The "organizational supports" domain had a mean sore of 3.02, indicating high workplace wellbeing among CYS ECEs in this domain. Early childhood educators identified pay and benefits as reasons to stay working in CYS and offered the recommendation to provide benefits to flex employees, especially health insurance and sick leave. Additionally, ECEs indicated a consistent work schedule supports workplace wellbeing. However, when the work schedule is not consistent, it causes a high level of stress and emotional exhaustion in the "emotional wellbeing" domain, which resulted in a lower mean score of 2.97—indicating moderate workplace wellbeing in this domain.

The "physical wellbeing" domain findings include a mean score of 2.96 which is considered moderate workplace wellbeing in this domain. Early childhood educators indicated physical requirements of the job were not considered too much and proper cleaning and sanitation procedures were followed for illness prevention. Further, ECEs also identified the COVID-19 health and safety procedures as a benefit to the program and offered recommendations to managers to follow health protocols to send sick children home and encourage sick employees to stay home to promote their overall physical wellbeing.

Conclusion

Army CYS is the largest component in the Department of Defense childcare system and the organization's high-quality programs depend on a well workforce of early childhood educators. Many childcare organizations find value in assessing the factors that influence workforce wellbeing to reduce the expensive and detrimental issue of employee turnover. This

mixed methods research study introduces military childcare to the current workplace wellbeing body of literature.

The Chapter 2 literature review begins with the military childcare overview and history of federal and military childcare from the 1930s to present day. The purpose of this organizational overview and historical perspective is to lay the groundwork to understand the unique factors associated with the military childcare culture. The second part of the Chapter 2 literature review provides an in-depth examination of previous research on the factors influencing ECE wellbeing. The history of military childcare coupled with research on ECE wellbeing set the stage for this dissertation research study into the wellbeing of early childhood educators working in Army CDCs.

CHAPTER 2: REVIEW OF LITERATURE

Introduction

I've only ever known military life. My dad and my husband were both in the military. So, caring for military children holds a special place in my life. I understand the needs of the military family.

Army CYS Early Childhood Educator

The Department of Defense (DoD) operates the largest employer-sponsored childcare system in the United States and consists of Army, Air Force, Navy, and U.S Marine Corps (Kamarck, 2018, p. 1). According to the DoD Office of the Deputy Assistant Secretary of Defense and the Army CYS Fiscal Year 2019 Annual Report, Army Child and Youth Services is the largest service branch included in the DoD childcare system, employing over 10,824 staff members and serving over 100,000 children (Welch, 2019). Of these 10,824 Army CYS staff, 5,465 are early childhood educators working in Army child development centers. Early childhood educators in Army Child and Youth Services provide care for military children aged six weeks to five years old "that is high-quality and developmental in nature" (Kamarck, 2018, p. 3). This high-quality developmental care is dependent on the relationships, attachments, and interactions ECEs have with the military children in their care.

Military families requiring childcare have circumstances that are often-times quite different from civilian workers. "Unique child care needs that make childcare particularly important [for the military family] include varying and unusual duty hours and the lack of childcare support from extended family" (Morra, 1988, p. 4). The long working hours and deployments of soldiers contribute to difficulty in finding suitable childcare. "Service members may be required to work extended hours or shift work during times when normal day care

providers are not in operation—a problem that may be exacerbated with single-parent service members or in families where both parents are in the service" (Kamarck, 2018, p. 3). Army CYS offers childcare options to meet the needs of soldiers and their families since the mission of CYS is to reduce the conflict between mission readiness and parental responsibilities. Military childcare is a critical component to mission readiness and a contributing factor to soldier retention (Floyd & Phillips, 2013, p. 79). Military childcare promotes soldier readiness and retention by providing highly customized childcare solutions designed to meet the specific needs of the military family. These needs include programs that cater to long work hours, frequent moves, lack of consistency, and deployments. Table 2 below outlines some of the CYS customized solutions for the military family.

 Table 2

 Army CYS Customized Childcare Solutions for the Military Family

Military Family Childcare Needs	Army CYS Customized Childcare			
	Solutions			
Soldiers and DoD Civilians work long	Provides childcare options that include 24-			
hours and irregular schedules.	hour care. CDCs are open long hours.			
The safety and security of military children	Facilities are located on Army installations			
is a priority to soldiers and DoD Civilians.	behind secured gates that require			
	credentialing to enter. Facilities are under			
	24-hour surveillance and are always			
	locked—requiring credentialing for facility			
	entrance. Employees are trained on military			
	security measures.			
	•			
High quality childcare options so that the	All Army CDCs are required to be			
soldier can focus on the dangerous mission	nationally accredited and receive four			
and not worry about their child's wellbeing.	unannounced inspections per year along			
·	with daily/weekly/monthly oversight by			
	local leadership and officials.			
	•			
Soldiers and DoD Civilians are a transient	CYS CDCs are the same at every Army			
population, often moving to a new duty	installation. The buildings are all designed			
station every 2-3 years. Consistency for	by a standardized floor plan and materials			
young children is a concern.	are centrally funded/ordered when new			
, ,	facilities open. CYS employees world-wide			
	receive the same training. The curriculum is			
	the same at all CYS CDCs.			
Paperwork associated with registering and	Registration and re-registration are			
re-registering children for childcare is a	completed online. Registration paperwork			
burden on soldiers and DoD Civilians—	and shot records are transferred online to			
especially when moving to a new	the new installation for a smooth transition			
installation.	to the new childcare facility.			
The high cost of quality childcare.	The cost of Army childcare is on a sliding-			
<u>-</u> -	scale and is broken down into fee			
	categories based on the total family income.			

Army CYS supports the military family by providing quality childcare that supports the specific needs of a military family and by providing employment preferences to military spouses. The military spousal preference hiring policies assist military spouses with the challenges

associated with securing employment at the next duty station, which can be difficult and financially straining on military families. These hiring policies also have an impact on soldier retention. "The spouse's likelihood of being unemployed is a significant factor in the soldier's decision to leave the Army" (Schwartz et al., 1991, p. 386). A grounded theory research study seeking to understand military spouse employment experiences and perceptions resulted in the findings that military spouses are often discriminated against in the civilian sector workforce because employers do not want to invest time and money into an employee they know will have a permanent change of station in 2-3 years (Meadows et al., 2016). Army CYS mitigates this issue by providing military spouse preferential hiring practices and a job transfer program, Civilian Employment Assignment Tool (CEAT). The CYS workforce, many who are also military spouses, directly contribute to military readiness.

With the many hours young children spend with ECEs, research on educator wellbeing is important because early attachments and relationships with caring adults are how young children learn to trust others, develop social-emotional wellbeing, and establish their own self-worth (Carson et al., 2017). Young children learn and develop through the relationships, attachments, and interactions with the adults who care for them, which makes understanding ECE wellbeing necessary for promoting quality relationships and attachments with young children in childcare settings. It can also be argued that the wellbeing of ECEs working in military childcare is especially important due to the unique challenges facing military families.

The following section begins by outlining the history of military childcare to build an understanding of the Army CYS organization and culture. The literature review then provides research informing the impact of ECE wellbeing on young children and the domains related to the workplace wellbeing of ECEs: organizational supports, emotional wellbeing, physical

wellbeing, and professional relationships. This combination of military childcare culture and ECE wellbeing research provides the context for this dissertation research study.

History of Military Childcare

I love working with military children and supporting the Army community—I feel it is my way of giving back by helping the military. Soldiers feel at ease when they are work because they know that their children are safe and loved while in our care.

Army CYS Early Childhood Educator

The history of military childcare provides the background leading to the military childcare culture and programs of today. Military childcare culture is important to understand prior to considering new programs and improvements. The history of military childcare has prodded leaders and policymakers to learn from past experiences and implement programs and solutions that promote high-quality programs and reduce the risk of repeating past mistakes, resulting in becoming the childcare model for the nation (Office of the Press Secretary, 1997). Continuing this legacy of high-quality programs relies on sustained evaluation and ongoing program improvements.

1930-1949

The first federal government initiative to sponsor childcare programs occurred in the 1930s, during the Great Depression, as part of the Works Project Administration (WPA; Dratch, 1974). The Works Project Administration was run by educators and "intended first to provide jobs for unemployed teachers and only secondarily, to assist children" (Stoltzfus, 2001). The creation of daycare programs provided childcare and an opportunity for women to work.

The Works Project Administration's childcare program continued as World War II broke out in September 1939 (Kamarck, 2018). Kamarck (2018) identified the Lanham Act of 1941

was then passed by the federal government and implemented so women who were working to support the war effort while the men were deployed received care for their children (p. 16). The focus of the Lanham Act was strictly to increase production for the war and was never intended to "make life easier for working mothers" (Dratch, 1974). The funding designated by the Lanham Act was used to construct childcare facilities, train and pay teachers, and provide meals to children aged birth to 12 years old. "Over 550,000 children nation-wide are estimated to have received care from Lanham Act programs" (Kamarck, 2018, p. 16). The federal government considered the Lanham Act as a temporary program to support the war effort, with the intent of women returning home to care for their own children when they were no longer needed (Kamarck, 2018, p. 16). The funds for the Lanham Act were withdrawn in 1946 and many people, especially women, protested the end of federally sponsored childcare (Carter, n.d.). Dratch (1974) identified individuals protested the end of the Lanham Act program through meetings, letters, and other actions; however, these "protests were generally unsuccessful" (p. 168). The War Manpower Commission in 1943 identified, "The first responsibility of women with young children in war as in peace is to give suitable care in their own homes to their children" (Dratch, 1974, p. 171). This perception reinforced the common view of the time that "women's work" was to care for the family and home.

1950-1959

The 1950s brought with it an era of mothers staying home to care for their children while men worked outside of the home to support the family financially. "In the U.S. military, demand for childcare was low throughout much of the 20th century. This was due to the demographic composition of the force and prevailing social norms. In the 1950's approximately 70% of servicemembers in the Army were single males" (Kamarck, 2018, p16). During this time,

military spouses cared for each other's children if time away was needed for a military spouse responsibility or other obligation (Kamarck, 2018). As is common today, the role of a 1950s military spouse was often to support the career of their soldier and time away from children involved volunteering and planning sessions for the military unit. Social events for military spouses were considered a wife's responsibility in supporting her husband's military career. The Vietnam War began in November 1955 and the need for childcare expanded as soldiers deployed.

1960-1979

Factors such as the end of the draft, the beginning of the all-volunteer Army, and women entering the workforce increased the need for military childcare in the 1960s and 1970s (Zellman et al., 2009, p. 438). For the first time, family centered programs became an important issue for military leaders due to the family impact on mission readiness. Military commanders began to realize that "childcare may have downstream effects on both readiness and retention. Military childcare is a means of enhancing readiness by decreasing the conflict between parental responsibilities and mission requirements" (Zellman et al., 2009, p. 439). Women entering the military also contributed to the need for childcare. "Between 1973 and 1978 the proportion of women in the military climbed from 2.5% to over 6% and the number of dual military marriages increased" (Kamarck, 2018, p. 16).

The military family became an interest of military leaders during the 1960s–1970s. The Department of the Army Historical Summary for FY69 was the first that included the health, welfare, and morale of the military family (Department of the Army Historical Summary FY 1969, 1969). While enduring the Vietnam War, the 1960s and 1970s brought with it a "grassroots effort" by military spouses to organize and develop childcare services for military

children. Informal childcare started as military spouses cared for each other's children in their own homes to attend a function or go to an appointment. Military Wives Clubs then developed part-day preschool programs and childcare co-ops that became more formalized (Campbell et al., 2000, p. 11). The buildings where military childcare programs originated were typically those that were not needed by soldiers or were considered unfit for solders. "DoD child development centers first offered babysitting by volunteers in former military barracks or other unused buildings" (Zellman et al., 2009, p. 438). With the move to the all-volunteer force in the early 1970s, the need for childcare rapidly increased as more soldiers entered the military with families (Campbell et al., 2000). Unregulated childcare centers were running on military installations, which are federal property, providing care for military children on an "as needed" basis by untrained and unpaid/underpaid workers.

Concerns regarding unregulated military childcare became apparent. Corey (1971) conducted one of the earliest reports on military childcare, which argued the lack of regulation and oversight of military childcare programs along with lack of coordination and underfunding created a "social welfare problem" (p. 6). Corey's research identified a regulation loophole by bringing to light that military childcare programs were exempt from state childcare regulations due to their location on federal property and under the radar from federal government regulations due to the lack of government funding. "Since no federal funds are involved, the Federal Interagency Day Care Requirements do not apply" (Corey, 1971, p. 1). The "self-sustaining" nature of military childcare meant the rapid increase in child development centers came with little or no oversight, limited supplies, and were located in buildings deemed unsuitable for soldiers, yet childcare was run in them. Corey (1971) gave examples of childcare programs "having panic bars, or windows too high for the children, in facilities that simply make the

building unsafe for youngsters" (p. 4). These low-quality programs also reflect the limited consideration and low priority of early childhood education in the 1970s.

The number of childcare centers on military installations grew throughout the 1970s. Nessenholtz (1976) reported "as of June 30, 1970, there were 105 centers operating on DoD installations by private organizations employing a total of 667 persons part or full time" (p. 138). By this time, the quality of military childcare became a "nationwide concern" due to the large number of children served, the closed military system, and unregulated childcare practices. Nessenholtz (1976) conducted one of the earliest research studies on military childcare, resulting in data describing extremely poor-quality programs for military children and a plea to the Federal government to provide funding and regulation to these programs (p. 143). Nessenholtz's research included questionnaires sent to directors of military childcare centers in 1970 and a second survey from September-December 1974. The results indicated staff to child ratios were not maintained and the programs were run in facilities such as "an old hospital complex, old nurses building, barracks, and a dilapidated 1942 building" (Nessenholtz, 1976, p. 140). Children were fed soup, crackers, cookies, and Kool-Aid on a regular basis to keep the cost of care low. One center director admitted, "in terms of its staff-child ratios, that the four and five-year-old children take care of themselves" (Nessenholtz, 1976, p. 142).

The post-Vietnam years proved challenging for military childcare, as the need for care rapidly increased. More military spouses worked outside the home, and the number of women in the armed services grew, as did the number of dual-military couples (Kamarck, 2018, p. 16). These societal changes placed a great deal of stress on the military childcare system that was already strained by lack of funding, overcrowding, and poor conditions. "As the number of children in care grew, the informal, largely unregulated network of care began to show signs of

stress" (Zellman et al., 2008, p. 21). Military childcare was recognized as a Morale, Welfare, and Recreation (MWR) program in March 1978 (General Accounting Office of the United States, 1982, p. 11) to provide federal funding and improve quality. However, this formalization came with continued loose oversight methods.

DoD issued a directive recognizing child care as an official Morale, Welfare, and Recreation (MWR) activity, leaving it up to the individual services to develop their own program policies and standards, and up to individual installations, if they provided childcare services, to establish their own operating procedures. (Campbell, et al., 2000, p. 11)

The lack of overarching guidance led to extensive inconsistencies in the quality of childcare between programs and installations.

1980-1989

The formalization of military childcare as part of MWR allowed for appropriated fund money to be used to pay for construction of new childcare facilities and the Senate Armed Services and Appropriations Committee indicated they wanted a formal report by the General Accounting Office (GAO) to provide a status update on the improvement progress (Kamarck, 2018, p. 17). The GAO Report (1982) to the Secretary of Defense, "Military Child Care Programs: Progress Made, More Needed" argued although military childcare programs were designated as the government's responsibility in 1978, and appropriated funds were provided to make facility improvements, many of the facilities in use continued to be "neither safe nor suitable places for childcare programs. For example, the majority of the 318 Army child care facilities did not meet fire and safety codes" (General Accounting Office of the United States [GAO], 1982, p. i). This report discussed concerns that went beyond the facility and construction

problems to identify issues with adequate care for military children. The installations continued to have oversight of their own childcare programs, which resulted in inconsistencies and low-quality care. A GAO officer indicated in 1982:

The services develop their own program policies and standards, many of which do not meet the Federal Interagency Day Care Requirements, or do not adequately address important program elements to ensure that basic child health, safety, and developmental needs are met. (GAO, 1982, p. ii)

Even with the organization formalization under MWR and construction funding, the GAO concluded that further improvements were needed in military childcare programs. The same issues with military childcare identified in Nessenholtz's 1974 research held true in the GAO's report to the Secretary of Defense in 1982. Findings of excessive adult to child ratios, lack of materials, untrained and underpaid staff, low meal standards and nonexistent food program caused inspections to continue. The GAO further reported military childcare centers were operated at over 400 military installations and served more than 53,000 children daily, which points to the conclusion that the programs were overwhelmed with the magnitude of the number of military children needing childcare. Army officials cited numerous examples of unhealthy and unsafe conditions in childcare facilities. These examples included a childcare center located on the fifth floor of a building, making evacuation extremely difficult; centers where lead-based paint was peeling from walls and ceilings; and centers with leaking roofs which were in such poor condition that roofing repairs were not feasible (GAO, 1982, p. 6).

A member of the Senate Committee on Armed Services received a letter regarding childcare at Fort Hood, Texas in 1978 where "over 300 children were housed in an old barracks building next to a horse stable with extreme pest control issues and a sinking floor" (GAO, 1982,

p. 6). The need for standardized staff to child ratios, staff training, a food program, and developmentally appropriate activities was proposed to Congress in the 1982 GAO report.

Recommendations for training opportunities for staff providing direct care for children was backed by a "1979 Health, Education and Welfare child care study finding that child-related education and training shows a moderately strong and consistent relationship to measures of quality care" (GAO, 1982). The concerns in military childcare were acknowledged and became a focus of attention for improvement.

Research and federal government reports expressing the need for improved programs for military children from 1974 to 1982 resulted in the implementation of facility construction and improvements more so than improvements related to ensuring quality childcare experiences. The staff training and developmental programming needs were not expanded upon even with the "call to action" child advocates proclaimed to Congress. Military childcare continued to grow exponentially, while regulation and programming standards were limited. As this growth continued, so did the concern for the safety of military children.

Child abuse allegations increased in military childcare and included extreme abuse cases at West Point in July 1984 and Presidio of Monterey in 1986 (Zellman et al., 2008, p. 22). The San Jose Mercury reported in July 1988 that the Presidio of Monterey abuse allegations included sexual abuse of young children (Goldston, 1988, p. 3). "Investigations revealed many childcare workers had placed complaints of child abuse dated back to 1981, such as staff touching children's genitals improperly and, in another case, intentionally burning a child. The child abuse cases from West Point in 1984 were brought to light after the Presidio of Monterey cases were revealed" (Goldston, 1988, p. 7). The Congressional inquiry into the child abuse cases resulted in the establishment of a special investigative team.

The widespread publicity of allegations, particularly those involving Army CDCs at West Point and the Presidio Army Base, led the DoD to establish the special investigative team in 1987. The Congressional Inquiry that was launched in 1988 included a series of hearings and testimony by military officials, childcare specialists, legal experts, and military parents. (Kamarck, 2018, p. 18)

The same issues that were earlier identified in research and investigations regarding concerns about the quality of military childcare were revealed in these hearings. The staff-to-child ratios, lack of staff training, lack of inspections and standards, lack of programming, and low wages for employees were now a common problematic theme in military childcare. During the summer and fall in 1988, the House Armed Services Committee Subcommittee on Pay Compensation held hearings on childcare in the Military. The hearings gave the committee information on the status of military childcare along with the issues and problems associated with it. The problems with recruitment and retention of caregiving personnel and the incidence of child abuse in military childcare programs were the priority (Guenther & Rudick, 1990, p. O-5). Military childcare had hit rock bottom and legislation to mandate improvement was the next step.

The Military Child Care Act of 1989

The Military Child Care Act (MCCA) of 1989 was the turning point for military childcare. With the extensive allegations of child abuse and poor-quality care for military children, the MCCA was the opportunity for the military to make improvements and increase childcare quality. The October 1990 Army Manual "Child Development Center Director's Handbook" identified the significance of the MCCA by indicating "the intent of the MCCA was to improve quality of care, set minimum appropriated funding (APF) levels, keep patron fees at existing levels and increase the availability of military childcare" (Guenther & Rudick, 1990, p.

- O-5). The MCCA took into account the problems associated with military childcare and enacted solutions such as a training program, Training Specialist positions, pay, inspection processes, improved employment conditions, accreditation, and child abuse prevention measures (Military Family Programs and Military Child Care, 1989). "The MCCA focused attention on assuring high-quality services by establishing comprehensive standards, setting accreditation requirements, and aggressively enforcing licensing; it also expanded access through subsidies for families" (Floyd & Phillips, 2013, p. 81). The unregulated, unsafe, and underfunded programs of the past were giving way to a new beginning for military childcare. The Military Child Care Act of 1989 prioritized funding, training, caregiver compensation, fees based on family income, additional childcare positions, parent partnerships, and family childcare funding (Zellman et al., 1992, p. 75). The Military Child Care Act of 1989 (MCCA) was passed by both the House and Senate in November 1989. The goal of the MCCA was to improve the availability, management, quality, and safety of childcare provided on military installations. The major contributions of the MCCA include:
 - Appropriated Funding: An increase in the federal government's mandated financial contribution to the operation of Child Development Services (CDS), to a 50 percent match between appropriated funds and parent fees. The provision of appropriated funds was put into place to offset the high cost of childcare. Soldiers and their families pay for childcare on a sliding scale based on the total family income. This was put into place so that all ranks of soldiers are afforded the same high-quality childcare as high-ranking soldiers. Funding to hire more childcare employees to maintain appropriate staff to child ratios and pay a fair wage that was commensurate to the pay of job positions with the same training level was also included.

- Training: The development of training materials and training requirements for childcare staff focused on developmentally appropriate practices in early childhood education. The training program also included the establishment of the Training and Curriculum Specialist (then called the Education Program Specialists) job position. Training and Curriculum Specialists provide training for ECEs to implement developmentally appropriate care and education to young children. The position also serves as a child abuse prevention measure since Training and Curriculum Specialists spend most of their time in the classroom with ECEs mentoring, coaching, and rolemodeling.
- Pay: A pay increase for childcare employees directly involved in providing care for children. This provision compensates direct-care staff at rates commensurate to that of other employees with comparable training, seniority, and experience on the same military installation. Pay increases for training level completion were also established.
- Military Spouse Employment Preference: The MCCA provided military spouses with employment preferences over all others. If a military spouse applies and is qualified for a position in military childcare, then they are selected over others with equal credentials and experience. Military spouse employment preferences were established to offset the issue of unemployed or underemployed military spouses.
- Increase in childcare positions: An increase in childcare positions equipped the CDCs with the personnel needed to provide quality care for children. This meant that childcare providers were able to work in appropriate staff to child ratio groups, managers provided personnel oversight, and Training and Curriculum Specialists provided oversight on quality.

- Child Abuse Prevention: A special task force to prevent and respond to child abuse
 was established in the MCCA. A child abuse reporting hotline was developed to
 report child abuse allegations anonymously. Inspection criteria related to the
 prevention of child abuse were established and implemented.
- Parent Advisory Board: The requirement for a Parent Advisory Board was established
 in the MCCA to encourage parent involvement and participation. Fees for childcare
 are reduced with hours spent volunteering in the childcare program.
- Family Child Care (FCC) Funding: Appropriated funds were allocated to FCC homes to balance the cost between the CDC and FCC programs. The original purpose of the FCC program continues today, to provide the same high-quality care that the CDC maintained in a smaller setting, offsetting the childcare demand.
- Four unannounced inspections annually: The annual cycle of inspections from higher headquarters were put into place as a validation mechanism to ensure established standard operating procedures were executed and maintained at the program level.
- Accreditation from a nationally recognized early childhood program: The Military Child Care Act of 1989 required fifteen percent of military CDCs be accredited by a national accreditation organization. These centers were to be used as a learning lab for the rest of the child care programs in the military (Military Family Programs and Military Child Care, 1989). This accreditation percentage requirement was later increased.

The MCCA implementation oversight was intense, with regular reports to Congress and independent research organizations conducting observations of military childcare programs.

Zellman (1992), in "Improving the Delivery of Military Child Care: An Analysis of Current

Operations and New Approaches" reported that parents and military personnel gave high ratings of military childcare. For example, an Army General stated, "We've got the best childcare in the world in the U.S. Army" (p. 37). The National Defense Research Institute (1998) also conducted research into the implementation and outcomes of the MCCA. The results concluded there was an increase in staff training and quality programs for young children (Zellman & Johansen, 1998, p. 197). Military childcare leaders were committed to implementing program improvements and many sought national accreditation, resulting in an increase in nationally accredited centers that far surpassed the MCCA's regulation.

Because of the DoD's commitment to excellence in childcare since 1992, the number of military childcare facilities that are accredited by the independent National Association for the Education of Young Children has risen from 55 to 353. By 1997, over 75% of military child care programs were accredited, as compared to only 7% of other child care facilities nationwide. (The Clinton Administration, 1997, p. 5)

The CDC administrators took the charge from the MCCA seriously and implemented changes immediately. In remarks by the President and First Lady at the White House Conference on Child Care (1997), President Clinton identified the "military's day care system as a model of excellent child care for the nation" (Office of the Press Secretary, 1997, p. 3). Today, 97% of Army CDCs are accredited by the National Association for the Education of Young Children (NAEYC) and resources to promote childcare quality are continually evaluated, updated, and implemented.

Given the enhanced reputation of military childcare, civilian childcare centers looked to the military for guidance to improve their programs along with examples of high-quality childcare that they could learn from. Campbell (2000) gave a call to action to civilian childcare programs in "Be All That We Can Be: Lessons from the Military for Improving Our Nation's Child Care System" by identifying military childcare as a model that civilian childcare programs should follow. "For those seeking to make improvements in civilian childcare should not be daunted by the task: the military has shown by its example that it is possible to take a woefully inadequate childcare system and dramatically improve it over a relatively short period of time" (Campbell, 2000, p. 9). DeVita and Montilla (2003) conducted research on the comparison between military and civilian approaches to childcare and their report centered on "five factors that were tied to the success of military efforts to develop an exemplary model of quality and affordable care in the military childcare system that are relevant to civilian programs" (p. 2). These recommendations included training of staff, providing staff with increases in pay with the increase in training, subsidies for affordable cost, licensing and accreditation, and inspections to establish accountability.

The Child Care Aware of America's Ranking of State Child Care Center Regulations and Oversight update included DoD childcare, which was the top ranked program. "No state earned an A and only DoD earned a B" (Child Care Aware of America, 2013, p. 10). This high-quality care was a result of stringent inspection procedures, accreditation, and staff training focused on promoting quality care for children. Reports such as this are a testament to the commitment of military childcare employees and leadership to improving care for military children.

Military Child Care Today

Over 30 years have passed since the establishment of the Military Child Care Act of 1989. The commitment to quality in military childcare and providing a positive work environment for childcare employees continues today. Army CYS programs boast state-of-theart facilities for children and youth, developmental programming and materials, a well-trained

workforce, and policies and procedures to support high-quality childcare. The inspection and accreditation processes are regular cycles in all military childcare centers and are a valued component to ensure program consistency and quality (Campbell, 2000). The accreditation rate of Army CDCs by NAEYC is currently at 97%, which is a testament to the CYS workforce's dedication to quality programs for military children. Army Higher Headquarters CYS conducts annual unannounced inspections for all Army CYS childcare programs, world-wide. These inspections require an immediate fix on many health and safety related findings and a 60-day fix for all others. The installation must complete a corrective action plan for inspection findings and provide documented evidence that the issues have not only been resolved, but a system has been put in place to ensure it does not repeat. Once all corrective actions have been accepted by Army CYS, the Department of Defense then reviews and approves the report and issues the program the DoD Certificate to Operate (Kamarck, 2020, p. 14). This is the program's "license to operate" and permission to continue providing care for military children.

The "spousal employment preference" program was established in the Military Child Care Act of 1989 and continues to provide employment opportunities for military spouses within CYS today. "The President shall order such measures as the President considers necessary to increase employment opportunities for spouses of members of the armed forces. Such measures may include … providing preference in hiring" (Military Child Care Act, 1989). This practice not only supports the children in the CYS programs, but also soldiers and the entire military family. With the frequent PCS moves military families endure, employment opportunities often become a hardship for military spouses. Employees working in CYS receive pay that is commensurate with other professions requiring the same level of work, training, and education along with life insurance, health insurance, and retirement benefits (Campbell, 2000, p. 40).

Army CYS ECEs also benefit from the Civilian Employment Assignment Tool (CEAT) which allows ECEs to transfer their positions to other installations at the same rate of pay (Jowers, 2018, p. 2).

The past challenges of military childcare were met by people who advocated for the promotion of high-quality childcare programs for military children (Campbell, 2000, p. 7). One of these military childcare champions was M.-A. Lucas (2001), the founding director of the U.S. Army Child and Youth Services, and driver of the Military Child Care Act of 1989. She described the history of military childcare as a "Cinderella" story where it was once known as the "ghetto of American child care with unsafe conditions for young children, to emerge as the model of childcare for the United States" (Lucas, 2001, p. 129). Current CYS employees can learn from this history and use these lessons to promote ongoing quality improvement for military children. One of the next steps in improving military childcare is to further understand the factors influencing the wellbeing and subsequent turnover of the military ECE workforce.

The wellbeing of the ECE workforce is a dynamic and multi-dimensional topic that must be dissected in relationship to current research. The following sections provide an in-depth conversation surrounding ECE wellbeing, the impact of educator wellbeing on young children, and the current research on the factors influencing ECE wellbeing. The cumulation of this information is intended to set the stage for the current dissertation research study into the workplace wellbeing factors that influence ECEs working in Army CDCs.

Early Childhood Educator Wellbeing

Early childhood education in the United States is an essential service for parents and guardians of children aged birth to five years old requiring childcare throughout the day while they work, go to school, or pursue other endeavors. In the United States, 15 million young

children aged birth to five years old participate in formal childcare programs, often spending long hours with ECEs who provide for their needs, support individual child development, build relationships and attachments, and interact with young children (Carson et al., 2017; Lang et al., 2020). The foundation of developmentally appropriate early childhood education rests upon consistent positive relationships, attachments, and interactions between the adult and child.

The influence of ECE wellbeing on children is at the forefront of concern for families, educators, and administrators since it is known that early experiences impact lifelong development. The next section will explore the research into the impact of ECE wellbeing on children.

Early Childhood Educator Wellbeing: The Influence on Children

It is widely accepted among early childhood professionals that the relationships and interactions with adults responsible for the care of children has a direct impact on the child's development (Mooney, 2002). The link between ECE wellbeing and the quality of care for children is consistent throughout the research. Young children learn about the world around them through the relationships and experiences they encounter. One reason why research into ECE wellbeing is an important focus is because of the impact it has on the overall growth and development of young children (King et al., 2016). "The research concerning the relationship between the quality of early education programs and child outcomes—both short and long term gains, is substantial" (Boyd, 2013, p. 2). Child outcomes and child behavior are at the forefront of interest in early childhood professional organizations due to the influence of developmental outcomes on school readiness and life-long relationships.

Much of the early childhood educator workplace wellbeing research of today was built upon the extensive research on maternal wellbeing and the impact mother-child attachments have

on children's brain development in the long-term (Mooney, 2009). Hamre and Pinata (2004) conducted one of the first research studies building on the maternal attachment research to examine the attachment between depressed early childhood educators and the children they care for. This mixed methods study conducted by Hamre and Pinata (2004) examined the link between ECE depression and the quality of their relationships with young children. Early childhood educators reporting higher levels of depression were observed by researchers as having less sensitive and more withdrawn interactions with young children. The research into ECE depression was based on the previously established "abundant evidence that maternal depressive symptoms are associated with less consistent, warm, and responsive interactions with children" (Hamre & Pianta, 2004, p. 298). The connection between ECE wellbeing and the impact on relationships with children was identified using self-reported depression procedures and ongoing observations by highly trained and certified data collectors. The findings revealed in Hamre and Pinata's research provide a greater understanding of the observed impact teacher wellbeing has on their practices with children. The observation notes provided in this study also provide researchers with a more personal look at the influence of teacher wellbeing on sensitive and stimulating interactions with children.

Papero (2005) extended the attachment research and explored maternal depression and the positive impact of high quality childcare as an intervention method (p. 182). Conclusions from Papero's research indicated high-quality childcare for children with depressed mothers had a positive impact on the developmental trajectory of the child. "These findings suggest that a positive attachment to a caregiver may offer the child an alternative model of social relationships, thus contributing to the development of higher levels of competence" (Papero,

2005, p. 203). With the many hours young children spend with early childhood educators, understanding their wellbeing is critical to improving quality programs.

The influence of teacher depression on child behavior is identified throughout the literature on ECE wellbeing. Jeon et al. (2014) explored the impact of ECE depression through a quantitative path analysis study of three-year-old children, their care providers, and mothers by researching the direct and indirect effects of teacher depression on children's behavior. Findings indicated teacher wellbeing directly impacted the child. "Children cared for by more depressed teachers exhibited more externalizing and internalizing behavior problems" (Jeon et al., 2014, p. 231). Jeon et al. (2014) offered a common-sense explanation of this link between teacher depression and child behavior that "an unhealthy classroom climate may have been created by the depressed teacher" (p. 231). Jeon et al.'s work also included a reflection into the previous Hamre and Pinata (2004) work on the relationship between teacher depression and classroom interactions and identified a possible correlation between the findings and child behaviors. Jeon et al. (2014) stated, "Hamre and Pinata found that depressed teachers spent less time engaging with children, which consequently might reduce time dedicated to monitoring children's misbehavior" (p. 231). The involvement and attentiveness of an ECE is crucial to positive classroom management. Continual scanning of the classroom to ensure the safety of children is paramount and provides an opportunity to intervene should unsafe behaviors arise.

In comparison to Jeon et al.'s (2014) research, Roberts et al. (2016) utilized a multilevel path analysis including surveys, interviews, and classroom observations to "explore the role Head Start teachers' depressive symptoms play in their interactions with children and in children's social emotional development" (Roberts et al., 2016, p. 643). Roberts' research conclusions were consistent with Jeon et al. in that the higher level of depressive symptoms of

the teacher resulted in higher levels of problem behaviors and lack of social skills of the children in care. "Teachers with higher levels of wellbeing and social emotional competence are able to develop closer relationships with children" (Roberts et al., 2016, p. 645). Conversely, teachers demonstrating higher levels of stress had a more negative perception of the children as demonstrating more aggressive behaviors. Smith (2019) identified "teacher stress can interfere with positive teacher-child relationships and effective social-emotional teaching" (Smith, 2019, p. 5). This connection between depression and stress to the interactions ECEs experience with children is a situation where going to the root cause and promoting the wellbeing of the teacher is the key. Unfortunately, it is common that the perceived behavior challenges the child demonstrates are considered the issue. This concern is further captured in the Kwon et al. (2019) study which explored the role of teachers' depressive symptoms on classroom quality and found a "small but unique association between teachers' depressive symptoms and teacher-reported behavior problems among toddlers attending the Early Head Start programs" (p. 8). It is important to consider that these are the teacher's perceptions of children's behavior, which may be skewed because of the teacher's own lack of wellbeing. Consequently, if teachers view a child's behavior negatively (whether it is actually negative behavior or typical behavior) the effects on the relationship may be detrimental.

The early childhood classroom setting is the environment where children explore materials and learn to maneuver and test relationships with peers and adults. Jennings (2015) conducted research on the impact of early childhood teacher's wellbeing on the quality of classroom management. Beyond the common thread that early childhood educator wellbeing impacts their relationships and interactions with children in the classroom, Jennings further connected this link with the need for teacher "emotional support associated with mindfulness,"

self-compassion, and self-efficacy" of ECEs. The need for social support not only impacts the wellbeing of the teacher, but also the overall classroom quality, and ultimately impacts the development of children. Researchers established the wellbeing of ECEs is not only an important topic for teachers, but also the impact on children and program quality is significant.

Research findings provide important data linking ECE wellbeing to the quality of care for young children. "Benefits of high-quality childcare include increased school retention, fewer special education classes, the reduction in poverty and crime, and increased economic production" (Boyd, 2013, p. 2). This information can be utilized to provide a case for further support mechanisms and professional development focused primarily on ECE wellbeing since the impact on young children and classroom functioning is established in research.

The next sections follow the ECE Workplace Wellbeing Theoretical Framework which consists of four dynamic domains: physical factors, organizational supports, emotional factors, and professional relationships. These domains are considered dynamic because they influence each other and overlap (see Figure 1). The next section will explore research data on the physical demands of the ECE job.

Physical Factors Influencing Early Childhood Educator Wellbeing

The everyday work of an ECE includes lifting children, bending to pick up toys and materials, sitting on the floor or in child-size furniture, changing diapers, and wiping noses (McGrath and Huntington, 2007, p. 33). All these actions may contribute to the physical wellbeing and general health of ECEs. While the impact of physical demands and exposure to illness is an important concern for ECEs, the research into this topic is limited. Although research considering the physical wellbeing of ECEs is not a charge many have seized, due to the consistent physical nature of the job, it is imperative to include when evaluating ECE wellbeing.

Child Care Aware of America recommends organizations promote childcare workers' health by "providing worker health insurance, discounted gym memberships, and support for healthy behaviors such as participating in physical activity programs, weight loss, and healthy eating" (Hendricks, 2019, p. 8). This section discusses the physical demands of the ECE, the general health implications of working in childcare, and illness prevention in the early childcare setting.

Physical Demands of the Job

The early childhood classroom is in constant movement and the physical demands of educators are high. McGrath and Huntington (2007) provided survey data that identify many of the health and wellbeing factors that ECEs experience. The results include the impact of stress on wellbeing; however, the study went further to explore "the importance of managing health issues such as workload, occupational injuries, ergonomically and healthy work environments" (McGrath & Huntington, 2007, p. 34). The physical demands of the ECE job can lead to accidental injuries. McGrath and Huntington's survey data pointed out that "29 percent of respondents have experienced an accidental injury within the past year" (p. 35). The continual bending and lifting during childcare work make educators susceptible to slips, trips, and falls. Kwon (2019) extended the conversation on physical wellbeing indicating:

three quarters of ECEs are obese. Most had below average cardiorespiratory fitness. And a third reported doctor-diagnosed urinary tract infection. Two thirds of teachers had ergonomic pain in at least one area of the body. This is likely because teachers of young children constantly bend, reach, twist, and squat in environments that are typically child size. (Kwon, 2019, p. 5)

It may be reasonable to consider that the everyday work in childcare is physically exhausting and educators may be too tired to focus on their own health and exercise when they are away from the workplace.

General Health

The general health of ECEs is impacted by the physical demands of the job, as discussed in the previous section. Research on ECE physical wellbeing is extended by Kwon's (2019) "Happy Teacher Project" and included descriptive qualitative data implicating the results of physical demands on the body. One participant narrative expressed:

I've had my knees replaced. It's some genetic, but also the work I do. I'm up and down, up and down, up and down, all the time. I recently had a rib out of place so I went to therapy and was out of work for six weeks because I couldn't lift. I think these issues are kind of normal for teachers, I guess. (Kwon, 2019, p. 1)

Knee replacement and ribs out of place are not common in most jobs, but in early childhood education, it can be a reality. To further exacerbate the general health concern, "recent studies suggest that 25-30 percent of ECE workers do not have health insurance" (Otten et al., 2019, p. 710). Child Care Aware of America (2013) stresses the importance of paid sick leave for childcare employees: "Childcare workers often choose to care for children even when they are ill because otherwise, they would not get paid." This paid sick leave provides an opportunity for educators who are sick to stay home and not spread the illness to other workers and children. The McGrath and Huntington (2007) survey data corroborates with the Child Care Aware concern and found "91 percent of respondents reported having worked when ill at some stage" (p. 35). While the Child Care Aware (2013) data indicated that paid sick leave was the issue, the

staff who would cover them in the classroom while they were out. Both concerns should not impede an employee's need to stay home when ill.

The physical factors of the ECE job have an impact on general health and wellbeing. Illnesses and exposure to communicable diseases is a common issue in childcare programs. McGrath and Huntington (2007) concurred with this concern and commits a call to action for employers to examine the physical demands and exposure to infectious diseases that ECEs endure. Organizations have a duty to provide healthy and safe work environments for their employees. The next section outlines the organizational supports within the childcare environment in relationship to ECE wellbeing.

Organizational Factors Influencing Early Childhood Educator Wellbeing

Campbell (2000) identified the link between the Military Child Care Act of 1989 and program quality by stating, "most experts in the field agree that child care quality is a product of appropriate staff/child interactions, well prepared providers, well-compensated providers, low staff/child ratios, a safe and healthy environment" (p. 26). Organizations benefit from prioritizing the wellbeing of ECEs since the link to quality is clear. This section delves into the following organizational supports of ECEs: administrative processes (adult-child ratios; paperwork and meetings; and staff schedules); professional development; and compensation and benefits.

Research indicates these organizational factors, or the lack of, have a positive correlation to the wellbeing of ECEs (Boyd, 2013; Kwon et al., 2020; Phillips et al., 2016). Cumming's (2019)

ECE wellbeing definition identified the responsibility of workplace wellbeing as shared between the individual and the organization and further states "organizations provide the conditions in which employees are more likely to be able to experience work-related wellbeing" p. (276).

Drawing from this reasoning, it may be argued that when considering the organizational factor

domain, the primary responsibility rests on the leaders and decision-makers of the organization who fund and designate guidance and regulation. Organizational factors are the standardized systems in childcare programs utilized to manage personnel, processes, and standards.

Administrative Processes: Adult-Child Ratios, Paperwork & Meetings, and Staff Schedules

A well-run CDC depends on fair and stable administrative processes: maintaining adult-child ratios, paperwork and meetings, and consistent staff schedules (Faulkner et al., 2016; Madill et al., 2018; Torquati et al., 2007). The effectiveness of these administrative processes contributes to the promotion, or lack of, ECE wellbeing. Maintaining ratios, meetings, and schedules in a CDC can be a demanding and stressful task for managers, especially when acknowledging these administrative processes contribute to the health and safety of children and teachers.

Most childcare programs follow a standardized adult-to-child ratio policy for each age-group of children that is designated by state regulation. State ratio guidelines may or may not be consistent with the National Association for the Education of Young Children's (NAEYC) adult-to-child ratio recommendations for best practices in early childhood programs, which Army CYS follows (see Table 3 below).

Table 3National Association for the Education of Young Children Adult to Child Ratios

Age Category	Adult to Child Ratio	Maximum Classroom Size
Infant (Birth – 15 Months)	1:4	8
Toddler/Two	1:6	12
Preschool	1:10	20
Kindergarten	1:12	24

Daily schedules, professional development, and meetings are all dependent on the requirement to maintain staff-to-child ratios. Early childhood educators may not leave the classroom, even for a few minutes to use the restroom, without another teacher coming into the classroom first to sign-in to ratio and assume childcare responsibilities. Torquati et al. (2007) considered staff to child ratios as a "predictor of observed quality and of workplace supports since staff-child ratio has consistently been associated with more positive teacher-child interactions and overall quality" (Torquati et al., 2007, p. 264). This consideration is agreed upon by many in the early childhood community, that overcrowded classrooms contribute to lower-quality care and less individualized relationships and interactions with children.

Much of the research on the relationship between administrative processes and ECE wellbeing indicated wellbeing was decreased by additional time away from children spent on tasks that teachers did not find beneficial to their work with children. A Finnish childcare study utilizing teacher narratives sought to identify and analyze the challenges that arise in early childhood education (Ylitapio-Mäntylä et al., 2012). "Frustration towards work is invoked when teachers' time has to be spent on administrative tasks and not with children" (Ylitapio-Mäntylä et al., 2012, p. 470). The amount and type of administrative tasks and paperwork varies between the child development programs and typically depends on the type of curriculum, child assessment, accountability, and documentation procedures that are in place. Ylitapio-Mäntylä et al. (2012) researched the "state of wellbeing and thriving at work" in Finnish day care centers from the educator's perspective and the findings indicated "administrative tasks and fatigue are the main factors coming between them and the children in their care" (p. 461). Paperwork and documentation are time-consuming and often tedious tasks that are required of educators, sometimes during the time they are also providing care for children. "Childcare providers are

expected to both plan and implement curriculums, communicate with parents, and provide for the children's daily needs in terms of meals, diapering, and emotional support" (Faulkner et al., 2016, p. 282). While paperwork and time away from children is a common frustration of ECEs, a Central-Texas study utilizing several focus groups revealed meetings are considered important by educators and a necessary time to share and receive job related information (Travis et al., 2014). "Information sharing provided opportunities for providers to feel a part of their organization or learn key strategies to enhance the quality of care. Center providers also reported on the value of having opportunities to talk about their experiences at staff meetings and not simply sitting in meetings without contributing to the discussion" (Travis et al., 2014, p. 332). This research indicated it is not necessarily the time away from children that negatively impacts an ECE's wellbeing, but whether the educator finds the administrative task as helpful to the job.

Early childhood educators indicate a stable schedule and classroom assignment where educators can provide continuity of care for children is by far, the most important administrative processes influencing their wellbeing. The Child Care and Early Education Policy and Research Analysis (CCEEPRA) 2018 Report on "Supporting the Psychological Well-Being of the Early Care and Education Workforce: Findings from the National Survey of Early Care and Education" found

just one formal workforce support—a stable classroom assignment—was associated with teachers' psychological distress. Teachers who had been moved to another classroom or another group of children in the past week had significantly higher levels of psychological distress, compared to those who were not. (Madill et al., 2018, p. 20)

This movement of teachers is often due to the requirement to meet adult-to-child ratios, which can pose a difficult task when a CDC is short staffed and can cause some managers to move

educators to other classrooms with unfamiliar children or combine smaller groups of children.

This shifting of personnel and children can cause stress and confusion for children and the adults who care for them.

Beyond providing the day-to-day consistency in the classroom, ECEs also identify the importance of continuity of care as influencing their wellbeing and desire to provide consistent care for the children they serve (Papero, 2005; Kwon, 2020). Papero (2005) described continuity of care as one of the main components of high-quality childcare. "There should be adequate continuity of care to ensure that each infant and child form a strong relationship with a primary care provider, with whom patterns of communication can be enhanced" (Papero, 2005, p. 200). Educators indicated the lack of consistent schedules and lack of continuity of care negatively impact their wellbeing and increase their intentions to leave the profession. Papero researched early high-quality childcare as a mediating factor for children of low-income backgrounds and depressed mothers. Research findings indicated

young children appear to treat childcare providers as an alternate category of attachment relationship and respond differently to those providers who have been present for longer periods of time and have therefore become more predictable. In addition, stability of early care has been shown to be related to better school adjustment. (Papero, 2005, p. 201)

Kwon et al. (2020) furthered the research conversation on continuity of care and administrative duties and extended this to indicate

other teachers, while enjoying working with children, wanted to leave because of the stress their work entailed, including too many responsibilities and much burden (i.e. being shuffled between different classrooms, doing additional work to cover staff shortage, and external pressure with lack of support). (Kwon et al., 2020, p. 8)

The research on staff schedules indicated ECEs thrive, as well as children, in consistent classroom settings. While these administrative processes may be considered the foundation to a supportive workplace for ECEs, professional development builds upon this to increase competency and quality practices with children.

Professional Development

Professional development in the early childhood field includes training, credentials, college coursework, and degrees. With the understanding of the importance of early childhood brain development came an emphasis on higher quality standards in early childhood programs, which promoted higher training and qualification requirements of ECEs (Boyd, 2013). These training and qualification requirements focus primarily on the development of young children and techniques for developmentally appropriate practices in early childhood education with little or no focus on the ECE themselves. Participants in focus groups conducted in Central Texas offer a recommendation for professional development topics that support the wellbeing of ECEs: "How to cope with work related stress and how to work with parents. This includes not taking work home, using humor and taking time for yourself" (Travis et al., 2014, p. 334). While these professional development topics may prove useful to improving the wellbeing of ECEs, meeting qualifications with adequate pay and positions is pertinent.

In most professions, when employees seek to better themselves by going back to school and obtaining credentials and degrees, they are rewarded with higher pay and opportunities for higher level positions; however, this is often not the case for ECEs (Boyd, 2013). Boyd (2013) conducted research to identify if the credentials and training of ECEs impacted their

compensation in the form of higher pay and benefits. The findings from Boyd's research concluded that this does not hold true in the field of early childhood education and that ECEs who put forth the effort to increase their training and education are rarely compensated.

Many ECEs receive "poverty wages, few benefits, high work-related expenses and job insecurity" (Boyd, 2013, p. 2). It is further noted that "teachers have done their part" by going back to school and receiving credentials and degrees "but there is still no reward" (Boyd, 2013, p. 16). Phillips et al.'s (2016) research concurred with Boyd's findings and indicated that the "educational preparation, compensation, and professional development among the early childhood workforce looks very different from their elementary school counterparts" (p. 141). There is poor compensation in early childhood education that further exacerbates the turnover problem. Phillips et al. (2016) reasoned a "persistent mismatch" between compensation and education pushes ECEs to leave the profession (p. 145). These findings describe how the low compensation and benefits for ECEs effects their wellbeing and creates a workplace environment where they may feel they have no control over their employment trajectory.

While the professional development of ECEs often does not correlate to higher pay and job opportunities, professional development does have a direct correlation to the quality of care for children. Torquati et al.'s (2007) research findings on professional development and the Child Development Associate (CDA) credential indicated having a "CDA predicted global observed quality" and "significantly predicted quality" (p. 271). This research is especially useful to the military since Army CYS trains and funds the Child Development Associate Credential for those who are interested and have completed Army Foundation Training. Unfortunately, while the impact of professional development on quality is clear, research from

the civilian sector continues to point to the concern that professional development does not equal higher pay and benefits.

Indirectly, education level is also correlated with benefits—health care, holiday pay, and company sponsored pension plans. This has not been the experience of the majority of teachers—especially those educating our youngest children. Within the early childhood education workforce, the relationship between education, training, and compensation is problematic. (Boyd, 2013, p. 1)

As previously mentioned, the importance of high-quality childcare for the development of young children is a priority for families, administrators, and government officials. The consideration that has not taken place is the reimbursement of compensation and benefits for the important work that ECEs provide. The next section takes the professional development conversation a step further to discuss the compensation and benefits of ECEs.

Compensation and Benefits

Compensation and benefits are tangible organizational factors and research indicates these are common elements that influence the wellbeing of ECEs. Child Care Aware of America identified the median hourly wage for childcare workers in the U.S. is \$9.77 (Paths to a Healthier Child Care Workforce, 2019). The low income of many ECEs creates a social-injustice issue as they are unable to pay for food for their own families. Furthermore, pay and benefits may influence an educator's decision to leave the profession and contribute to the issue of turnover. "Many teachers said that the low wages were a reason to consider other work" (Boyd, 2013, p. 11). The Institute of Medicine and National Research Council Report: *Transforming the Workforce for Children Birth – Age 8, a Unifying Foundation* indicated despite advances in the science of child development and knowledge of the impact of care and education professionals

on the development of young children, many of these professionals are still receiving low wages.

The result is increased economic instability of early childhood educators and high turnover rates in the field.

When considering the pay and compensation of ECEs, it is critical to acknowledge the history of devaluing childcare, poverty level pay, and lack of benefits (Phillips et al., 2016, p. 141). Research conducted by Modigliani (1986) considering the salaries, status, and working conditions of childcare employees is especially interesting because it provides a picture of childcare in America in 1986, around the time of the Military Child Care Act implementation. "New career options for women along with women's pay inequity, the devaluation of young children, and the privatization of the family all impact ECE wellbeing" (Modigliani, 1986, p. 47). The observational research provided a picture of the discrimination of women and frustration of the female workforce in relation to unfair pay practices and opportunities for advancement. "Childcare is one of the lowest paid of the low-paid occupations in the United States" (Modigliani, 1986, p. 48). All researchers referenced in this section gave a "call to action" to organizational and governmental officials to improve the pay and benefits for ECEs and align the level of work and educational status with commensurate professions.

While the call to action for fair pay for ECEs began years ago, many continue to live in poverty and worry about their ability to pay for the basic needs of themselves and their family today. Early childhood educators continue to be among the poorest paid professionals. "Early education and care work is dominated by women paid low wages and receiving few, if any, work related benefits" (Boyd, 2013, p. 4). This theme of low pay and few benefits is consistent throughout the research. A participant narrative from Kwon's (2019) research particularly resonates:

We don't make a whole lot of money as teachers, so every day I miss, that's almost 80 bucks every time that I am taking out. Once you get paid, it seems like you've got rent and groceries and then you are left with nothing. It hurts me and stresses me out and I feel like the kids sense it and it just makes it harder (Infant teacher age 29). (Appendix:

What Early Childhood Teachers Need for Wellbeing, Kwon, 2019)

This quote not only brings to light the inequitable pay (almost 80 dollars per day) but also shows how the lack of benefits such as sick leave or annual/personal leave can impact the life of an ECE and the need for basic resources such as food and shelter. Furthermore, this telling quote accounts for the direct link between ECE pay and benefits to stress and the effect on children.

King et. al. (2015) conducted a mixed-methods inquiry utilizing questionnaires, inventories, and observations to "examine associations among teachers' financial well-being, including teachers' wages and their perceptions of their ability to pay for basic expenses" (King et al., 2016, p. 546). Findings indicated low pay, lack of benefits and unpaid planning time increase teacher's feelings of stress. Corr et al. (2014) looked closer at the "fair exchanges" of ECEs in a critical theory study utilizing interviews to examine fair relationships and policies that support ECE mental health (Corr et al., 2014, p. 2014). Conclusions tie in closely with King (2015) identifying "high quality relationships feature fair exchanges of educator work for key resources, including adequate income" (Corr et al., 2014, p. 1). Corr et al. (2015) conducted a follow-up study utilizing the Effort Reward Imbalance tool to measure psychosocial working conditions of ECEs (Corr et al., 2015, p. 69). The findings corroborated previous research in that financial insecurity contributes to psychological distress of ECEs: "We must go beyond training and reforms to practice by modifying psychosocial working conditions (i.e., increasing financial security, social support and respect) and the early childhood system" (Corr et al., 2015, p. 76).

The financial aspect of wellbeing is a considerable factor influencing the wellbeing of ECEs working in the public or private sector, as outlined in the previous research. Some may consider the inequitable pay and benefits of ECEs as a social justice issue that continuously sends the message to the primarily female workforce that their work is unimportant. This lack of importance may directly influence the emotional wellbeing of ECEs, which is the topic of the next section.

Emotional Factors Influencing Early Childhood Educator Wellbeing

Researchers have explored emotional factors such as feelings of being valued at work and having a sense of purpose along with stress and emotional exhaustion as they relate to the wellbeing of ECEs. Faulkner et al. (2016) examined the emotional wellbeing of ECEs and set the parameter of emotional wellbeing as "a positive sense of wellbeing that enables individuals to meet life's demands" (p. 280). This section extends the emotional wellbeing discussion by delving into research regarding feelings of value and purpose at work, and the impact of stress and emotional exhaustion.

Feelings of Value and Purpose

Feelings of being valued or devalued at work influence employees' overall wellbeing and intentions to stay or leave the profession. The devaluing of ECEs is rooted in the profession's feminine history and continues today in many childcare settings. Historically, early childhood education was considered simply "baby-sitting" and caring for young children was socially unimportant because of the belief that young children were waiting to go to "school" to learn (Boyd, 2013; Harwood, 2016). With advancements in early childhood brain research, the focus of childcare has grown from basic custodial care to high-quality developmental care. Brain

research of young children has provided researchers and practitioners with knowledge that critical development is taking place in early childhood.

While the overall understanding of young child brain development has made the importance of quality early childhood education programs a priority, the shift that did not take place was the valuing and advocacy of ECEs by society to align with the importance of the profession. Phillips et al. (2016) summarized "society's expectations of the early childhood workforce have never been higher" (p. 141). The value of early childhood education and high-quality programs are now a social priority; however, ECEs continue to be a devalued population providing a high output of work with very little "reward" in the form of pay, personal importance, and professional development opportunities focused specifically on them. This "effort-reward" imbalance is a common theme throughout the research and impacts the emotional wellbeing of ECEs.

Consideration of early childhood educator wellbeing is consistently overlooked, in part due to the devaluing of ECEs by society (Boyd, 2013). Carson and Baumgartner (2017) conducted a critical theory research study that utilized qualitative research methods and was guided by the affective events theory. The researchers in this study conducted interviews and observations to draw attention to the voice of ECEs and their feelings of burnout, stress, and job-related wellbeing in relationship to being professionally devalued. The depth of understanding gained from the interviews and observations conducted between these critical theory analyses provided a thorough case for societal, governmental, and organizational promotion interventions for ECEs.

While ECEs may be devalued by some outside entities, they frequently identify the value and purpose of their own work (Boyd, 2013; Travis et al., 2014). Boyd (2013) indicated educators viewed their work as

meaningful and rewarding and saw themselves as providing an educational curriculum and giving social, emotional, and physical care to young children. One teacher explained her "work provided benefits to the child, the family, herself as a teacher, and to the wider society." (p. 9)

A positive sense of purpose contributes to workplace wellbeing. Focus groups conducted by Travis et al. (2014) revealed "the childcare providers experienced a sense of belongingness and identity based on their ability to develop knowledge, attribute positive meaning to their work, generate positive emotions, and build positive relationships" (p. 340). Acknowledgement of the importance of childcare work was further extended in Faulkner et al.'s (2016) focus groups referring to participants as "they spoke of the pride that they have in the children they teach, the time they spend planning activities and the genuine concern they have for the children when they are not in their care" (p. 289). While early childhood education is a largely an unappreciated job, the educators themselves acknowledge the important purpose of the work they perform.

Stress and Emotional Exhaustion

The everyday work demands of the ECE involve a high-level of physical and emotional output, which may result in stress. Many researchers are interested in understanding the influence of stress on ECEs (Faulkner et al., 2016; McGrath & Huntington, 2007; Nislin et al., 2016). de Schipper et al. (2008) conducted a study where ECEs were observed in their classroom environments and cortisol tests were periodically utilized to measure stress (p. 55). Results indicated that a higher workload did not result in higher stress and likewise, high stress did not

lower the quality of childcare. The researchers wondered if stress may not always be negative and can have some positive effects to a point (de Schipper et al., 2008). In agreement, Nislin et al. (2016) also researched early childhood professionals and their stress levels with cortisol tests. The findings from Nislin et al.'s research also indicated they "did not find any associations between different biomarkers and work engagement" (p. 28). Nislin et al.(2016) conducted a second study which examined early childhood professionals working with children with special needs work engagement, burnout, and stress regulation as indicated by saliva cortisol tests (p. 12). Again, findings indicated no connections between stress regulation and burnout. Nislin et al. indicated "the main result of this study was that participants were dedicated and motivated by their work with children" (p. 12).

In contrast to the de Schipper et al. and Nislin et al.'s work, Jeon, Buettner, and Hur (2016) conducted an exploratory study utilizing questionnaires and classroom observations to evaluate work satisfaction of ECEs. The results from Jeon, Buettner, and Hur's (2016) research indicated stressed teachers had a less positive attitude toward their work with children (p. 551). The correlation between stress—burnout—turnover was indicated as having a decrease on care quality. Grant et al. (2019) examined workplace wellbeing and the effects of stress on a teacher's intentions to leave the profession. Findings indicated "higher reports of stress and emotional exhaustion related with teachers' greater intentions to leave rather than stay, and emotional exhaustion in particular related with teachers' intentions to leave rather than even move to another ECE job" (Grant et al., 2019, p. 307). Faulkner et al. (2016) explored specific stress related factors related to work and how these stress factors impact wellbeing (p. 280). While research on stress and ECE wellbeing varies, Travis et al. (2014) described an interaction with an ECE.

at the conclusion of one of the focus groups, a participant declared, "To sum it up, it's the most stressful job that you'll ever love, with the biggest rewards!" This quote exemplifies each subtheme (joy, gratitude, and pride) within positive emotions. (Travis et al., 2014, p. 335)

Many ECE professionals can agree with this participant in that the job is stressful, but the love for children and the childcare work keeps them coming back each day.

Much has been revealed about stress and childcare work, but what exactly do ECEs consider their main stressor? Faulkner et al. (2016) conducted focus groups with 26 providers and interviewers asked questions regarding what type of stress ECEs experience and how they take care of themselves to mediate the stress. Participants from the Faulkner et al. (2016) research identified "parent interactions, the public perception of their job as a babysitter, caring for mixed age groups of children, and worry regarding the children's wellbeing at home as their primary stressors" (p. 286). While the Faulkner research indicated families as contributing to stress, additional research in the next section also includes positive factors related to relationships with families. Sharing childcare responsibilities and nurturing relationships between the family and the educator can be difficult to maintain; however, this is critical to supporting healthy child development. Professional relationships between ECEs and children, families, co-workers, and leaders are examined in the next section.

Professional Relationships Influencing Early Childhood Educator Wellbeing

This section focuses on the professional relationships that influence the wellbeing of ECEs and their intent to stay or leave their position. The professional relationship indicators include relationships with children, family members, co-workers, and leaders. Research indicates positive relationships with these internal and external customers influence an employee's desire

to stay with an organization (Faulkner et al., 2016; Hamre & Pinata, 2004; Kwon et al., 2020; Travis et al., 2014). Alternatively, negative relationships can influence an employee's decision to leave an organization.

Relationships with Children and Families

Relationships with children and their families are the foundation of early childhood education. Parents (families) are considered the child's "first teacher" and partners in the early childhood education experience (Cadwell & Gandini, 1997). Building bonds between the educator and family provides reassurance and trust in the child. Lang et al. (2020) described the family-educator relationship as "cocaring" and research findings highlight the importance of adult-relationships in children's early social emotional development, with an "emphasis on the cocaring relationship as a bridge between home and child care contexts" (Lang et al., 2020, p. 1). This description of a "bridge" between the family and the educator provides a visual representation of the relationship structure that is necessary to support the child's social-emotional development.

Early childhood educators report their actual work with children is not the root of their stress or unhappiness at work. Research indicated quite the contrary. Faulkner et al. (2014) conducted a qualitative research study utilizing focus groups and the participants in this study made it very clear that "children are not their work related stressor; however, they did report that families were a distinct stressor" (p. 289). Further, the participants also reported feelings of pride and accomplishment at work. Similarly, Hall-Kenyon et al. (2014) indicated findings somewhat consistent with Faulkner in that "nurturing children and working with parents were the most enjoyable and least stressful tasks" of the job (p. 154). It seems that caring for children is the educator's most fulfilling part of the job and navigating the external relationships can fluctuate.

Travis et al. (2014) conducted focus groups based on a semi-structured conversation and a description of the relationship between individuals external from the child is provided below:

Participants repeatedly and extensively discussed why working in a climate characterized by trust and respect with co-workers, managers, and parents was essential to creating a positive work experience. As a dominant theme, one's perception of trust and respect from the parents was considered as the pinnacle of affirming work conditions.

Consistently, childcare providers maintained that their ability for effectively working with a child is enhanced by the parent's confidence in their skills and respect for them as professionals. (p. 333)

This excerpt demonstrates the importance of positive professional relationships when caring for children. The work with children is important to the educator and building strong attachments with children is an indicator of trust. Teachers express concern about turnover and the breaking of attachments and relationships. Kwon et al. (2020) conducted focus groups as part of the "Happy Teacher Project" and revealed "about 90% of the teachers agreed that children were or would be negatively impacted by teacher turnover mostly in social and emotional development including breaking attachment bonds, relationships, and trust" (p. 6). Further,

the primary reason for the intent to stay for 20 teachers was related to the nature of their work with children. These teachers stated that they chose to work in early childhood settings and viewed their work and emotional connection with children and their families as rewarding and fulfilling. (Kwon et al., 2020, p. 4)

The research points to the conclusion that relationships with children are a primary reason to continue in the early childhood profession. The relationships with families vary and can become

a contributor to work related stress when ECEs feel devalued by families or if there is a low level of trust.

Relationships with Co-Workers and Leaders

According to research, relationships with co-workers and leaders influence ECE wellbeing and their intent to stay or leave the profession (Cumming, 2015; Hur et al., 2016; Liu et al., 2018; Travis et al., 2014). These workplace relationships are an opportunity to build an internal support system where ECEs, their coworkers, and leaders can encourage and support each other during times of stress or difficulty; however, negative relationships with co-workers and leaders can also be the reason why ECEs leave the profession. These relationships can make a great difference in an employee's willingness to endure workplace challenges and continue to work in their job position.

Understanding workplace relationships with co-workers and leaders is a critical area for researchers to uncover due to the influence these relationships have on workplace wellbeing and turnover. Cumming (2015) conducted focus groups to explore workplace relationships and findings indicated a direct impact of relationships on wellbeing. Relationships with co-workers and managers that enhance a "sense of community" create a work environment that builds employee wellbeing (Cumming, 2017, p. 52). Liu et al. (2018) also examined ECE wellbeing and workplace relationships and results corroborated the Cumming (2017) findings that "positive collegial relationships and work environments are seen as vital across the examined research" (p. 141). Positive relationships with co-workers and leaders in the workplace contribute to the feelings of belonging and being a part of a team. These relationships may also contribute to an ECE's feelings of value and purpose.

When considering relationships with co-workers, it can be argued these relationships can be the glue that holds the culture of an organization together. Travis et al. (2014) conducted semi-structured interviews where participants disclosed the high-level of importance of relationships with co-workers and managers and that these relationships often off-set the stressful nature of the job.

Center providers discussed the importance of feeling a sense of trust and respect from management and co-workers. Some reflected on the importance of teamwork and communication as part of a climate of trust and respect, as illustrated in the comment, "They [management] listen to us, and they give us feedback. They try to make us better—giving their opinions." In this, providers felt that management supported their wellbeing and respected them as individuals. (Travis et al., 2014, p. 333)

This reflection from the Travis et al. study indicates how positive relationships with co-workers and managers can have a beneficial influence on the wellbeing of ECEs.

Conversely, Kwon et al. (2020) demonstrated the result of unsupportive relationships with managers on turnover. "Some teachers mentioned that although they loved their job and were committed to working with children, the high levels of tension and stress from the administrator sometimes outweighed their passion for the work, which enhanced their intent to leave" (Kwon et al., 2020, p. 8). Further interview data from Kwon et al. pointed to the importance of relationships with co-workers and managers and "some teachers related the staff at their center as a 'second family'" (p. 5). Hur et al. (2016) described this second family as a "sense of community" and the importance of building social relationships between teachers contributes to wellbeing.

Teachers need to feel a sense of community in their programs. In reality, many factors threaten teachers' feelings of relatedness in ECE programs. Previous studies show that ECE teachers have few opportunities to interact with other teachers and that high turnover rates prevent teachers from building positive social relationships with teachers. (Hur et al., 2016, p. 461)

Providing early educators with opportunities to build workplace relationships should be a priority of childcare managers due to the influence of these relationships on wellbeing and turnover. It is not surprising that supportive relationships with co-workers and leaders are likely a significant contributing factor to workplace wellbeing. ECEs often work in confined spaces with limited outside adult interaction, so it makes sense that relationships with co-workers are a contributing factor to workplace wellbeing.

Conclusion

This Chapter 2 Literature Review provided insight into military childcare history and previous research studies on the workplace wellbeing of ECEs working in civilian organizations. There was a dearth of research surrounding the wellbeing of military ECEs and the factors influencing their wellbeing and turnover intentions. This dissertation research study addressed and began to fill this gap in research through a mixed methods questionnaire-based study on the wellbeing of Army CYS early childhood educators. It was compelling to examine this topic and uncover the factors that influence their wellbeing and intentions to either stay or leave the profession. The following section will describe the research methodology of this dissertation research study on the workplace wellbeing of early childhood educators working in Army child development centers.

CHAPTER 3: METHODOLOGY

Introduction

The purpose of this mixed-methods research study was to assess workplace wellbeing factors that influence the wellbeing of early childhood educators (ECEs) working in Army child development centers (CDCs) and the association between these wellbeing factors and turnover. This study examined how the following workplace wellbeing factors of ECEs working in Army CDCs are associated with the probability of intentions to quit their job within the next 12 months: (a) physical wellbeing, (b) emotional wellbeing, (c) professional relationships, and (d) workplace supports. The findings are intended to inform Army CYS policymakers as they develop future programs that will best support the wellbeing of the ECE workforce and in turn reduce turnover.

Research Design

Chapters 1 and 2 provided the foundation for the research design of the current study. The intersection between military childcare and early childhood educator wellbeing is the point where this mixed-methods convergent design study utilizing the questionnaire variant contributes. The decision to use a mixed-methods research design for this study was based on the desire to examine data in multiple ways. While the use of a quantitative rating scale provided measured responses that were compared to each other and correlated to turnover, the qualitative open-ended questions provided the opportunity to triangulate the quantitative findings and hear the ideas and recommendations of participants regarding workplace wellbeing and turnover in a more direct manner.

This mixed-methods research design utilized a questionnaire variant. "The questionnaire variant is used when the researcher includes both open and closed-ended questions on a

questionnaire and the results from the open-ended questions are used to confirm or validate the results from the closed-ended questions" (Creswell & Clark, 2017, p. 73). The qualitative open-ended questions in this questionnaire variant study added to the depth of data that the quantitative questions produced and resulted in a more complete understanding of workplace wellbeing factors influencing the quitting intentions of ECEs. "When data collected in different ways points to the same conclusion, it strengthens the researcher's argument and mitigates the weaknesses of any one method" (Patton & Newhart, 2018, p. 156). The questionnaire variant mixed-methods research design used in the current study was organized based on the ECE workplace wellbeing theoretical framework developed through this research and answered the following research questions:

RQ1: What influence do wellbeing factors (that is, organizational supports, emotional wellbeing, physical wellbeing, and professional relationships) reported by ECEs working in Army CDCs have on their workplace wellbeing?

RQ2: Do these workplace wellbeing factors have an effect on the turnover intentions of ECEs working in Army CDCs?

RQ3: What do ECEs identify as their reasons to continue working with CYS (retention)?

RQ4: What do ECEs working in Army CDCs recommend to better support the wellbeing of ECEs and reduce turnover?

Questions one and two were guided by the four domains of the workplace wellbeing theoretical framework positioning this study: physical wellbeing, emotional wellbeing, professional relationships, and organizational supports. Insights from these two questions were revealed through quantitative research instrumentation in the form of a four-point scale that rated indicators from each of the four ECE workplace wellbeing domains. Research question one was

analyzed by utilizing a confirmatory factor analysis. The confirmatory factor analysis provided an in-depth analysis of the workplace wellbeing factors that resulted in robust findings which included the relationship between the observed scaled responses and their underlying latent construct, that is, overall workplace wellbeing. Research question two was analyzed with a logistic regression analysis to determine the predicted probability of workplace wellbeing influencing an ECE's intention to stay working with CYS or quit their job within the next 12 months. These statistical techniques are discussed further in the data analysis section of this chapter.

Research questions three and four were answered through two open-ended questions which provided the opportunity for a more personal and direct perspective of reasons why military ECEs choose to stay in their current job position along with recommendations for improving workplace wellbeing and reducing turnover. These questions were qualitative and expanded upon the quantitative rating scale responses through structured coding methods. The information gained from these open-ended questions corroborated data gained from the quantitative portion of the study and provided insights into wellbeing factors not initially considered. All questions were positioned to provide a greater understanding of workplace wellbeing factors and their influence on overall workplace wellbeing and ECE turnover.

Participants and Setting

The population of interest was the 5,465 ECEs working in one of the 187 Army CDCs located at one of 70 Army installations with CYS programs around the world. The participants of this study were the ECEs who work at any one of the CDCs from a random sample of 15 Army installations (described in the Procedures and Analysis section). This random sample included 34 Army CYS child development centers located at 15 Army installations, nine states, five

countries, and one U.S. Territory. The targeted random sample for this study included 1,091 ECEs, which was 19.96% of the target population.

The settings where this research took place included 34 child development centers located on the 15 randomly sampled Army installations. Army CDCs are built according to a standard design where the basic layout/floorplan of the facility structure is the same to enable care for children aged six weeks to five years old. The size of the CDC that each participant works at is a demographic variable included in this research study. Army CDCs are built in one of three sizes: small, medium, and large, as outlined in Table 4:

 Table 4

 Army Child Development Center Standardized Floorplan Details

Facility Size Classification	Number of Children	Number of Staff	Gross Building Area (SF)	Playground Area (SF)	Parking Spaces
Small	126	28	15,850	16,667	59
Medium	232	46	26,450	23,873	104
Large	338	62	37,300	38,311	146

Note. This data is from the U.S. Army Corp of Engineers

Each standardized floorplan can be modified to include more or less child activity spaces (classrooms) depending on the size of the building that is needed to serve the local soldier and DoD Civilian population. The standard design floorplan for Army CDCs is a cost-saving measure and provides a higher level of consistency for military children and families between installation programs. The CDCs at each Army installation around the world look much the same and contain many of the same features and materials, resulting in a familiar space for military children who move frequently.

The participants in this research study were trained according to the CYS Training and Development Plan. Due to the importance of training and credentialing in CYS, the ECEs' training level was a demographic variable included and taken into account in this research study. The Army CYS Training and Development Plan includes orientation training, an 18-month foundation training, and annual training requirements that follow an Entry Level, Skill Level, and Target Level sequence. These training requirements are the same at every CYS program around the world with the intent to further promote consistency and quality between programs. Pay increases accompany the completion of training levels and ECEs working in Army CYS also receive educational benefits to pay for the Child Development Associate Credential.

The Military Child Care Act of 1989 designated hiring preferences for military spouses (Military Family Programs and Military Child Care, 1989). For this reason, military spousal hiring preference was one of the demographic variables this research study considered. Army CYS follows a spousal preference hiring protocol which means the spouse of a soldier with the same level of education and experience as an unrelated spouse will be preferentially hired in the position. This process off-sets the employment challenges that come with being a military spouse, such as frequent moves and the need to start a new job at each location.

Role of the Researcher

I acknowledge my positionality in relation to the participants, the topic, the research sites, and military childcare is that of a purposeful and passionate insider. As stated in Chapter 1, caring for military children has become my life work—my *raison d'être*¹. I have worked alongside ECEs working in Army CDCs for many years and I feel a strong bond that creates an emotional desire to improve workplace wellbeing for ECEs so they may facilitate the highest

¹ Raison d'être: The reason for being. The claimed reason for the existence of something or someone.

quality childcare possible. I am also a military spouse and my husband served 23 years in activeduty Army, completing multiple deployments to both Afghanistan and Iraq. I raised two wonderful military children and cared for other military children in my home through the years. This passion, on one hand, can be considered a positive attribute since this desire creates the drive to work diligently and always keep the needs of military families at the forefront of conversations with decision makers. However, acknowledgement of this passion also brings with it the possibility I may have skewed the results of the research if solely qualitative research methods, such as focus groups and interviews, were used. My closeness to military childcare could have come through and possibly influence the results in face-to-face interactions with participants. McMillan and Schumacher (2006) supported this assumption by stating, "researchers are detached through the use of instruments and the ideal quantitative research is detached from the study to avoid bias" (p. 12). The mixed-methods questionnaire provided multiple views of ECE workplace wellbeing and limited potential researcher bias. It is for this reason I selected a questionnaire-based instrument that included both rating scaled and openended responses to create a separation between me and the participants and establish my research role as a detached insider.

Research Ethics

The ethical consideration and protection of early childhood educators through the research process informed the decisions related to this study. As Merinyo and Wangsness Willemsen (2021) argued, research ethics "shape the knowledge that is produced through research" (p. 18). As such, I have continuously prioritized adhering to ethical procedures and practices through the duration of this research project, from the design to dissemination.

Guillemin and Gillam (2004) identified "procedural ethics and ethics in practice as two

dimensions of ethical research" (p. 261). Procedural ethics include the documentation and approval processes that are in place to receive permission to conduct and protect human research. The ethics in practice involve the "day-to-day ethical issues that arise in the doing of research" (Guillemin & Gillam, 2004, p. 262).

The procedures required to ethically conduct research on ECEs working in Army child development centers was extensive. The Army required approval from the university internal review board (IRB) committee, to include a scientific review of the research procedures prior to applying for Army approval. Once the university IRB approval was complete, the research study received approval from the Army Human Research Protections Office and the Records

Management and Declassification Agency. These two agencies required documentation to ensure the protection and security of the research data and the Army civilian participants. The current research study also underwent an Army legal review and oversight from my Senior Executive Service (SES) officer. The use of Max Survey was a decision rooted in procedural ethics because it is a government approved data collection platform with extensive security mechanisms to protect the participants and data. A full scan of my computer and authorization to operate was secured by the IMCOM G6 Computer and Cybersecurity department prior to Army approval.

The National Association for the Education of Young Children (NAEYC) Code of Ethical Conduct is the ethical framework guiding the ethics in practice of this research study. The NAEYC Code includes the ethical commitment and responsibilities to children, families, early childhood educators, and the community. While the Code specifies above all to "do no harm," it also outlines standards to "do good" and promote the lives of children, families, and early childhood educators. The desire to promote and protect early childhood educators influenced the topic and the research design of the current study. Utilizing a mixed-methods

design questionnaire had a direct relationship to the ethical considerations of the participants, the topic, and the research sites. The questionnaire provided a separation of myself from the research participants, although my first inclination was to interact with the ECEs in the field during the research. I recognized these interactions with the random sample of participants could be misinterpreted by outsiders. The decision to use a questionnaire was a mediating factor to this perception and an ethical consideration.

The confidentiality of participants was an ethical consideration that was thoughtfully planned. The questionnaire did not contain information that could be linked back to the participant, CDC, installation, or IMCOM Directorate. The questionnaire followed the Army Human Research Protection Program (HRPP) guidelines and included a statement requesting the participant not include personally identifiable information or operationally sensitive information. This statement reassured the participants that the information on the survey would not be linked back to them. "The settings and participants should not be identifiable in print" (McMillan & Schumacher, 2006, p. 339). The protection of this information was a research priority. The confidentiality of the questionnaire results was a critical aspect of this research study. Army Child and Youth Services employees might have been concerned that the survey was asking for feedback on their perceptions of factors impacting their wellbeing in Army CYS programs. Fraenkel et al. (2019) stressed the importance of confidentiality and protecting research data to protect the subjects. "All subjects should be assured that any data collected from or about them will be held in confidence" (Fraenkel et al., 2019, p. 65). The questionnaire included the required HRPP confidentiality statement: "Your participation in this survey is voluntary, your input is strictly confidential, and your responses can not be linked back to you in any way." This

commitment to confidentiality of participants was adhered to at every step of the research process.

Instrumentation

As previously stated, the research instrument this study utilized was a mixed-methods questionnaire that contained demographic information, rating scale, and open-ended questions. The demographic information questions included the number of years working in military childcare, use of military spousal hiring preference, training level, and CDC size. The rating scale questions were guided by the following early childhood educator wellbeing domains: (a) physical wellbeing, (b) emotional wellbeing, (c) professional relationships, and (d) organizational supports. A question regarding the participant's intentions to stay or leave the profession (turnover) was adapted from the Grant et al. (2019) research study relating early childhood teacher's working conditions and well-being to their quitting intentions in the next 12 months. Two open-ended questions provided the platform for participants to write their reasons for staying with CYS and their recommendations to better support ECE wellbeing and reduce turnover. These open-ended questions were intentionally framed in a positive context. As mentioned, this link between the quantitative and qualitative portions of the study provided an in-depth examination of ECE workplace wellbeing and the influence on turnover.

The following information in Table 5 is based on each domain of the ECE workplace wellbeing theoretical framework that guided this study and includes the indicators describing each domain and related questions on the questionnaire. Each of these questions were rated by the participant on a four-point rating scale (1-Strongly Disagree, 2-Disagree, 3-Agree, 4-Strongly Agree).

Table 5Relationship of Workplace Wellbeing Domains, Indicators, and Rating Scale Questions

Workplace Wellbeing Domain	Domain Indicators	Question
Organizational Supports		
	Compensation and Benefits	I receive fair pay compared to other childcare jobs.
		I receive fair benefits compared to benefits offered at other childcare organizations.
	Administrative Processes	Adult to child ratios are maintained in my classroom.
		My work schedule is consistent (days and hours worked each week).
		I typically work with the same children each day (primary care groups).
		The amount of paperwork I complete is reasonable.
	Professional Development	CYS Orientation, Foundation, and annual training requirements have prepared me well for my job.
Emotional Wellbeing		
	Feelings of Purpose and Value	I am proud of the work I do at this center—caring for military children.
		I make a difference in the lives of military children.
		I feel the work I do is valued by the families of the children I care for.
		I feel the work I do is valued by my leadership.
		I feel the work I do is valued by the Army community.

	Stress and Emotional Exhaustion	My work-related stress is manageable	
		My emotional exhaustion level is manageable.	
Physical Wellbeing			
	General Health	I rarely feel sick at work.	
		I rarely feel in pain at work.	
		My health is a priority at my workplace.	
		My safety is a priority at my workplace.	
	Physical Demands of the Job	The physical demands of my job (bending, lifting, sitting on the floor, etc.) are not too much for me.	
	Illness Prevention	Proper cleaning/sanitation practices are followed in my work environment.	
		I have access to health insurance.	
Professional Relation	nships		
	Relationships with Children and Families	I have positive relationships with the children I care for.	
		I feel respected by the families / parents of the children I care for.	
	Relationships with Co-Workers	My relationships with co-workers are supportive.	
		My relationships with co-workers make my job more enjoyable.	
	Relationships with Leaders	My supervisor treats me in a fair and equitable manner.	
		I feel my supervisor cares about me.	
		My Training Specialist supports my training and educational goals.	

Note. This table explains the relationship between each workplace wellbeing domain to the associated indicators and rating scale questions.

The issue of turnover was identified in the questionnaire by asking the participant to designate if they planned to stay working with CYS or if they intended to quit their job with CYS within the next 12 months. As described above, the questionnaire contained two open-ended questions which generated in-depth qualitative data from the participants' perspectives that were coded with the NVivo software (Data Analysis Software for Academic Research | NVivo, n.d.) and triangulated to the quantitative data by structured coding techniques. "Qualitative inquiry provides richer opportunities for gathering and assessing, in language-based meanings, what the participant values, believes, thinks, and feels" (Saldana, 2015, p. 135). The two open-ended questions were:

- 1. What are your reasons for continuing to work for CYS?
- 2. What would you change or implement in CYS to better support the wellbeing of ECEs and reduce turnover?

It was important to consider the link between the quantitative and qualitative aspects of the mixed-methods study to ensure the two built upon each other. The rating scale questions and open-ended questions in this questionnaire were clearly connected, guided by the theoretical framework, and linked back to the four research questions.

Procedures and Analysis

The procedures and analysis methods of this mixed-methods research study were formed to answer the overarching research questions. Creswell and Poth (2017) identified the following "interconnected" steps for data collection procedures in a mixed-methods study: "sampling,

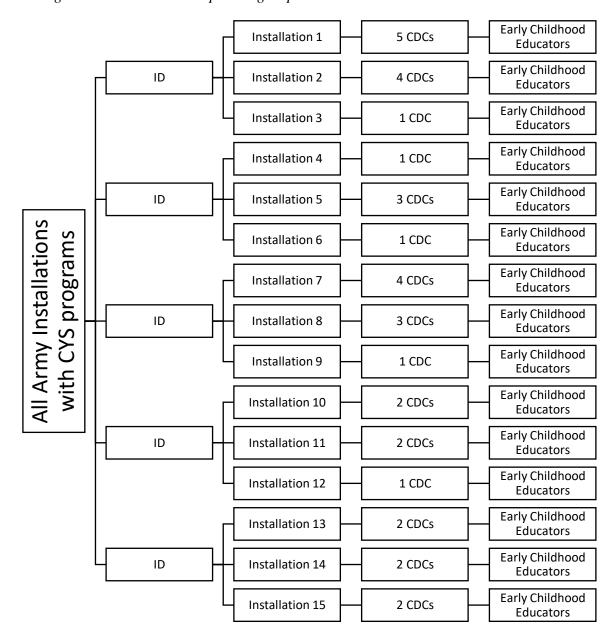
gaining permission, identifying data sources, recording the data, and administering the data collection procedures" (p. 173). These steps all reflect back to the original research questions and resulted in data that supported both the quantitative and qualitative intent.

Sampling

This research utilized a one-stage cluster random sampling technique to determine the sample of 15 Army installations, and all ECEs working at each of the installation's CDCs were invited to voluntarily participate in the research study. In one-stage cluster random sampling, a simple random sample of clusters, subgroups based on a naturally existing variable that is chosen by the researcher, such as location, is taken from a population. All of the individuals within each of the clusters selected at random are observed, where each cluster could have a different number of elements (Lohr, 2019). The population of Army installations were divided into five IMCOM Directorates (IDs) or regions around the world. The clusters were selected using a random number generator to identify three Army installations from each of the 5 IDs, resulting in 15 installations. Each installation runs an Army CYS program that operates CDCs. The number of CDCs each installation operates varies based on the needs of the military community. There were 34 Army CDCs in this sample from 15 Army installations in nine states, five countries, and one U.S. Territory. Figure 2 below provides a framework of the one-stage cluster sampling procedure for sampling 15 Army installations and 34 CDCs where all ECEs had the opportunity to participate.

Figure 2

One-stage Cluster Random Sample Subgroups



Obtain Permissions

University IRB approval was required prior to obtaining permission to conduct research on Army civilians, which required several levels of approval. The first layer of approval I requested was from IMCOM Headquarters Child and Youth Services leadership. I presented the

current research study to CYS leadership with a PowerPoint presentation outlining the purpose, problem, research questions, sampling, procedures, and potential impact the research study may have on CYS. Once the IMCOM CYS Chief granted permission to conduct the research and the university IRB was complete, the formal Army IRB research process began. Per Department of Defense Instruction 3216.02 Protection of Human Subjects and Adherence to Ethical Standards in DoD Supported Research, this research study required sponsorship from a Senior Executive Service (SES) or General Officer and approval from two departments: US Army Human Research Protections Office (AHRPO) and the Army Records Management and Declassification Agency (RMDA). The purpose of this extensive approval process was to protect Army soldiers and civilians from unethical research practices, over-researching a population, and research that may put the safety and security of participants at risk.

Once all IRB and sponsorship requirements were complete, I met with the IMCOM
Directorate (ID) CYS Program Managers to discuss the research plan. We met virtually on MS
Teams and I provided the ID Program Managers an overview of the research purpose, problem,
procedures, research questions, sample, and protection of confidentiality. Once this initial
contact was provided to the ID Program Managers, I sent an email to the installation CYS
Coordinators from the one-stage cluster random sample to introduce the study and provide the
flier with the Max Survey link and questionnaire information. CYS Coordinators provide
oversight for all CYS facilities that are operated at the installation. Participation in completing
the questionnaire was optional and not a requirement for employment; therefore, ECE volunteers
from the CDCs were the participants in this study. I sent three email reminders to CYS
Coordinators and Directors during the study to encourage questionnaire participation.

Data Sources

This mixed-methods research study included quantitative and qualitative data sources. Creswell and Poth (2017) recommended developing an "implementation matrix" to outline the research questions and "data sources (qualitative and quantitative)" that will answer the research questions (p. 182). The table below (Table 6) provides an implementation matrix for the current research study that links the research questions to the data source and questionnaire.

Table 6 *Implementation Matrix*

Research Question	Data Source	Data Source Link to Questionnaire
RQ1: What influence do workplace wellbeing factors (that is, organizational supports, emotional wellbeing, physical wellbeing, and professional relationships)	Quantitative	Four-point rating scale questions
reported by ECEs working in Army CDCs have on their workplace wellbeing?	Qualitative	Structured codebook from open-ended responses
RQ2: Do these workplace wellbeing factors have an effect on turnover?	Quantitative	Four-point rating scale questions
		One close-ended question regarding employment intentions in the next 12 months.
RQ3: What do early childhood educators identify as their reasons to continue working with CYS (retention)?	Qualitative	Open-ended question: What are your reasons for continuing to work with CYS?
	Quantitative	Four-point rating scale questions

RQ4: What do early childhood educators working in Army CDCs identify as changes needed to better support the wellbeing of ECEs and reduce turnover?

Qualitative Open-ended question:

What would you recommend to CYS to better support the wellbeing of ECEs and

reduce turnover?

Quantitative Four-point rating scale

questions

Data Collection

The decision to use an electronic questionnaire for data collection was determined after thoughtful consideration of the strengths and challenges of this technique. Strengths of online questionnaires include the anonymity of the participants and the minimal amount of time needed to complete an online questionnaire. Paper questionnaires were initially considered due to the inconsistent computer server capabilities between Army installations; however, this was outweighed by the ease of data collection for a large sample size associated with online questionnaires. Paper questionnaires also require the participant to place the questionnaire in a mailbox, which is an additional burden on the participant. Further, McMillian and Schumacher (2010) identified low response rates are an additional weakness of mailed questionnaires. The online questionnaire data collection technique was the best option for collecting data from participants geographically separated as the ECEs working at each of the 15 Army installations were.

The questionnaire data were collected through the federal government Max Survey online system. I sent each CYS Coordinator and all the CDC Directors from the 15 randomly sampled installations the questionnaire link and research description. The Army research approval process included permission for the participants to complete the online questionnaire during duty hours

and the online questionnaire was open to the participants for 23 days. I sent a reminder to the Coordinators and directors on days 5, 15 and 22 of the questionnaire to encourage completion of the questionnaire and possibly increase response rates, a technique highly suggested by survey researchers (Stern et al., 2014). Unfortunately, incentives for completing the online questionnaire are forbidden by the military, which may have increased participation. Once the allotted timeframe was complete, I closed the questionnaire availability and began analyzing the data.

Data Analysis

This mixed-methods research study involved an analysis of quantitative and qualitative data and a triangulation between the data sources to interpret the results. The analysis of each data source was linked to the intent of the original research questions.

RQ1: What influence do wellbeing factors (that is, organizational supports, emotional wellbeing, physical wellbeing, and professional relationships) reported by ECEs working in Army CDCs have on their workplace wellbeing?

The data analysis methods used for RQ1 were a confirmatory factor analysis and triangulation to the structured codebook data from the open-ended questions. "Confirmatory factor analysis allows a researcher to figure out if a relationship exists between a set of variables and their underlying constructs" (Glen, 2014, p. 4). The multiple relationships between the workplace wellbeing domains (i.e., physical wellbeing, emotional wellbeing, professional relationships, and organizational supports) were revealed through the confirmatory factor analysis. Mueller and Hancock (2001) identified a confirmatory factor analysis is especially useful when fitting data to a "specific, theory-derived measurement model" (p. 1). This point is important because it aligns with the current research that was framed based on the ECE Workplace Wellbeing Theoretical Framework, as described in Chapter 1.

The confirmatory factor analysis model fit was estimated using multiple indices. Multiple indices were used together to determine the extent to which each model fits the data, including the Tucker and Lewis index (TLI), the comparative fit index (CFI), and the root mean square error of approximation (RMSEA). A rule of thumb that a TLI or CFI value of .90 implies good fit has been used by earlier convention, although cut-off criteria at .95 levels have been recommended (Hu & Bentler, 1999). RMSEA values below or equal to .06 imply a good model fit (Hu & Bentler, 1999), while values below or equal to .08 imply an adequate fit, although more conventional cutoff values fall below or equal to .05 (Schumacker & Lomax, 2004).

RQ2: Do these workplace wellbeing factors have an effect on the turnover of ECEs working in Army CDCs?

The data analysis method used for RQ2 was the logistic regression analysis. "The logistic regression analysis is used to obtain an odds ratio in the presence of more than one explanatory variable" (Sperandei, 2014. p. 1). The odds ratio this research study determined were the odds of the ECE's intentions of quitting their job or staying in their job based on the wellbeing factor scores of ECEs, taking into account the other demographic variables. "The odds ratio allows the researcher to show for each independent variable the probability that it will be related to determining the difference in the dependent variable" (McMillan & Schumacher, 2006, p. 230). Logistic regression "models the probability of an event occurring depending on the values of the independent variables" (Foltz, 2015, p. 15). The "event" or dependent variable in the current research study was the ECE's reported intention of quitting or staying in their job. The quitting intentions of ECEs in this study was a dichotomous dependent variable because there were two events that may occur (quitting or staying). The values of the independent variables were the workplace wellbeing factor scores derived from the confirmatory factor analysis described

above. This analysis determined if there was a significant difference between ECEs who reported intentions of staying or leaving with respect to their wellbeing factor scores. In addition, this analysis provided the probability of the ECE quitting or staying in their position based on their overall workplace wellbeing factor score and specified demographic variables. The following categorical demographic variables were included in the logistic regression analysis: Training Level, Military Spousal Preference, the categorical number of years working in CYS, and the size of the CDC where the participant works. These categorical variables were "predictor variables," which were used to further predict the likelihood of ECE turnover. The resulting data provided thorough insights into the workplace wellbeing of ECEs working in Army CDCs and their intentions to stay or leave their job position within the next 12 months. Table 7 below provides a clear identification and description of the variables used in this study.

Table 7Dependent, Independent, and Categorical Variables

Variable Type	Description
Dichotomous Dependent Variable	 ECE plans to stay working in CYS in the next 12 months. ECE plans to quit working in CYS in the next 12 months.
Independent Continuous Variables	Factor scores of the Workplace Wellbeing Domains: Physical, Emotional, Professional Relationships, Organizational Supports and Overall ECE Workplace Wellbeing
Categorical Variables	 Training Level: Entry, Skill, or Target Military Spousal Preference Size of the CDC Number of years working in military childcare (categorical time span)

As previously mentioned, research questions three and four were open-ended questions regarding the participants' reasons for staying with CYS and recommendations for CYS to better support ECE wellbeing and turnover.

RQ3: What do early childhood educators identify as their reasons to continue working in CYS?

RQ4: What do early childhood educators working in Army CDCs recommend to better support the wellbeing of ECEs and reduce turnover?

The resulting qualitative data were analyzed in NVivo through structured codes based on the ECE Workplace Wellbeing Theoretical Framework and whether participants planned to stay working with CYS (stayers) or planned to quit their job in the next 12 months (leavers). The indicators of the workplace wellbeing domains framed the theme categories, and the participant responses were coded into one of the wellbeing indicator categories. A separate category was developed for responses that did not fit in the workplace wellbeing framework. This method of coding is considered a "structured approach that can help ensure the comparability of data across individuals, times, settings, and researchers, and are particularly useful in answering questions that deal with differences between people" (Maxwell, 2013, p. 88). This structured approach was designed to answer the questions regarding personal reasons to stay working with CYS and recommendations for workplace wellbeing improvements that influence turnover.

While the structured themes that outlined the early childhood educator wellbeing domains were a starting point for categorizing, it was important to remain flexible and open to data that did not fit into these areas. This method involved a loose restructuring that was open to additional themes as the data warranted. Maxwell (2013) recommended when utilizing qualitative themes, the researcher "can lay out a tentative plan for the study but leave open the

possibility of substantially revising this if necessary" (p. 89). I analyzed each piece of the qualitative data and assigned an initial code and secondary code, when applicable. All data that did not fit the structured codes were designated to an "other code" section. This process triangulated the ECE Workplace Wellbeing Theoretical Framework and determined if there were qualitative data that could inform the framework further.

The combination of rating scale questions and open-ended questions as part of the questionnaire provided answers to the overarching research questions. Creswell and Clark (2017) stated "mixed methods researchers cannot lose sight of this objective [answering research questions] and should continually ask themselves whether their samples and data will provide answers to the questions" (p. 182). This section provided a clear link between each research question and the data analysis techniques that were used to answer each.

Limitations

The COVID-19 pandemic closed programs and businesses around the world during the course of this research study, including Army CYS CDCs worldwide. The COVID-19 pandemic caused the majority of Army CDCs to shut down temporarily and re-establish health and safety protocols. As discussed in Chapter 2, military childcare is considered essential to military readiness since soldiers must receive childcare to work. Childcare risk mitigation procedures were designed quickly in accordance with the Center for Disease Control "Guidance for Child Care Programs that Remain Open" and included parent drop-off and pick-up procedures, food preparation and delivery methods, handwashing protocols, surface sanitation procedures, and reduced group sizes (CDC, 2020). Even with the more stringent health and safety protocols that were implemented, the pandemic was a cause for concern among CYS staff, families, and leaders. This additional stress and concern of illness is an unpredicted limitation of the current

research study. Further, with the primary focus on the health and safety of children, families, and staff (as it should be), the completion of this questionnaire was not the programs' main priority and may have influenced the response rate.

Conclusion

The purpose of this questionnaire-based mixed-methods research study was to assess the factors that comprise the wellbeing of ECEs working for Army CYS in CDCs and how these wellbeing factors associate to the ECE's intentions to leave the profession. Participants identified their reasons to stay working in CYS and recommendations for improving the wellbeing of ECEs working in CYS to triangulate the ECE Workplace Wellbeing domains and provide specific program information. This chapter included an overview of the research design, role of the researcher and ethical considerations, instrumentation and protocols, procedures, and analysis guiding this research. The research findings are summarized in Chapter 4 and discussed further in Chapter 5.

CHAPTER 4: FINDINGS

The purpose of this chapter is to present the early childhood educator workplace wellbeing findings from this study. These findings are presented in relationship to previous research, the ECE Workplace Wellbeing Theoretical Framework, and the four research questions guiding this study.

Findings indicate the ECE Workplace Wellbeing Theoretical Framework developed for this study resulted in a robust construct of ECE workplace wellbeing consisting of physical wellbeing, emotional wellbeing, professional relationships, and organizational supports as the primary domains. This framework is highly predictive of turnover indicating a one unit increase in wellbeing correlating to a 765% increase in the odds of reporting intentions to stay working in their job. This finding is important since 16.5% of participants intend to quit their job in the next 12 months. Interestingly, none of the predictor demographic variables (length of time working in CYS, size of CDC, training level, military spousal preference) had an influence on ECE wellbeing and turnover intentions. The quantitative data were triangulated with the qualitative open-ended question data through the use of a structured NVivo codebook mirroring the domains and indicators of the ECE Workplace Wellbeing Theoretical Framework to further assess the validity of the model and reveal the reasons why ECEs continue working in CYS along with their recommendations for improving workplace wellbeing.

The quantitative and qualitative data indicate relationships with military children were the ECE's primary reason to continue working in CYS and many reflected on the importance of developmentally appropriate practices and high-quality early childhood education. Early childhood educators were proud of their work and felt they are making a difference in the lives of military children. They found purpose in serving military children, families, and the Army

community and many stated they are part of a military family. Army Child and Youth Services ECEs revealed a high-level of support from their relationships with co-workers and specified coworkers make their job more enjoyable. These relationships with co-workers build teamwork and many participants considered their co-workers as "family." In sharp contrast to all known previous research of ECEs, this study found positive indications from ECEs in the area of pay and benefits. Early childhood educators in CYS acknowledged fair pay and benefits were reasons to stay working in CYS yet identified the need for pay advancement past foundation training and for flex ECEs to receive benefits, especially health insurance and sick leave. Further, ECEs revealed they feel valued by the families of the children they care for and the Army community yet identified the need for supervisors to value them more. The highest coded recommendations were in the area of relationships with leaders, with many participants indicating the need for more care, support, acknowledgement, and for managers to prioritize the health of ECEs by following CYS protocols to send sick children home and require sick employees to stay home. Finally, CYS ECEs communicated the importance of a consistent staff schedule and identify an inconsistent staff schedule as a contributing factor to stress.

The presentation of findings in this chapter begins with an examination of the ECE Workplace Wellbeing Theoretical Framework construct and the association between ECE workplace wellbeing and turnover intentions. The quantitative and qualitative findings will then be presented by each of the four ECE Workplace Wellbeing Theoretical Model domains: organizational supports, physical wellbeing, emotional wellbeing, and professional relationships.

Early Childhood Educator Workplace Wellbeing Theoretical Framework

Previous researchers have looked at many different factors or combination of factors related to early childhood educator workplace wellbeing, some without a standard framework

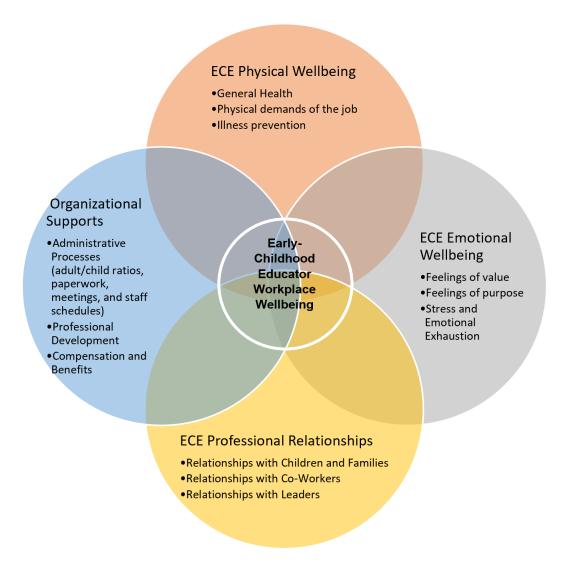
and research tool that could be easily repeated at multiple early childhood programs. While not the initial intent, this study is a response to this need as well as Cumming and Wong's (2019) call for researchers to conceptualize ECE workplace wellbeing based on the following definition:

A dynamic state, involving the interaction of individual, relational, work-environmental, and sociocultural—political aspects and contexts. Educators' wellbeing is the responsibility of the individual and the agents of these contexts, requiring ongoing direct and indirect supports, across psychological, physiological, and ethical dimensions (p. 276).

The above definition of ECE wellbeing as a "dynamic" state describes a wellbeing model that is in motion and the parts of the whole impact each other. The notion of a "dynamic state" is central to the ECE Workplace Wellbeing Theoretical Framework guiding this study and graphically represented in Figure 3 by the overlapping domains of emotional wellbeing, physical wellbeing, professional relationships, and organizational supports which influence each other and contribute to overall ECE workplace wellbeing:

Figure 3

ECE Workplace Wellbeing Theoretical Framework



Each domain of the framework contributes to each other and the central whole: ECE Workplace Wellbeing. The findings in this research study support the dynamic state of wellbeing by quantitatively and qualitatively revealing that while each domain alone does not represent ECE workplace wellbeing or predict the turnover of ECEs working in CYS, the central overall ECE workplace wellbeing is representative and has a high prediction rate of turnover. Thus, the

focus on individual facets of wellbeing in this study, such as stress, pay, and professional development, while important and informative in their own right, do not represent ECE workplace wellbeing or predict turnover; however, the combination of the whole does.

The four main domains and underlying indicators for each domain were organized and validity and reliability evidence were affirmed with a confirmatory factor analysis (CFA), item analyses, and coefficient alpha that helped in determining if organizational supports, emotional wellbeing, physical wellbeing, and professional relationships were representative as a measure of ECE workplace wellbeing. These methods were used to answer the first research question:

RQ1: What influence do wellbeing factors (that is, organizational supports, emotional wellbeing, physical wellbeing, and professional relationships) reported by ECEs working in Army CDCs have on their workplace wellbeing?

Descriptive item analyses were performed on all 28 scaled questionnaire items. Their percentages by answer, options, means, and standard deviations are reported in Table 8.

 Table 8

 Scaled Response Percentages, Mean, and Standard Deviation by Scale Item

Scale	Item	Strongly	Disagree	Agree	Strongly	No	Mean	SD
		Disagree			Agree	Answer		
Organizat	ional Sup	ports						
	Q1	9.6%	21.9%	41.2%	24.2%	3.1%	2.83	0.92
	Q2	6.9%	12.7%	43.5%	29.2%	7.7%	3.03	0.87
	Q3	8.1%	11.9%	42.7%	35.8%	1.5%	3.08	0.90
	Q4	11.5%	12.7%	37.3%	36.9%	1.5%	3.01	0.99
	Q5	4.6%	9.2%	47.7%	36.5%	1.9%	3.18	0.79
	Q6	6.5%	13.1%	56.9%	21.2%	2.3%	2.95	0.79
	Q7	3.8%	14.6%	53.8%	25.4%	2.3%	3.03	0.75
Emotiona	l Wellbei	ing						
	Q8	0.8%	3.1%	35.8%	56.5%	3.8%	3.54	0.60
	Q 9	1.9%	2.3%	37.3%	55.8%	2.7%	3.51	0.65
	Q10	6.9%	11.9%	43.1%	33.8%	4.2%	3.08	0.87
	Q11	16.5%	17.3%	41.5%	20.0%	4.6%	2.68	0.99
	Q12	12.3%	15.0%	48.1%	18.8%	5.8%	2.78	0.91

	Q13	13.1%	23.8%	48.8%	11.5%	2.7%	2.60	0.86
	Q14	14.2%	24.6%	45.0%	12.3%	3.8%	2.58	0.89
Physical V	Wellbeing							
	Q15	3.5%	18.1%	51.5%	20.0%	6.9%	2.95	0.75
	Q16	5.0%	26.9%	44.2%	17.7%	6.2%	2.80	0.81
	Q17	14.2%	21.2%	41.2%	16.9%	6.5%	2.65	0.95
	Q18	9.2%	14.6%	50.4%	21.2%	4.6%	2.88	0.87
	Q19	6.9%	6.2%	44.6%	37.7%	4.6%	3.19	0.85
	Q20	0.4%	1.5%	43.5%	50.8%	3.8%	3.50	0.55
	Q21	13.5%	18.8%	38.8%	21.9%	6.9%	2.74	0.98
Profession	nal Relatio	nships						
	Q22	0.8%	0.4%	31.2%	63.1%	4.6%	3.64	0.54
	Q23	2.3%	10.0%	47.3%	32.3%	8.1%	3.19	0.73
	Q24	2.7%	10.4%	46.5%	35.8%	4.6%	3.21	0.75
	Q25	3.1%	8.8%	44.2%	37.3%	6.5%	3.24	0.76
	Q26	10.4%	13.8%	45.0%	23.1%	7.7%	2.88	0.92
	Q27	11.2%	19.2%	39.6%	20.4%	9.6%	2.77	0.94
	Q28	6.9%	6.9%	43.5%	35.8%	6.9%	3.16	0.86

Four questions (Q8, Q9, Q20, and Q22) from the ECE workplace wellbeing scale were removed due to the large percentage of participants scoring the questions in the high range. That is, research participants tended to respond favorably to the items, leaving some answer options with less than one percent of selection.

- Q8: I am proud of the work I do at this center—caring for military children.
- Q9: I make a difference in the lives of military children.
- Q20: The physical requirements of my job (bending, lifting, etc.) are not too much.
- Q22: I have positive relationships with the children I care for.

Specifically, for Q8 only 0.8% of the respondents selected the *Strongly Disagree* option, for Q9, 1.9% selected *Strongly Disagree*, for Q20 0.4% selected *Strongly Disagree*, and for Q22, 0.8% selected *Strongly Disagree*. Even when the response options were collapsed to a dichotomous variable, representing agreement and disagreement by putting all those who

strongly disagreed with those who disagreed into a disagreement category, and by putting together those who strongly agreed and agreed into an agreement category, the disagreement category represented less than 5% of the respondents. Specifically, for Q8, those in disagreement represented 3.8% of the respondents, Q9 represented 4.2% of the respondents, Q20 represented 1.9% of respondents, and Q22 represented 1.2% of respondents. Model modifications were made to improve the validity of the tool and framework. While these questions were removed from the tool to assess overall workplace wellbeing, they are later examined as part of data findings related to each domain because while the participants' responses were remarkably high and did not inform the tool well, the responses are valid and important to consider. Additionally, future participants working in organizations without the provisions already afforded to military childcare programs may not rate these questions as high as Army CYS ECEs.

The second order confirmatory factor analysis was used with the R software and the LAVAAN package (Rosseel, 2012). The confirmatory factor analysis model fit was estimated using multiple indices. These multiple indices were used together to determine the extent that the model fit the data, including the Tucker and Lewis Index (TLI), the comparative fit index (CFI), the root mean square error of approximation (RMSEA), and the standardized root mean squared residual (SRMSR). The CFA was used to provide evidence of measurement validity, and the evidence supported the internal structure of the ECE workplace wellbeing scale.

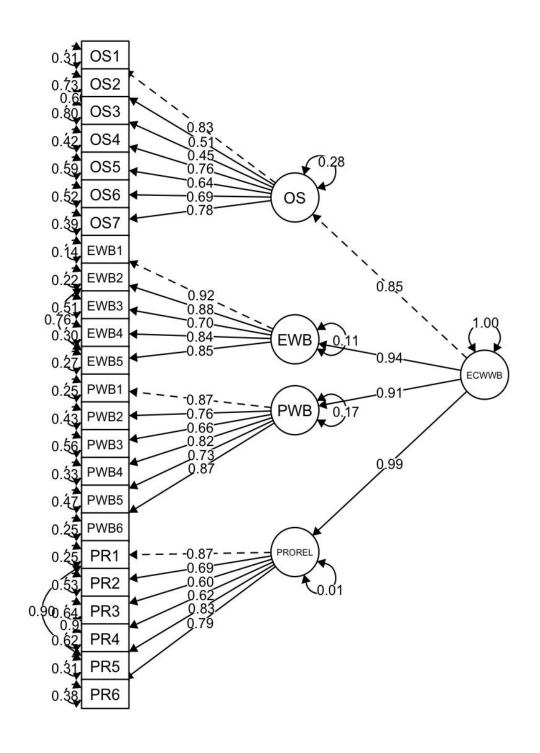
Specifically, as identified in Chapter 3, a TLI or CFI value of .90 indicates a good fit and has been used by earlier convention, although cut-off criteria at .95 levels have been recommended (Hu & Bentler, 1999). The current global fit indices indicated an excellent model fit, where CFI = 0.997, TLI = 0.996, RMSEA = 0.062 95% CI (0.051, 0.073), and SRMR =

0.070. The standardized factor loadings ranged from .45 to .93 (i.e., all factor loadings for the items were well over .20).

Results from the second order confirmatory factor analysis provide evidence that ECE workplace wellbeing is a multidimensional construct. In the present study, ECE workplace wellbeing consists of four correlated primary factors (domains) with 24 corresponding items (see Figure 4).

Figure 4

ECE Workplace Wellbeing Confirmatory Factor Analysis Structural Model



The correlations between the primary factors are strong ranging from .86 to .98 (see Table 9).

 Table 9

 Intercorrelations Between ECE Workplace Wellbeing Domains

	Organizational Supports	Emotional Wellbeing	Physical Wellbeing	Professional Relationships	Overall ECE Workplace Wellbeing
Organizational Supports	1.000				
Emotional Wellbeing	0.880	1.000			
Physical Wellbeing	0.863	0.928	1.000		
Professional Relationships	0.916	0.975	0.957	1.000	
Overall ECE Workplace Wellbeing	0.919	0.978	0.960	1.000	1.000

Early childhood educator Workplace Wellbeing can be regarded as both domain-specific and multidimensional, and the second-order analysis indicates the latent construct is constituted by a more general domain-specific experience of ECE Workplace Wellbeing. Figure 4 shows the structural model of the second-order CFA with standardized factor loadings. The factor loadings were greater than .45 for all the items and were significant at p < 0.001. The four first order factor loadings ranged from .85 to .99, with ECE Professional Relationships being the highest (.99), Emotional Wellbeing the second (0.94), Physical Wellbeing third (0.91), and Organizational Supports (0.85; see Table 10).

Table 10Second-Order Confirmatory Factor Analysis Results (n=260)

Variable Names	Estimate	Standard Estimate	SE
Organizational Supports		Lstimate	
Q1	0.621	0.515	0.084
Q2	0.542	0.449	0.087
Q3	0.919	0.762	0.076
Q4	0.772	0.640	0.074
Q5	0.834	0.692	0.063
Q6	1.000	0.829	
Q7	0.941	0.780	0.060
ECE Emotional Wellbeing			
Q10	0.758	0.701	0.044
Q11	1.000	0.925	
Q12	0.907	0.839	0.031
Q13	0.921	0.852	0.033
Q14	0.954	0.883	0.029
ECE Physical Wellbeing			
Q15	0.871	0.756	0.057
Q16	0.767	0.665	0.063
Q17	0.998	0.865	0.044
Q18	0.940	0.816	0.046
Q19	0.839	0.728	0.049
Q21	1.000	0.868	
ECE Professional Relationships			
Q23	0.793	0.688	0.056
Q24	0.688	0.597	0.059
Q25	0.712	0.617	0.055
Q26	1.000	0.868	
Q27	0.955	0.828	0.020
Q28			
Organizational Supports	1.000	0.846	
ECE Emotional Wellbeing	1.245	0.944	0.075
ECE Physical Wellbeing	1.126	0.911	0.074
ECE Professional Relationships	1.230	0.994	0.078

Reliability analyses were conducted to provide statistical evidence regarding the consistency of the internal structure of the ECE Workplace Wellbeing measure by using the recommended values of Coefficient alpha. Satisfactory internal reliability values are often

thought of as being greater than .70 for research purposes and .80 for high stakes purposes. For the ECE Workplace Wellbeing scale, the reliability analysis suggested fairly high to excellent internal values, that is, Coefficient alpha = 0.95, 95% CI [.93, .96] for the whole scale, and for the domains, Coefficient alpha ranged from .79 to .90. Specifically, for the Organizational Supports subscale the internal reliability coefficient = .79, 95% CI [.73, .83], for the Emotional Wellbeing subscale the internal reliability coefficient = .90, 95% CI [.86, .92], for the Physical Wellbeing subscale the internal reliability coefficient = .83, 95% CI [.78, .87], for the Professional Relationships subscale, the internal reliability coefficient = .86, 95% CI [.82, .90]. All of the coefficient alphas were well above .70 or .80 thresholds. See Table 11 for item-total correlations and reliability values if items (Q8, Q9, Q20, and Q22) are deleted.

Table 11Analysis of ECE Workplace Wellbeing Scale Items

Scale	Item	Item-Total	Correlation	Reliability	Reliability if item
		Correlation*			deleted
Organizational			1.000	.79	
Supports					
	Q1	0.48			0.76
	Q2	0.48			0.76
	Q3	0.50			0.76
	Q4	0.53			0.76
	Q5	0.60			0.74
	Q6	0.49			0.76
	Q7	0.54			0.76
Emotional			1.000	.90	
Wellbeing					
_	Q10	0.59			0.89
	Q11	0.75			0.86
	Q12	0.73			0.86
	Q13	0.75			0.86
	Q14	0.75			0.86
Physical Wellbeing			1.000	0.83	
Wentering	Q15	0.54			0.81
	Q15 Q16	0.46			0.83
	Q10 Q17	0.71			0.77
	Q17 Q18	0.67			0.79
	Q18 Q19	0.54			0.79
		0.69			0.78
Professional	Q21	0.09	1.000	0.86	0.78
Relationships			1.000	0.80	
	Q23	0.48			0.86
	Q24	0.68			0.84
	Q25	0.67			0.84
	Q26	0.72			0.82
	Q27	0.73			0.82
	Q28	0.58			0.85
Overall			1.00	.95	
Wellbeing					

Note. *Item-total correlation = Corrected item total correlation

These data provide strong statistical evidence regarding the consistency of the internal structure of overall workplace wellbeing as a construct of emotional wellbeing, physical

wellbeing, professional relationships, and organizational supports. While the results described above provide strong statistical evidence of the internal structure of ECE workplace wellbeing construct ECE turnover was analyzed through a logistic regression model to answer the second research question:

RQ2: Do these workplace wellbeing factors have an effect on the turnover of ECEs working in Army CDCs?

The logistic regression model was used to analyze the effects of the overall workplace wellbeing factor score on the dichotomous dependent variable of retention intention, taking into account demographic variables. The dichotomous dependent variable consisted of values that reflected whether ECEs reported planning to quit their job within the next 12 months or planning to stay in their job. Findings indicated 83.5% of participants plan to stay working in CYS while 16.5% plan to leave their job within the next 12 months. As described in the previous chapter, the demographic variables were the size of the CDC, years working in CYS, training level, and spousal preference. The training level of ECEs reported the highest percentage at 73.4% reporting being at the CYPA Target Level, whereas 14.9% reported being at the CYPA Skill Level, and 11.7% at the CYPA Entry Level; the size of each CDC where participants reported working were equally distributed (i.e., small CDC = 37.1%, medium CDC = 36.7%, and large CDC = 26.2%). The ECEs reported that 24.2% used their military spousal preference hiring practice for when they applied for their job. The highest category of length of time working in CYS was 48.4% of ECEs working with CYS for 1-3 years. See Table 12 for the description of demographic results.

Table 12 Demographic Results (n = 248)

Variable Name	Frequency	Percentage
Current Training Level		
CYPA Entry Level	29	11.7%
CYPA Skill Level	37	14.9%
CYPA Target Level	182	73.4%
Size of CDC		
Large CDC	65	26.2%
Medium CDC	91	36.7%
Small CDC	92	37.1%
Military Spousal Preference		
No. I did not use military spousal preference.	188	75.8
Yes. I did use military spousal preference.	60	24.2
Length of time working for Army CYS		
1-12 months	39	15.7%
1-3 years	81	32.7%
4-5 years	31	12.5%
6 – 10 years	41	16.5%
11 – 15 years	24	9.7%
16 – 20 years	16	6.5%
More than 20 years	16	6.5%
Employment Intention within the next 12 months		
I plan to quit my job with CYS within the next 12 months.	41	16.5%
I plan to stay working in CYS even if I move to another position, center, or installation.	207	83.5%

The results of the logistic regression show the log of the odds of a participant planning to stay in the workplace in the next 12 months was positively associated to the overall ECE Workplace Wellbeing, b = 2.16, p < .001 (see Table 13), holding the demographic variables constant. Participants who had higher ECE Workplace Wellbeing scores were more likely to

report they would stay and continue working with CYS than participants with lower ECE Workplace Wellbeing scores. In fact, for every one-unit increase in ECE Workplace Wellbeing scores, the odds of a participant to report that they will stay working with CYS were 8.65 (i.e., e^{2.16}) times greater, 95%CI [2.85, 26.25] holding the demographic variables constant.

While the overall wellbeing score of participants directly correlated to their intentions to stay or leave their job, the individual wellbeing factors (organizational supports, emotional wellbeing, physical wellbeing, and professional relationships) and demographic variables (training level, CDC size, spousal preference, and length of time working in CYS) had no individual predictive value of turnover. These findings indicate the ECE Workplace Wellbeing Theoretical Framework is a valid multi-dimensional construct of wellbeing. These findings conclude that while the individual workplace wellbeing domains show no correlation to intended turnover, the combined overall workplace wellbeing of ECEs has a strong association to turnover, explaining 24% of additional variance over the demographic variables. In summary, for a one-unit increase in wellbeing factor score, we expect to see about a 765% increase in the odds of planning to stay working in CYS. Table 13 below provides a summary of the logistic regression analysis for the variables predicting turnover.

Table 13Summary of Logistic Regression Analysis for Variables Predicting Turnover

			Modal	1			Modalo	<u>, </u>
	В	SE(B)	Model e ^B	CI [2.5%, 97.5%]	В	SE(B)	Model 2 e ^B	CI [2.5%,97.5%]
Entry Level Training	1.43	0.65	4.19		2.42	1.23	11.21	
Skill Level Training	0.69	0.81	1.99		0.47	1.20	1.60	
Target Level Training	0.92	0.79	2.52		0.90	1.10	2.45	
Spousal Preference —Yes	0.39	0.44	1.48		-0.51	0.61	0.60	
Medium CDC	0.36	0.44	1.43		0.82	0.65	2.27	
Small CDC	0.61	0.45	1.84		0.64	0.66	1.90	
Work Length > 20 years	0.01	1.32	0.99		-1.23	1.67	0.29	
Work Length 1-3 years	-1.53	0.79	0.22		-1.68	1.27	0.19	
Work Length 11- 15 years	0.50	1.31	1.64		-0.92	1.75	0.40	
Work Length 16- 20 years	0.74	1.12	0.48		0.61	1.85	1.84	
Work Length 4-5 years	1.07	0.92	0.34		-1.88	1.43	0.15	

Work Length 6- 10 years	1.47	0.90	0.23	-1.69	1.39	0.19	
ECE Workplace Wellbeing				2.16	0.57	8.65	[2.85, 26.5]
Pseudo R ²		0.09			0.33		

The CFA confirmed the domains of the ECE Workplace Wellbeing Theoretical Model are representative of overall ECE workplace wellbeing and the logistic regression model predicted turnover based on ECE workplace wellbeing, resulting in a 765% increase in the odds of planning to stay working in CYS for a one unit increase in workplace wellbeing. While findings indicate the predictive quality of the tool as valid, the findings also indicate 16.5% of ECEs working in CYS plan to quit their job in the next 12 months and 83.5% plan to stay. The following sections discuss the quantitative and qualitative data related to each workplace wellbeing domain which presents an in-depth examination of the "why" behind CYS ECE turnover.

Findings Related to Each ECE Workplace Wellbeing Domain

The findings in this study suggest the interconnected wellbeing domains of organizational supports, emotional wellbeing, physical wellbeing, and professional relationships provide a robust conceptualization of ECE workplace wellbeing. While this macro examination of ECE workplace wellbeing promotes understanding of overall workplace wellbeing and turnover, a micro examination of each domain and indicator by triangulating the quantitative and qualitative data provides the detail work and opportunity to hear the "voices" of the ECEs that are insightful

to organization leaders. The data results which were collected on the questionnaire as openended responses presented in this section answer the following research questions:

RQ3: What do early childhood educators identify as their reasons to continue working with CYS (retention)?

RQ4: What do early childhood educators working in Army CDCs recommend to better support the wellbeing of ECEs and reduce turnover?

Table 14 outlines the ECE scored responses based on the rating scale options for each domain/indicator. The following sections refer to these quantitative results and incorporate the qualitative open-ended data from the participants indicating their reasons to stay working in CYS and recommendations to improve ECE workplace wellbeing.

 Table 14

 Percent of Army ECEs Responding to the Frequency of Each Workplace Wellbeing Indicator

Domain	Indicator content	Strongly Disagree	Disagree	Agree	Strongly Agree	No Answer
Organizat	ional Supports	Disagree			7 15100	7 1115 11 01
Organiza	I receive fair pay compared to pay at other childcare organizations.	9.6%	21.9%	41.2%	24.2%	3.1%
	I receive fair benefits compared to benefits offered at other childcare organizations.	6.9%	12.7%	43.5%	29.2%	7.7%
	Adult to child ratios in my classroom are maintained.	8.1%	11.9%	42.7%	35.8%	1.5%
	My work schedule is consistent (days and hours worked each week).	11.5%	12.7%	37.3%	36.9%	1.5%
	I typically work with the same children each day.	4.6%	9.2%	47.7%	36.5%	1.9%

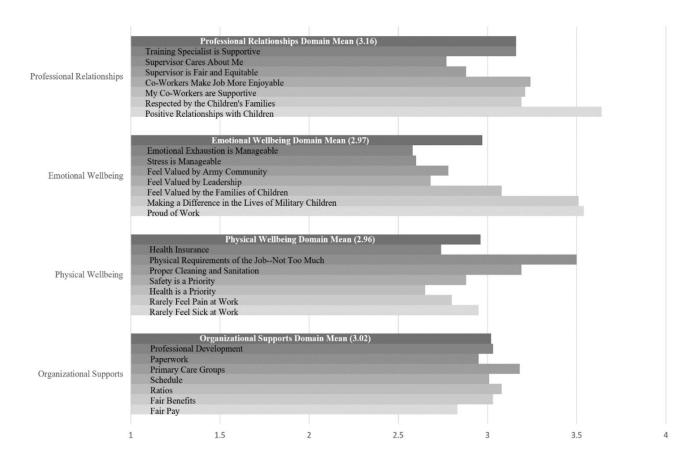
	The amount of paperwork I complete is reasonable.	6.5%	13.1%	56.9%	21.2%	2.3%
	CYS Orientation, Foundation, and Annual training requirements have prepared me well for my job.	3.8%	14.6%	53.8%	25.4%	2.3%
ECE Emo	I am proud of the work I do at this center—caring for military children.	0.8%	3.1%	35.8%	56.5%	3.8%
	I make a difference in the lives of military children.	1.9%	2.3%	37.3%	55.8%	2.7%
	My work is valued by the families of the children I care for.	6.9%	11.9%	43.1%	33.8%	4.2%
	My work is valued by my leadership.	16.5%	17.3%	41.5%	20.0%	4.6%
	My work is valued by the Army community.	12.3%	15.0%	48.1%	18.8%	5.8%
	My work-related stress is manageable.	13.1%	23.8%	48.8%	11.5%	2.7%
	My emotional exhaustion level is manageable.	14.2%	24.6%	45.0%	12.3%	3.8%
ECE Phys	sical Wellbeing					
	I rarely feel sick at work.	3.5%	18.1%	51.5%	20.0%	6.9%
	I rarely feel in pain at work.	5.0%	26.9%	44.2%	17.7%	6.2%
	My health is a priority at my workplace.	14.2%	21.2%	41.2%	16.9%	6.5%
	My safety is a priority at my workplace.	9.2%	14.6%	50.4%	21.2%	4.6%
	Proper cleaning/sanitation practices are followed in my work environment.	6.9%	6.2%	44.6%	37.7%	4.6%

	The physical requirements of my job (bending, lifting, etc.) are not too much.	0.4%	1.5%	43.5%	50.8%	3.8%
	I have access to health insurance.	13.5%	18.8%	38.8%	21.9%	6.9%
ECE Pro	fessional Relationships I have positive relationships with the children I care for.	0.8%	0.4%	31.2%	63.1%	4.6%
	I feel respected by the families/ parents of the children I care for.	2.3%	10.0%	47.3%	32.3%	8.1%
	My relationships with co- workers are supportive.	2.7%	10.4%	46.5%	35.8%	4.6%
	My relationships with co- workers make my job more enjoyable.	3.1%	8.8%	44.2%	37.3%	6.5%
	My supervisor treats me in a fair and equitable manner.	10.4%	13.8%	45.0%	23.1%	7.7%
	I feel my supervisor cares about me.	11.2%	19.2%	39.6%	20.4%	9.6%
	My Training Specialist supports my training and educational goals.	6.9%	6.9%	43.5%	35.8%	6.9%

The data represented in Table 15 workplace wellbeing scale presents the mean value of each workplace wellbeing domain and individual indicator. The breakdown of low (score between 1-2), moderate wellbeing (score between 2-3), and high wellbeing (score between 3-4) are based on the four-point questionnaire rating responses. These data indicate Professional Relationships ranked highest with a mean of 3.16 (high), followed by Organizational Supports ranked as second with a mean of 3.02 (high), followed by Emotional Wellbeing ranked as third

with a mean of 2.97 (moderate), and Physical Wellbeing ranked as last with a mean of 2.96 (moderate).

Table 15Workplace Wellbeing Scale by Domain and Indicator



Note. Low workplace wellbeing ranges from 1-2, moderate workplace wellbeing ranges from 2-3, and high workplace wellbeing ranges from 3-4.

The coding process of the qualitative data involved a structured approach by creating initial codes in NVivo for each of the workplace wellbeing domains and indicators and designated by "stayers" and "leavers." This structured coding method provided a triangulation of

the workplace wellbeing domains and indicators. The codebook utilized in this coding process is outlined in Figure 5.

Figure 5

Early Childhood Educator Workplace Wellbeing Codebook in NVivo

3.c.i. Relationships with Children and Families

3.c.ii. Relationships with Co-Workers

3.c.iii. Relationships with Leaders

3.d. Organizational Supports

3.d.i. Administrative Processes

3.d.ii. Professional Development

3.d.iii. Compensation and Benefits

Reasons to work in CYS.	2. Reasons to work in CYS.
Respondents Plan to STAY	Respondents Plan to LEAVE
1.a. ECE Physical Wellbeing	2.a. ECE Physical Wellbeing
1.a.i. General Health	2.a.i. General Health
1.a.ii. Physical Demands of the Job	2.a.ii. Physical Demands of the Job
1.a.iii. Illness Prevention	2.a.iii. Illness Prevention
1.b. ECE Emotional Wellbeing	2.b. ECE Emotional Wellbeing
1.b.i. Feelings of Value	2.b.i. Feelings of Value
1.b.ii. Feelings of Purpose	2.b.ii. Feelings of Purpose
1.b.iii. Stress and Emotional Exhaustion	2.b.iii. Stress and Emotional Exhaustion
1.c. ECE Professional Relationships	2.c. ECE Professional Relationships
1.c.i. Relationships with Children and Families	2.c.i. Relationships with Children and Families
1.c.ii. Relationships with Co-Workers	2.c.ii. Relationships with Co-Workers
1.c.iii. Relationships with Leaders	2.c.iii. Relationships with Leaders
1.d. Organizational Supports	2.d. Organizational Supports
1.d.i. Administrative Processes	2.d.i. Administrative Processes
1.d.ii. Professional Development	2.d.ii. Professional Development
1.d.iii. Compensation and Benefits	2.d.iii. Compensation and Benefits
Recommendations.	Recommendations.
Respondents Plan to STAY	Respondents Plan to LEAVE
3.a. ECE Physical Wellbeing	4.a. ECE Physical Wellbeing
3.a.i. General Health	4.a.i. General Health
3.a.ii. Physical Demands of the Job	4.a.ii. Physical Demands of the Job
3.a.iii. Illness Prevention	4.a.iii. Illness Prevention
3.b. ECE Emotional Wellbeing	4.b. ECE Emotional Wellbeing
3.b.i. Feelings of Value	4.b.i. Feelings of Value
3.b.ii. Feelings of Purpose	4.b.ii. Feelings of Purpose
3.b.iii. Stress and Emotional Exhaustion	4.b.iii. Stress and Emotional Exhaustion
3.c. ECE Professional Relationships	4.c. ECE Professional Relationships

The quantitative and qualitative data confirm the validity of the ECE Workplace Wellbeing Theoretical Model and provide an in-depth understanding of the reasons to stay in the field and recommendations to improve workplace wellbeing for ECEs based on each of the domains. The qualitative findings triangulated the theoretical framework and indicated only 21 of the open-ended responses could not be coded into one of the domains/indicators of workplace

4.c.i. Relationships with Children and Families

4.c.ii. Relationships with Co-Workers

4.c.iii. Relationships with Leaders

4.d. Organizational Supports

4.d.i. Administrative Processes

4.d.ii. Professional Development

4.d.iii. Compensation and Benefits

wellbeing. The responses that did not "fit" the model were too general, vague, and uninformative, such as "I enjoy my job" or "I like my job working for the Army" and none identified the need for an additional domain in the model. The following section will provide findings related to the physical workplace wellbeing of ECEs working in CYS.

Physical Factors Influencing Early Childhood Educator Wellbeing

The physical wellbeing domain of the ECE Workplace Wellbeing Theoretical Framework includes the physical demands of the job, general health, and illness prevention. The physical wellbeing domain generated the lowest domain mean of 2.96 (moderate wellbeing) and also the lowest number of coded responses with only 14 and zero physical wellbeing codes from those participants identified as "those who plan to leave their employment in the next 12 months." All qualitative responses were coded in the illness prevention indicator which may be due to the current pandemic.

Physical Requirements of the Job

The physical requirements of the ECE job are extensive and ECEs are continually in motion when caring for young children. Almost all of the ECEs (94.3%) reported the physical demands of the job (bending, lifting, etc.) are not too much. No qualitative responses were coded in the physical demands indicator as reasons to stay in CYS or recommendations to improve ECE workplace wellbeing. The lack of qualitative responses related to physical demands of the job was surprising, especially since the Kwon (2019) research study indicated "two thirds of teachers had ergonomic pain in at least one area of their body ... likely because teachers of young children constantly bend, reach, twist, and squat in environments that are typically child size" (p. 5). Army Child and Youth Services provides initial and annual training for early childhood educators on proper lifting and includes adult-sized furniture in the standard design

and materials package of every child development center. This focus on the physical demands of the job by CYS may be a contributing factor to the high rate of wellbeing in the physical demands of the job indicator.

General Health

The participants in this study reported they rarely feel sick at work (71.5% agree/strongly agree) and are rarely in pain at work (61.9% agree/strongly agree). Army Child and Youth Services prioritizes the health and safety of employees by implementing health and safety protocols and materials, such as monthly health and safety inspections from Army Public Health Nursing and the installation safety office, comprehensive internal inspections, and an annual unannounced higher headquarters inspection. Beyond this, CDC ECEs and managers complete daily health and safety checklists for the classroom and outdoor play areas. Even with these stringent processes in place, only 58.1% of ECEs reported their health is a priority at their workplace and 71.6% agree/strongly agree that their safety is a priority at their workplace. No qualitative responses were coded in the general health indicator. The qualitative data in the illness prevention section provide insight into why ECEs may feel their health is not a priority at their workplace. These qualitative responses reveal managers allow sick children to remain in childcare and ECEs are pressured to continue working when sick. McGrath (2007) indicated a healthy environment is critical in the early childhood arena to reduce "occupational injuries" and provide an "ergonomically and healthy work environment." Army Child and Youth Services focuses on providing a healthy environment that promotes the health and safety of children, families, and staff. All CYS early childhood educators receive an annual health assessment from the Army's occupational health department. The priority of annual health assessments may be a

contributing factor to the overall positive responses regarding the general health of ECEs working in CYS.

Illness Prevention

Early childhood education is based on the relationships and interactions between the ECE and the children they care for. This involves holding and comforting children, changing diapers, wiping noses, and cleaning up messes. It is not possible for ECEs to "social distance" from the children they care for and teach during the pandemic. This study found 82.3% of ECEs agree or strongly agree that proper cleaning and sanitation procedures are followed in their program; however, the qualitative responses identify recommendations for improving illness prevention protocols such as sending children home when they are sick and encouraging ECEs to stay home when they are sick. One participant stated, "Exclude children that are sick even when their parents are problematic" while another disclosed "be more aware and proactive of staff needs ... From bathroom breaks to illnesses in the classroom, it's a unique time but our center is definitely more reactive than proactive to the COVID situation." The following participant urged managers to "follow healthy protocols when children get sick in the classroom" while another stated "allow sick employees to go home." The concern regarding children staying home when sick is corroborated by the McGrath (2007) survey data finding "91% of respondents reported having worked when ill at some stage" (p. 35). Allowing sick children to remain in care and pressuring sick employees to continue working is indicative of the ECE feeling their own health is not important. These concerns also overlap with the ECE's need to feel cared for by their supervisor, which was one of the lowest rated responses in the emotional wellbeing domain. This is an example of how the ECE Workplace Wellbeing Theoretical Framework is dynamic and overlapping.

At the onset of the COVID-19 pandemic, Army CYS established extensive procedures consistent with the "Center for Disease Control and Prevention Guidance for Child Care Programs that Remain Open During COVID-19" to establish illness prevention protocols for staff, children, and their families. Participants acknowledged the positive impact of these procedures, one stating "stay with the COVID protocols and ratios." These protocols include reduced ratios of teachers to children to allow for less children in the classroom environment. Another participant stated, "during the pandemic, we really do risk our own health and our family's health." The health risk of providing care for young children during a pandemic was a concern to ECEs.

Early childhood educators planning to continue working in CYS provide the following statements and recommendations to improve the physical wellbeing of ECEs:

- The center where I'm helping out should really start sending children home who show two or more symptoms.
- Allow sick employees to go home.
- Managers don't let you go home when you're sick.
- If kids meet exclusion criteria, they should be excluded from care. If kids are sick whether or not it upsets the parents should be irrelevant.

Protocols for sending sick children home and requiring sick employees to stay home are already established in CYS policy. These are rules the Army designates and are intended to be implemented at the program level to promote the health and safety of everyone.

Benefits of working for CYS include access to health insurance, sick and annual leave, and retirement for part-time and full-time employees; however, flex employees do not have access to benefits. According to the Army CYS FY-20 Annual Report, flex employees account

for 23.1% of the workforce. The percentage of flex ECEs without health insurance is an important consideration, and comparative to the civilian sector. When examining civilian ECE healthcare, Otten et al.'s (2019) research indicated "recent studies suggest 25-30% of ECE workers do not have health insurance" (p. 710). While "compensation and benefits" are an indicator of Organizational Supports, it should be noted here that access to health insurance also impacts illness prevention in the physical wellbeing domain. One participant stated the "health insurance is great" while another participant acknowledged the issue with flex employees not receiving health insurance, sometimes for over 18 months. "Give us an opportunity to become part-time sooner so we can get medical benefits and feel like we are cared for as employees." This also relates to feelings of value in the emotional wellbeing domain. "We have some employees (flex) who don't receive any benefits—which is especially concerning during a pandemic." This participant's comment brings to light the concerning issue that flex ECEs do not have health benefits or sick leave during a pandemic, compounded with the hands-on care for young children.

Organizational Supports Influencing Early Childhood Educator Wellbeing

When considering the organizational supports domain in the ECE Workplace Wellbeing Theoretical Framework, the primary responsibility of the indicators rests on the leaders and decision-makers of the organization who fund and designate guidance and regulation. The Organizational Supports domain includes the indicators of administrative processes, professional development, and pay and benefits.

Administrative Processes: Adult-Child Ratios, Paperwork, Meetings, and Staff Schedules

Many ECEs who plan to stay working in CYS indicated their staff schedules are reasons to stay, yet others suggest a more consistent schedule is needed. The scaled responses indicate

that 74.2% of ECEs have a consistent work schedule and 84.2% indicate they work with the same children every day. These findings are representative of the established primary care group policy in CYS. The qualitative responses from ECEs planning to stay working in CYS confirm the importance of a consistent staff schedule. Early childhood educators stated, "I pretty much have the same schedule each day" and "the hours are good." Other participants included the positive impact of the work schedule on their family life, "I have four children and I need some flexibility. I can work at the same center where my child is getting care" and another participant stated, "The hours fit with my home time." This work-home balance can be a challenge, especially for military families, and data indicates a consistent, yet flexible schedule is a reason to stay working in CYS.

While a consistent schedule is a reason to stay working in CYS, ECEs identified an inconsistent schedule as negatively impacting workplace wellbeing and a cause of stress. All recommendations for schedules and staffing from "stayers" include improving the consistency of the schedule:

- I would ask the classrooms for input on the scheduling for the classroom. There are a
 lot of times through the day, especially in my classroom, that more help is needed for
 transition.
- Try to place staff in the age group they feel most comfortable and work best.
 Reducing the movement of staff throughout the facility (not throwing a preschool caregiver into an infant classroom as a body). Being thoughtful and intentional with staff breaks, again, not looking at staff as a "body" but rather what is best for the children.

Previous research findings corroborate the CYS data indicating the importance of a steady and consistent work schedule. The National Survey of Early Care and Education "found that teachers who had been moved to another classroom or another group of children in the past week had significantly higher levels of psychological distress, compared to those who were not" (Madill et al., 2018, p. 20). Processes are in place to provide a steady work schedule for ECEs in CYS such as staffing guidance and primary care group assignments. When staffing is low, such as when a program has vacant positions or several ECEs call out, the schedule is less stable due to the lack of staff. Even in these cases the requirement to meet adult-to-child ratios continues. These responses regarding a stable schedule also overlap with the emotional wellbeing domain in the feelings of value indicator. Feeling like you are "just a body" to be placed in ratio wherever a "body" is needed does not make an employee feel cared for or valued.

Army CYS follows the National Association for the Education of Young Children (NAEYC) staff-to-child ratio guidelines which takes into account the teachers working in an accredited program are well-trained and systems are in place to support these ratios.

Administrative process recommendations from "stayers" include lowering staff-to-child ratios. Recommendations from participants included:

- Lower ratios
- It has been great to work with less numbers of children in the classroom during the
 COVID-19 pandemic. I am stress free in the room with a lower capacity of the room
 and lower ratio of staff to child.

This response overlaps into the physical wellbeing domain with the illness prevention indicator and the emotional wellbeing domain indicating stress. Participants went on:

 Lower ratios. Difficult behaviors and disabled children should also be considered when placing children in the room with max ratio.

This respondent identified challenging behaviors and special needs in relationship to staff-tochild ratios.

- Infant ratio (4 infants to 1 staff) is not reasonable.
- Reduce ratios. This should be looked into because it is a major issue with providing quality support to our children.

Torquati et al. (2007) considered staff-to-child ratios as a "predictor of observed quality and workplace supports since staff-child ratio has consistently been associated with more positive teacher-child interactions and overall quality" (Torquati et al., 2007, p. 264). Although Army CYS follows NAEYC's adult to child ratio guidance, which is best practice in early childhood settings, participants in the current study recommend lower ratios especially when caring for children with special needs or challenging behaviors.

Administrative processes recommendations from "stayers" also include meetings.

Regular meetings and communication are a must in the ECE environment. Respondents who plan to stay working in CYS recommended:

- Meetings where employees can gather and discuss issues.
- I would require more staff meetings to inform staff about updates or input for the program.
- Regular meetings

A well-run CDC depends on fair and stable administrative processes: maintaining adult-child ratios, consistent staff schedules, and meetings. The effectiveness of these administrative

processes contributes to the promotion, or lack of, ECE workplace wellbeing, as represented by previous researchers and the current research study.

Professional Development

Professional development is at the core of high-quality early childhood programs and is an indicator in the Organizational Supports domain of the ECE Workplace Wellbeing

Theoretical Framework. Army Child and Youth Services emphasizes the importance of professional development by maintaining a training program and employing Training Specialists to guide the professional development of ECEs. The CYS Training and Development Plan is connected to advancement in CYS along with pay increases at each level of training. Boyd (2013) conducted research and identified higher training and credentials of ECEs in the civilian workforce does not necessarily correlate to higher pay or positions." Quantitative responses in the current research indicate 79.2% of ECEs working in CYS agree/strongly agree that CYS Orientation, Foundation, and Annual training requirements have prepared them well for their job. Early childhood educators who plan to continue working in CYS indicate professional development as a reason to stay working in CYS with 15 coded responses in the professional development indicator. Reasons to stay included:

- Professional advancement and enjoy working with the children.
- I love working with children and would like to eventually go to college to move up in the CYS workplace.
- To continue to learn and grow so I can be the best I can be.
- Working in CYS has improved my experience in education with children.
- I enjoy working with children and I like that I can further my education in child development.

- Professional growth opportunities.
- I love working with children and families. I love how my work lets me be creative and to continue getting knowledge through constant trainings.
- I have learned new skills and would like to continue impacting children's lives.

 Early childhood educators planning to stay working in CYS also offered recommendations to improve professional development:
 - Higher-ups should train more staff for advancement opportunities within programs.
 Offer more certifications for advancement as well as scholarship opportunities.
 - Possibly more incentives to seek out CDAs.

Army Child and Youth Services provides the training and funding for the Child Development Associate (CDA) credential through the Council on Professional Recognition. The CDA credential qualifies an ECE for Lead Teacher positions.

Early childhood educators planning to leave their work with CYS offer the following professional development recommendations:

- Recommend more hands-on training and assistance with individual situations.
- Pay for degrees and certifications.
- Recommend stress management training.

The recommendation from CYS ECEs for stress management training is consistent with the findings from Travis et al. (2014), in which focus group participants recommended professional development topics on "how to cope with work related stress and how to work with parents" (p. 334). This response overlaps into the emotional wellbeing domain in the stress indicator.

Responses from CYS ECEs also recommended professional development on topics related to special needs:

- Recommend more training on children who are autistic.
- More training on how to work with children with special needs like autism.
- Training on children with disabilities.

It is noteworthy that responses were directed toward needing training specifically on special needs. The Army has integrated training on working with children with special needs into every facet of the training program. Army CYS also contracts with Kids Included Together (KIT) which includes an extensive online library of virtual trainings on special needs and inclusion. Kids Included Together also provides on-site trainings and classroom assessments along with individualized feedback for programs to promote inclusion. Even with extensive special needs trainings in place, ECEs identify the need for further support in this area.

Compensation and Benefits

Early childhood educators working in CYS indicate compensation and benefits as a reason to stay working in CYS yet offer recommendations such as pay advancement past foundation training and benefits for flex employees. This is an important finding since previous research indicated pay and benefits as a reason to leave the early childhood field. Boyd (2013) found "many teachers said that low wages were a reason to consider other work" (p. 11). Army CYS findings include 72.7% of ECEs agree or strongly agree that they receive fair benefits compared to the benefits offered at other childcare organizations and 65.4% report they receive fair pay compared to pay at other childcare organizations. The quantitative findings corroborate with the qualitative data with 27 coded responses identifying fair pay and benefits are reasons to work in CYS. Early childhood educator coded responses indicating pay and benefits as reasons to stay include:

Better pay than other jobs.

- Reasonable pay and good benefits.
- I like the benefits CYS offers.
- The benefits they provide [CYS] even to the part time employees is a good reason to stay on.
- Steady paycheck and health insurance
- Great benefits.
- I love my job and my benefits.
- Financial stability and benefits for myself and my family.
- Pay is higher than anywhere civilian.
- I enjoy my job and the pay rate is higher than outside the installation.
- Good pay and love for children.
- I love the work I do with the children and I receive good benefits (health and leave).
- Enjoy working with the kids and I like having retirement benefits.
- I am thankful for the benefits that were given to me and to be able to work for a
 government-based job.

All of the Organizational Supports coded responses from ECEs who plan to quit working with CYS also indicated pay and benefits as a reason to stay working in CYS. These responses were consistent with the "stayers" stating, "The pay is better than the pay off post," "pay and health insurance," "good pay," and "the benefits and the pay."

Although ECEs indicated pay and benefits as reasons to stay working in CYS, the "stayers" also offered recommendations in this area:

 More pay, even though they do pay better than outside day cares. Pay for continued education.

- Well, first of all I would definitely change the pay rate for the teachers because they
 do a lot for the children and their community.
- Promote from within and offer annual raises to those achieving outstanding on their yearly rating.
- Possibly give a pay raise.
- Giving everyone, including flex, some type of benefits. It's not fair for a person to work just as hard and not get benefits.
- Give us the opportunity to become part-time sooner so that we can get medical benefits and feel like we are cared for as employees.
- Benefits for flex employees.
- Benefits for all.

Participants repeatedly expressed their concern regarding flex ECEs not receiving benefits. Many flex employees do have to wait at least 18 months before becoming eligible for part-time and full-time positions. The recommendations from those ECEs planning to leave CYS in the next 12 months concur with the responses from stayers:

- More acknowledgement of our hard work and some kind of benefits for flex employees who have been flex a while.
- Pay for degrees and certifications, compensation, and benefits for flexes.
- More money.

Analyzing the qualitative data revealed a CYS workplace benefit that was not included when developing the ECE Workplace Wellbeing Theoretical Framework but is considered a workplace support. Early childhood educators indicated the ability to transfer jobs between installations as a reason to stay working with CYS. The Civilian Employment Assignment Tool

(CEAT) allows Army CYS ECEs to transfer their job at the same position and pay rate to a new installation. This is especially beneficial to military spouses but is available to all ECEs interested in moving. Participants stated:

- I will still have a job when my husband PCSs.
- I needed a job that would transfer to another base when I married my husband.
- This is one of the few jobs on post that are easy to transfer to. I know I will pretty much always have a job no matter where we get stationed.

Spousal employment is a major concern among military leaders. Underemployment and unemployment of a military spouse impacts the soldier's decision to remain in the military. Early childhood educators indicated having the peace of mind that they will always have a job and not have to start over at a new installation is a benefit to the military family.

Emotional Factors Influencing Early Childhood Educator Wellbeing

The emotional wellbeing domain of the ECE Workplace Wellbeing Theoretical Framework includes the indicators of feelings of purpose, feelings of value, stress, and emotional exhaustion. The Emotional Wellbeing domain resulted in a mean score of 2.97 indicating moderate workplace wellbeing.

Feelings of Purpose

Quantitative and qualitative data reveal that Army CYS ECEs identified they are proud of the work they do and were confident they make a difference in the lives of military children. They found meaning in their work and were proud to serve our country by caring for military children. The quantitative scale indicates 92.3% of ECEs agree/strongly agreed they are proud of the work they do at their center and 93.1% agree/strongly agreed they make a difference in the

lives of military children. The qualitative data from ECEs indicating they plan to continue working in CYS identify pride in work and feelings of purpose as their main reason to stay.

- What started out as a job has become my profession and I truly enjoy what I do.
 There is a sense of satisfaction that I feel about the work I do and the community to which I serve.
- I continue working with CYS because my dedication to military children and families. I believe in the mission of CYS.
- I enjoy working with children and it is a great way to serve the military community.
- Working with the military families is important. When we have our parents putting their life on the line for our safety.

Army Child and Youth Services ECEs are committed to military children and families. The identification of purpose in their own work is consistent with Boyd (2013) indicating that educators viewed their work as "meaningful and rewarding and saw themselves as providing an educational curriculum and giving social, emotional, and physical care to young children" (p. 9). This sense of meaning and importance of the military family was also revealed by ECEs working in CYS as follows:

- I've only ever known military life, so caring for military children holds a special place in my life. I understand the needs of the military family.
- I love to give back to military families. My father and husband were military so I feel
 I should give back.
- I am an Army spouse and love working with military children.
- My husband is a Veteran, I enjoy working with military and their children.
- I enjoy working with military children and it's my life's work.

- To help military and the civilian personnel and their children in my care.
- Community service.
- I love to work with children and support the military community that are most needed.
- I love working with children and taking care of them and make the military family feel at ease when they are at work—knowing that their children are being cared for.
- I love working with children and supporting the military community.
- I enjoy working with the military community.
- I enjoy working with children and supporting the Army community. And being
 overseas is important that soldiers and families feel their children are in a safe
 environment.

While CYS ECEs have a shared purpose of working with military children specifically, pride in the work of all ECEs contributes to workplace wellbeing. Faulkner et al.'s (2016) focus group research included participants speaking of "the pride they have in the children they teach, the time they spend planning activities, and the genuine concern they have for the children when they are not in their care" (p. 289). While early childhood education is generally an unappreciated job, the CYS ECEs in this study and previous research identify the important purpose of their work.

Feelings of Value

Early childhood education has historically been a devalued profession and considered by some as "babysitting." With advancements in child development research, the importance of high-quality care and education for young children has become a societal priority. While these improvements have focused primarily on the needs of the child, previous research indicates the

value of ECEs themselves has been largely forgotten. The CYS data in the current study is promising as ECEs indicated they felt valued by the families of the children they care for (76.9%), the military community (66.9%), and by leadership (61.5%). While the quantitative data indicate ECE feelings of value, the qualitative data provide recommendations for improvement in this area from those indicating they plan to stay working in CYS. There were no recommendations related to "feelings of value" from ECEs indicating they plan to leave.

Recommendations related to feelings of value include:

- Generally, I need to feel appreciated.
- I feel that the management does not seem to notice or care when a staff feels uncomfortable or unhappy.
- Management needs to show appreciation. Not in a monetary sense, but verbally.
 There have been so many times in which I felt taken for granted and that my work is not appreciated.

These findings suggest that feeling valued by the families/parents of the children they care for, supervisors, and the Army community is a step in the right direction for ECEs. While much of the civilian research data indicates continued devaluing of ECEs, the current study shows improvement. This may be due to the military community's long-time acknowledgement of the need for high-quality childcare. Continued emphasis on valuing ECEs by supervisors is an area for further growth.

Stress and Emotional Exhaustion

The work demands of participants and caring for young children were not identified as contributing factors to stress and emotional exhaustion. Quantitative results ranked the lowest on the scale were "work related stress is manageable" and "emotional exhaustion level is

manageable." Early childhood educators reported 57.3% agree/strongly agree that their emotional exhaustion level is manageable and 60.3% agree/strongly agree that their work-related stress is manageable. Jeon, Buettner, and Hur (2016) found "stressed teachers had a less positive attitude toward their work with children" (p. 551). This connection between stress and the impact on working with children is a critical consideration. All qualitative responses related to stress were coded in the "relationships with managers" and "work-schedule" indicators. Grant (2019) also found "higher reports of stress and emotional exhaustion related with teachers' greater intentions to leave rather than stay, and emotional exhaustion in particular related with teachers' intentions to leave than even move to another ECE job" (p. 307).

One participant's response related to stress indicated "pay is not all that great for all the stress," whereas another reported, "Better pay for the hard work we are doing ... It is hard. As a military wife, especially when I don't have nobody to help when my husband is gone. It is exhausting." It is interesting that stress and emotional exhaustion rated lowest on the scaled responses but were not frequently identified in open-ended responses.

Professional Relationships Influencing Early Childhood Educator Wellbeing

The Professional Relationships domain of the ECE Workplace Wellbeing Theoretical Framework includes relationships with children and families, relationships with co-workers, and relationships with leaders. The mean workplace wellbeing score of the Professional Relationships domain was 3.16 indicating a high level of workplace wellbeing.

Relationships with Children and Families

Early childhood educators working in CYS reported their relationships with children and families as the primary reason to stay working in CYS. Findings indicate 94.3% of ECEs agree/strongly agreed they have positive relationships with the children they care for and 79.6%

of ECEs felt respected by the families/parents of the children they care for. Coding revealed 68 times "love" was expressed for military children by ECEs. The qualitative coded responses included 82 codes related to the reason to stay working in CYS (stayers) is their relationships with children, including:

- I love working with children and helping them develop is something I love doing.
- I like to work with children and help them in the different developmental areas.
- To help children learn and grow in age-appropriate manner.
- Each child develops differently and learns in different ways.
- I enjoy watching children reach their developmental milestones.
- I love being with the kids and after they learned something from me they tried to use
 it like sing along with me and dance with me and memorized a story. They are very
 potential kids.
- I actually love what I do—putting smiles on the faces of all the children as I help them learn and grow is amazing.

These responses reveal the importance ECEs place on child development which is indicative of high-quality programs and professional development on developmentally appropriate practices. These ECEs understand their job is a profession focused on child development. Army Child and Youth Services ECEs indicated the importance of strong bonds with children and families which is also somewhat consistent with previous research. Faulkner et al. (2016) found ECEs reported "children were not their work-related stressor; however, they did report that families were a distinct stressor" (p. 289). Hall-Kenyon et al. (2014) indicated findings more consistent with CYS ECEs in that "nurturing children and working with parents were the most enjoyable and least stressful tasks of the job" (p. 154). It is important to consider that CYS ECEs receive

training on parent relationships that includes respecting the families/parents as the child's first teacher. The child assessment and curriculum in CYS is focused on the individual development of young children and teachers conduct ongoing observations and child assessments to inform the lesson plan. Developmental programming is engrained into the CYS culture and demonstrated in the participant responses. Participants also consider the importance of making a difference in the lives of children and families:

- I stay because of the impact I see I can make not only on military children but on their families and the staff I work with. It may not be a job that people look at in a way that we are really making a difference but if there were no CDCs currently, in the middle of the coronavirus, the rest of the Army community would suffer because of it ...

 Still, every day I believe we are making a difference and that the children need us, the families need us, and the staff I work with need support. This is why I stay. I stay because I believe in this program.
- The children. Being able to teach and mentor them and be a positive influence in their lives.
- To make a positive impact in the children's lives.
- I love military children and want to make a difference in their lives.
- I love coming to work and spending time with the children, they make the day enjoyable. Nothing beats the look on their faces when they enter the classroom and their faces light up when they see me.
- I am a military spouse and love working with children.

- I love what I do at my job. The kids always keep me on my toes. They are definitely a
 blessing to work with. Also, it helps me to become a better parent. I feel I am making
 a difference.
- I have learned new skills and will like to continue impacting children's lives.
- I'm here for military children.

Leavers also identify relationships with children and families as reasons to stay working in CYS:

- The relationships with families and the teaching team.
- I love working with military families and supporting them.

The CYS ECE data on relationships with children and families indicate these relationships as positive and the main reason they stay working in the job. This is consistent with Kwon et al.'s (2020) focus groups revealing, "the primary reason for the intent to stay for 20 teachers was related to the nature of their work with children. These teachers stated that they chose to work in early childhood settings and viewed their work and emotional connection with children and their families as rewarding and fulfilling (p. 4). This point from Kwon et al.'s research is directly correlated to the CYS research data.

Relationships with Co-Workers

Positive relationships with co-workers provide a support network for ECEs. Data from the current study show 82.3% agree/strongly agreed their relationships with co-workers are supportive and 81.5% agree/strongly agreed their relationships with co-workers make their job more enjoyable. The importance of positive relationships with co-workers is corroborated with previous research. Travis et al. (2014) found "a climate characterized by trust and respect with co-workers … was essential to creating a positive work experience" (p. 333). The qualitative

open-ended responses include 11 codes regarding co-workers as reasons to stay working in CYS, including:

- The team I work with are amazing. We communicate and work together as a team to get the work done and we rely on each other to pick each other up and look out for each other.
- I enjoy working with the children and staff members.
- I love the children and my co-workers.

One participant stated, "CYS feels like a family to me." This relates to data results from Kwon et al. (2020) revealing "some teachers related staff at their center as a second family" (p. 5). Hur et al. (2016) also described this second family as a "sense of community" which is especially important since "ECE teachers have few opportunities to interact with other teachers and that high turnover rates prevent teachers from building positive social relationships with teachers" (p. 461). Positive and supportive relationships with co-workers also creates an atmosphere conducive to teamwork. Cumming (2015) corroborated the importance of co-worker relationships and focus group data revealed "relationships with co-workers and managers that enhance a sense of community create a work environment that builds employee wellbeing" (p. 52). Liu (2017) further indicated "positive collegial relationships and work environments are seen as vital across the examined research" (p. 141). The findings in the current study are consistent with previous research in that supportive relationships with coworkers increase workplace wellbeing and are a reason to stay working in the field.

Relationships with Leaders

Quantitative findings indicated 79.3% of ECEs agree/strongly agreed their Training Specialist supports their training and educational goals, 68.1% agree/strongly agreed their

supervisor treats them in a fair and equitable manner, and 60% agree/strongly agreed they feel their supervisor cares about them. Early childhood educators who plan to stay working in CYS provided only three coded responses as reasons to stay working in CYS related to relationships with leaders.

- The support from my main center and the support and honesty from my Coordinator
 [name deleted].
- My supervisors are helpful in every situation they are not afraid to step in to assist
 when staff are in need of help—they answer our questions if available and will get
 back with us if not.
- Trainers are amazing and remind staff all the time of how good a job they do.

Previous researchers have explored the relationships between managers and ECEs and findings corroborate the CYS data. Trusting relationships with leaders positively influence ECE workplace wellbeing while negative relationships with leaders has a detrimental impact on ECE workplace wellbeing. Kwon et al. (2020) found "some teachers mentioned that although they loved their job and were committed to working with children, the high levels of tension and stress from the administrator sometimes outweighed their passion for the work, which enhanced their intent to leave" (p. 8). This is directly related to the following participant response indicating they plan to quit their job in the next 12 months (leaver) yet stated, "I want to continue to work in CYS if management will learn to communicate." The influence of manager relationships on workplace wellbeing and turnover is consistent throughout the research.

Professional relationships recommendations were coded highest in the "relationships with leaders" indicator with 46/47 recommendations referring to leaders, indicating an area for improvement.

- Support and better treatment from management.
- For management to be open to change and let staff be more involved in what goes on in the child care setting.

The above response points to the need for self-efficacy and the desire to contribute to overall program functioning. ECEs went on to reveal their need for "care" from leaders.

- Management treats CYPAs as expendable employees without care toward wellbeing or mental and emotional health.
- Management needs to care about staff.
- Stop having favorites—treat all employees the same.

This is tied to the scaled response in the professional relationships domain that 60% of participants indicated they feel their supervisor cares about them.

- It would be nice to be recognized for the hard work we do. If we are sick, don't hassle us about coming in or make us come in and then send us home after we get there.
- For management to show their appreciation of staff. Not in a monetary sense, but verbally ... I feel taken for granted and that my work is not appreciated...It would be nice every once in a while for management to acknowledge the hard work that everyone is doing.

All recommendations for change from participants indicating they planned to quit their job with CYS in the next 12 months refer to relationships with leaders (12/12 codes).

- I believe in supporting your staff. Not to dismiss their concerns about situations with other co-workers.
- Have management care about staff and hold everyone to the same level of accountability.

- We need new management with training on how to treat their employees.
- The way management treats everyone—people are not treated fair...some people get in trouble for the smallest of things while some get away with everything.

The scaled responses showed 68.1% agree/strongly agreed their supervisor treats them in a fair and equitable manner, yet they recommended more care, appreciation, and fairness. These percentages are supported by the participant qualitative responses.

Conclusion

This chapter reported the findings associated with ECE workplace wellbeing and turnover intentions in relationship to the ECE Workplace Wellbeing Theoretical Framework, previous research, and the research questions guiding this study. Through examining the wellbeing factors of organizational supports, physical wellbeing, emotional wellbeing, and professional relationships, this study's findings point to an ECE workplace wellbeing framework that is representative of overall ECE workplace wellbeing and predictive of turnover. The next chapter will discuss these findings further and provide recommendations and implications for practice, policy, and scholarship.

CHAPTER 5: DISCUSSION

"I love to give back to military families. My father and husband were military so I feel I should give back. I'm passionate and I care for the future leaders of this great country."

Army CYS Early Childhood Educator

And

Every bit true for this author as well.

This dissertation research study explored the workplace wellbeing and turnover intentions of 271 early childhood educators employed at 34 child development centers located on 15 Army installations in nine states, five countries, and one U.S. Territory, all within the largest component of the military's employer-sponsored childcare organization—Army Child and Youth Services (CYS). This study was initiated by a genuine concern regarding the issue of early childhood educator (ECE) workplace wellbeing and turnover in CYS. The turnover of ECEs has a detrimental impact on relationships with children and families, attachments with children, program consistency, staff shortages, and financial implications to the organization. This study explored ECE workplace wellbeing as a predictor of turnover.

The review of the literature led to the conceptualization of the ECE Workplace Wellbeing Theoretical Framework guiding this study. This framework is grounded in the work of previous researchers and became a significant contribution of this dissertation work. The questionnaire utilized in this study, as described in the Chapter 3 methodology section, was based on the ECE Workplace Wellbeing Theoretical Framework to determine the workplace wellbeing of early childhood educators working in CYS and the association between ECE workplace wellbeing and turnover in Army CYS programs. This study also provided a platform for CYS ECEs to share

their reasons to work in CYS and their recommendations to improve their workplace wellbeing and that of their fellow ECEs.

This study introduces military childcare to the larger ECE workplace wellbeing body of research since this is the first known research study exploring the workplace wellbeing of ECEs working in military childcare. This research is intended to contribute to all ECE workplace wellbeing studies and programs since the military has invested in high-quality childcare as an essential element to military readiness for over 30 years. The following sections discuss the contributions from this research study related to the implications and recommendations for scholarship, policy, and practice.

Implications and Recommendations for Scholarship

At the start of this dissertation research, I set out to study Army CYS ECE workplace wellbeing and turnover. One of my goals, which some may consider lofty or unrealistic, was to provide data to CYS leaders to improve the wellbeing of ECEs in Army CYS and consequently improve program consistency for military children. I kept the faces of Army ECEs planted firmly in my mind and initially did not consider the rest of the ECE community. This shifted as I was working and re-working the Chapter 2 literature review and organizing the bodies of literature—what emerged was the ECE Workplace Wellbeing Theoretical Framework. Most of the previous research focused on individual components of wellbeing rather than overall workplace wellbeing consisting of overlapping domains. In contrast, wellbeing factors in the ECE Workplace Wellbeing Theoretical Framework are not compartmentalized, rather, they overlap and influence each other. During this process, I began to realize this study may influence future scholarly research and all ECE programs.

The "Dynamic State" of the ECE Workplace Wellbeing Theoretical Framework

The ECE Workplace Wellbeing Theoretical Framework was designed specifically to represent the "dynamic state" that Cumming and Wong (2019) described in their ECE workplace wellbeing definition" (p. 276). The overlapping domains of physical wellbeing, emotional wellbeing, professional relationships, and organizational supports demonstrate the interconnectedness of workplace wellbeing factors on each other and on overall ECE workplace wellbeing. Throughout this writing, I have consistently examined how each wellbeing domain exerts influence on the others. For instance, the data show a "consistent staff schedule" in the organizational supports domain relates to the "feelings of value" in the emotional wellbeing domain and "relationships with supervisors" in the professional relationships domain. Also, the "feelings of pride" in the emotional domain influences "relationships with children and families" and vice versa. The connections between the domains may come in many forms, representing the "dynamic state" of ECE workplace wellbeing and human existence.

Replication of Scholarly Research

The data from this study indicate the ECE Workplace Wellbeing Theoretical Framework is a robust construct of overall wellbeing consisting of the physical wellbeing, emotional wellbeing, professional relationships, and organizational supports domains. The underlying indicators of each of these domains were directly linked to the questionnaire and triangulated with qualitative responses. Further, the overall ECE workplace wellbeing, as identified in this construct, has a profound correlation to an ECE's intentions to stay or leave their work. For every one unit increase in workplace wellbeing a 765% increase in the probability of staying in the job was revealed. While these results are promising, further research utilizing this model in other organizations is needed.

In the extensive review of literature found in Chapter 2, I located no previous research on ECE workplace wellbeing that had been replicated between programs, which would likely build a greater understanding and validity on the topic. The ECE Workplace Wellbeing Theoretical Framework and questionnaire can be easily replicated between programs for comparison purposes and the two-open ended questions can be coded to triangulate the quantitative data and learn more about the ECEs specific to the program. Comparing data from the different programs based on the same construct would inform future directions for scholarly research. Beyond this, considering the extensive programs the military has implemented, along with the high value the military places on childcare in comparison to programs that have not been afforded these supports, would further champion the cause for investment in high-quality childcare for all young children.

Implications and Recommendations for Policy

In addition to implications and recommendations to scholarship, this research has resulted in several clear implications and recommendations for policy at multiple levels. This section includes the implications and recommendations for policy in both CYS and civilian early childhood programs. These recommendations are based on the mixed methods data disclosed in the current research study and is supported by previous research.

Fair Pay and Benefits for All

The pay and benefits of ECEs has long been a concern for ECE advocates due to the consistently low pay and benefits in the field. The literature review in this dissertation links the historical social devaluing of the largely female workforce to low pay and benefits. The military recognized the issue with pay and benefits over 30 years ago and the concern was addressed in the Military Child Care Act of 1989. Since then, the pay and benefits of ECEs working in CYS

have been consistently revisited and improved. This attention to fair pay and benefits by the military was reflected in the current study reporting 72.7% of ECEs agree or strongly agreed they receive fair benefits compared to the benefits offered at other childcare organizations and 65.4% reported they receive fair pay compared to pay at other organizations. The qualitative narratives of ECEs indicate pay as benefits as a reason to stay working in CYS. Early childhood educators stated, "the benefits they provide [CYS] even to part time employees is a good reason to stay on" and "pay is higher than anywhere civilian" indicating this may be the first study on ECE pay and benefits with positive indications.

While promotion of ECE pay and benefits are directly linked to ECEs' reasons to continue working in CYS, ECEs also offer recommendations for policymakers to consider. The benefits provided in CYS are for part-time and full-time employees, which does not include flex employees. Most ECEs are initially hired as a flex employee and later promoted to part-time or full-time, typically when foundation training requirements have been completed, which can take up to 18 months. Early childhood educators in this study expressed their concern for flex employees not receiving benefits, especially health insurance and sick leave. Further, ECEs stated, "give us the opportunity to become part-time sooner so that we can get medical benefits and feel like we are cared for as employees" and "give everyone, including flex, some type of benefits. It's not fair for a person to work just as hard and not get benefits." Providing benefits, especially health insurance and sick leave, to all ECEs (including flex) is an area for policy makers to consider.

In addition to the recommendation for flex employee benefits, participants indicated the need for pay advancement past foundation training completion. Army CYS currently provides pay advancement in conjunction with foundation training completion, which ends at 18 months

of employment. Pay advancement past foundation training would encourage ECEs to continue working in CYS and feel appreciated for their time in position and experience.

While the military has made exemplary strides in the pay and benefits of ECEs that civilian policymakers can learn from, the issues of pay advancement and health insurance and sick leave for flex employees remains at the forefront of participants' concerns, especially since we are experiencing a global pandemic.

Maintain Adult to Child Ratios in Accordance with NAEYC Guidelines

Army CYS has followed the adult-to-child ratio guidance set by the National Association for the Education of Young Children since the enactment of the Military Child Care Act of 1989. Army Child and Youth Services ECEs acknowledge the importance of following adult-to-child ratios in accordance with NAEYC, some recommended lower adult-to-child ratios in situations where children with behavioral concerns or special needs are in the classroom. Lowering ratios beyond the NAEYC standards is unlikely; however, the recognition of this recommendation from ECEs does point to the need to not raise adult-to-child ratios. Increasing adult-to-child ratios can be a financial benefit to the organization; however, the implications to classroom functioning and individualized learning for young children would be put at risk. Further, adultto-child ratios are not adjusted in classrooms with children with special needs or challenging behaviors. Early childhood educators who plan to stay and leave their work both identify a concern with ratios, "Lower ratios. Difficult behaviors/disabled children should also be considered when placing children in the room with max ratio" and "Reduce ratios. This should be looked into because it is a major issue with providing quality support to our children." Policymakers outside of CYS would benefit from learning from CYS ECEs' emphasis on the importance of adhering to optimal adult to child ratios. The adult-to-child ratio guidance is the

framework the staff schedule and primary care groups are built upon—and an area for additional examination. While CYS already follows the NAEYC guidance on adult-to-child ratios, this research data reveals that an increase could entail a negative impact on ECE and child wellbeing and suggests the real work with children may be negatively impacted if ratios were increased such that financial benefits may not offset.

Implications and Recommendations for Practice

While the findings indicate the wellbeing of CYS ECEs is moderately high, stayers and potential leavers offer recommendations for program managers to consider when operating their child development centers. Prior to reviewing these recommendations, I must acknowledge the demanding job of child development center managers. This study focused on the wellbeing of ECEs, but the same guiding questions could have been applied to managers. Managers are often pulled in many directions and their job is tough, frequently balancing the needs of the children and customers (soldiers and DoD Civilians) with the needs of their staff. With the challenges to managers affirmed, these recommendations provide a reminder of ECE needs. These recommendations are consistent between participants indicating they plan to stay and those who intend to leave their job. It is important to consider that these recommendations, related to workplace wellbeing, have a direct impact on the leaving intentions of ECEs, which in turn further impact issues with low staffing resulting from turnover. Beyond this, previous research has already shown that ECE workplace wellbeing impacts the relationships, attachments, and interactions with children. It would be advantageous for program managers to heed the recommendations from ECEs due to the impact on turnover and program quality.

Show Care and Appreciation of ECEs

Early childhood educators acknowledged that most managers treat them in a fair and equitable manner; however, they recommended their managers "care more" and show more "appreciation" of their work. One participant stated, "management needs to show appreciation. Not in a monetary sense but verbally. There have been so many times in which I felt taken for granted and that my work is not appreciated." Early childhood work is physically demanding and emotionally exhausting. While this is true, ECEs choose to stay in the field primarily because of their relationships with children. Travis et al. (2014) described an interaction with an ECE, "At the conclusion of one of the focus groups, a participant declared, 'To sum it up, it's the most stressful job that you'll ever love, with the biggest rewards'" (p. 335). Recognizing an ECE's dedication to children acknowledges this hard work and shows appreciation. The participant narratives from this study offer situations where supervisors can direct their attention and show appreciation.

Army early childhood educators have a high level of commitment and pride in caring for military children and the military community. Dedication to military children and families was consistently disclosed throughout the quantitative and qualitative data. Responses such as "I enjoy working with military children and it's my life's work" and "I've only ever known military life, so caring for military children holds a special place in my life. I understand the needs of the military family" demonstrate this commitment explicitly. Another area for supervisor acknowledgement and appreciation of ECEs is their focus on developmental programming. The participant narratives included references to their knowledge about child development such as, "I enjoy watching children reach their developmental milestones" and "I like to work with children and help them in the different developmental areas." One ECE stated, "Each child develops

differently and learns in different ways" which further points to the knowledge CYS ECEs possess on developmentally appropriate practices and an understanding of child growth and development. Acknowledgement of these, and other practices, demonstrates to ECEs that their work is recognized and appreciated.

Provide a Consistent Staff Schedule and Breaks for ECEs

Based on participant ratings and narratives, program level implementation of current staffing policy and primary care groups is crucial to ECE workplace wellbeing. Early childhood educators rated moderate levels of stress and emotional exhaustion related to relationships with supervisors and inconsistent staff schedules—such as not knowing when they would receive a break or go home. Indeed, ECEs must wait for another ECE to come into the classroom before leaving to use the restroom. Providing breaks, ensuring ECEs leave on time, and a consistent schedule must be a priority. A stable work schedule not only positively impacts the ECE but also the children and families. Early childhood educators identified they often feel like they are "plugged" into ratio in rooms they are not familiar with. This type of disjointed scheduling does not support consistent childcare and primary care groups that promote attachment and relationships.

Early childhood educators also stressed the importance of work relationships with their co-workers. A consistent schedule creates an environment where a teaching team can get to know each other and provide support for each other—building teamwork. Further, family members need to build relationships with ECEs who care for their child (as young as six weeks old) throughout the day. There are situations where the staffing is low due to turnover or ECEs calling out, which cause scheduling issues that may not be overcome since meeting ratios is the backbone of the staff schedule configuration and must be met at all times. While this is true,

ECEs recommend supervisors listen to their suggestions for meeting schedule and ratio requirements explaining, "I would ask the classrooms for input on the scheduling for the classroom" and

try to place staff in the age group they feel most comfortable and work best. Reducing the movement of staff throughout the facility (not throwing a preschool caregiver into an infant classroom as a body). Being thoughtful and intentional with staff breaks, again, not looking at staff as a "body" but rather what is best for the children.

This advice from ECEs regarding a consistent schedule for themselves and children and not viewing an ECE as a "body" in ratio also demonstrates that managers care for them and the children.

Prioritize the Health of ECEs

It must be recognized that this research study was conducted during the COVID-19 pandemic. Army CYS implemented all of the upgraded health instructions from the "Center for Disease Control and Prevention Guidance for Child Care Programs that Remain Open" at the onset of the pandemic since programs remained open for mission essential soldiers and DoD Civilians. Early childhood educators in the current research study acknowledged the additional health protocols and the positive impact they have had in the programs some stating, "stay with the COVID protocols and ratios" while also explaining "during the pandemic, we really do risk our own health and our family's health." It must also be noted that social distancing between the ECE and the young children they care for and teach is impossible. Early childhood education requires hands-on care such as diaper changing, meals, nose wiping, holding, and comforting, and close learning interactions.

The increased focus on health was promising in the research indicating 82% of ECEs agree or strongly agree that proper cleaning and sanitation procedures are followed and 71.5% of ECEs reported rarely feeling sick at work. The health data from ECEs further provides areas for improvement since 58.1% state their health is a priority at their workplace. This is correlated to the qualitative data responses which identify instances where managers allow sick children to remain in care or pressure ECEs to continue working while sick. Both of these examples reflect the importance of the ECE's health as not a priority. Early childhood educators stated, "If kids meet the exclusion criteria, they should be excluded from care. If kids are sick whether or not it upsets the parents should be irrelevant" and "managers don't let you go home when you're sick." These situations are reflective of managers attempting to meet the childcare needs of soldiers and DoD Civilians by allowing sick children to remain in care at the detriment of other children and staff. Beyond this, the issue with staffing and meeting ratios may be an underlying reason why a manager would pressure an ECE to continue working when sick.

Prioritizing the health of ECEs is always important but is especially critical during the current pandemic. CYS has multiple health-related processes and protocols in place to promote the health of ECEs and children. However, the data generated by this research study reveal a disconnect between policy and practice implementation.

Conclusion

I set out to study the workplace wellbeing and turnover intentions of early childhood educators working in Army child development centers. I conclude with much more—a greater understanding of workplace wellbeing of ECEs working in CYS and outside CYS. Early childhood educator workplace wellbeing is increased by implementing the systems, opportunities, and interactions in the workplace that support the emotional, physical,

organizational supports, and professional relationships of ECEs. Thankfully, the Army considers childcare a priority and recognized early on that taking care of the ECEs who care for our military children is critical. At the same time, there is always more work to be done. We are amid a pandemic—and our Army ECEs have come to work every day to care for our soldiers' and DoD Civilians' children, so they could focus on their mission. These ECEs are my heroes. Dedicated, selfless, and proud to care for military children.

References

- 10 U.S. Code § 2438—Performance assessments and root cause analyses. (n.d.). LII / Legal Information Institute. Retrieved January 31, 2021, from https://www.law.cornell.edu/uscode/text/10/2438
- Boyd, M. (2013). "I love my work but..." The professionalization of early childhood education. *The Qualitative Report*, 18(71), 1-20.
- Cadwell, L. B., & Gandini, L. (1997). *Bringing Reggio Emilia home: An innovative approach to early childhood education* (1st ed). Teachers College Press.
- Campbell, Nancy Duff, U. S., Applebaum, Judith C., Martinson, Karin, & Martin, Emily. (2000).

 Be all that we can be: Lessons from the military for improving our nation's child care system. National Women's Law Center.
- Carson, R. L., Baumgartner, J. J., Ota, C. L., Kuhn, A. P., & Durr, A. (2017). An ecological momentary assessment of burnout, rejuvenation strategies, job satisfaction, and quitting intentions in childcare teachers. *Early Childhood Education Journal*, *45*(6), 801–808. https://doi.org/10.1007/s10643-016-0831-9
- Carter, R.L. (n.d). Child Care--Further Readings. Law Library: *American Law and Legal Information Encyclopedia*. https://law.jrank.org/pages/5170/Child-Care.html
- Castle, S., Williamson, A. C., Young, E., Stubblefield, J., Laurin, D., & Pearce, N. (2016).
 Teacher–child interactions in early Head Start classrooms: Associations with teacher characteristics. *Early Education and Development*, 27(2), 259–274.
 https://doi.org/10.1080/10409289.2016.1102017

- Centers for Disease Control and Prevention. (2020). *Guidance for child care programs that* remain open. https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html
- Child Care Aware of American. (2013). We can do better: Child care aware of America's ranking of state child care center regulations and oversight [Executive Summary]. http://usa.childcareaware.org/wp-content/uploads/2015/10/wecandobetter_executive_summary_040813.pdf
- Corey, G. (1971). *Military Day Care: Problems and Perspective*. U.S Department of Health. https://files.eric.ed.gov/fulltext/ED055668.pdf
- Corr, L., Cook, K., LaMontagne, A. D., Waters, E., & Davis, E. (2015). Associations between Australian early childhood educators' mental health and working conditions: A cross-sectional study. *Australasian Journal of Early Childhood*, 40(3), 69–78.
- Corr, L., Davis, E., Cook, K., Waters, E., & LaMontagne, A. D. (2014). Fair relationships and policies to support family day care educators' mental health: A qualitative study. *BMC Public Health*, *14*(1), 1–28. https://doi.org/10.1186/1471-2458-14-1214
- Creswell, J. W., & Clark, V. L. P. (2017). *Designing and Conducting Mixed Methods Research* (3rd ed). SAGE Publications, Inc.
- Creswell, J. W., & Poth, C. N. (2017). *Qualitative Inquiry and Research Design: Choosing Among Five Approaches* (4th ed). SAGE Publications, Inc.
- Cumming, T. (2015). Early childhood educators' experiences in their work environments:

 Shaping (im)possible ways of being an educator? *Complicity: An International Journal of Complexity and Education*, 12(1). https://doi.org/10.29173/cmplct23068

- Cumming, T. (2017). Early childhood educators' well-being: An updated review of the literature.

 Early Childhood Education Journal, 45(5), 583–593. https://doi.org/10.1007/s10643-016-0818-6
- Cumming, T., & Wong, S. (2019). Towards a holistic conceptualisation of early childhood educators' work-related well-being. *Contemporary Issues in Early Childhood*, 20(3), 265–281. https://doi.org/10.1177/1463949118772573
- Data Analysis Software for Academic Research / NVivo. (n.d.).

 https://www.qsrinternational.com/nvivo-qualitative-data-analysis-software/about/nvivo/who-its-for/academia
- de Schipper, E. J., Riksen-Walraven, J. M., Geurts, S. A. E., & de Weerth, C. (2009). Cortisol levels of caregivers in child care centers as related to the quality of their caregiving. *Early Childhood Research Quarterly*, 24(1), 55–63. https://doi.org/10.1016/j.ecresq.2008.10.004
- De Vita, C. J., & Montilla, M. (2003). *Improving child care quality: A comparison of military* and civilian approaches: (688942011-001) [Data set]. American Psychological Association. https://doi.org/10.1037/e688942011-001
- Department of the Army Historical Summary FY 1969. (1969). https://history.army.mil/books/DAHSUM/1969/chIV.htm
- Dictionary by Merriam-Webster. (n.d.) https://www.merriam-webster.com/
- Dratch, H. (1974). The politics of child care in the 1940s. Science & Society, 38(2), 167–204.
- Faulkner, M., Gerstenblatt, P., Lee, A., Vallejo, V., & Travis, D. (2016). Childcare providers:

 Work stress and personal well-being. *Journal of Early Childhood Research*, *14*(3), 280–293. https://doi.org/10.1177/1476718X14552871

- Floyd, L., & Phillips, D. A. (2013). Child care and other support programs. *Future of Children*, 23(2), 79–97.
- Foltz, B. (2015, March 8). *Statistics 101: Logistic regression, An introduction* [Video]. YouTube. https://www.youtube.com/watch?v=zAULhNrnuL4
- Fraenkel, Jack, Wallen, Norman, & Hyun, Helen. (2019). *How to design and evaluate research in education* (10th ed). PriorityTextbook. https://www.prioritytextbook.com/how-to-design-and-evaluate-research-in-education-10th-edition-jack-r-fraenkel-and-norman-e-wallen/
- General Accounting Office of the United States. (1982, June 1). *Military child care programs:**Progress made, more needed. Report to the Secretary of Defense.

 https://files.eric.ed.gov/fulltext/ED219135.pdf
- Glen, S. (2014, December 17). Factor analysis. *Statistics How To*. https://www.statisticshowto.com/factor-analysis/
- Goldston, Linda. (1988, July 24). Child abuse at the Presidio. *The San Jose Mercury News*. https://tabublog.com/2018/02/11/child-abuse-at-the-presidio/
- Grant, A. A., Jeon, L., & Buettner, C. K. (2019). Relating early childhood teachers' working conditions and well-being to their turnover intentions. *Educational Psychology*, *39*(3), 294–312. https://doi.org/10.1080/01443410.2018.1543856
- Guba, E. G., & Lincoln, Y. S. (1994). Competing Paradigms in Qualitative Research. In N.K. Denzin & Y.S. Lincoln (Eds), *Handbook of qualitative research* (pp. 105-117). Sage.
- Guenther, J & Rudick, S. (1990). Department of the Army child development center directors' handbook.

- Guillemin, M., & Gillam, L. (2004). Ethics, reflexivity, and "ethically important moments" in Research. *Qualitative Inquiry*, 10(2), 261–280. https://doi.org/10.1177/1077800403262360
- Hall-Kenyon, K. M., Bullough, R. V., MacKay, K. L., & Marshall, E. E. (2014). Preschool teacher well-being: A review of the literature. *Early Childhood Education Journal*, 42(3), 153–162. https://doi.org/10.1007/s10643-013-0595-4
- Hamre, B. K., & Pianta, R. C. (2004). Self-reported depression in nonfamilial caregivers:

 Prevalence and associations with caregiver behavior in child-care settings. *Early Childhood Research Quarterly*, *19*(2), 297–318.

 https://doi.org/10.1016/j.ecresq.2004.04.006
- Hancock, G. R., & Mueller, R. O. (2011). The reliability paradox in assessing structural relations within covariance structure models. *Educational and Psychological Measurement*, 71(2), 306–324. https://doi.org/10.1177/0013164410384856
- Harwood, D., & Tukonic, S. (2016). Babysitter or professional? Perceptions of professionalism narrated by Ontario early childhood educators. *International Electronic Journal of Elementary Education*, 8(4), 589-600.
- Hendricks, C. (2015). Paths to a healthier child care workforce. Child Care Aware of America.
- Hu, L., & Bentler, P. M. (1999). Cutoff criteria for fit indexes in covariance structure analysis:
 Conventional criteria versus new alternatives. *Structural Equation Modeling*, 6(1), 1–55.
 https://doi.org/10.1080/10705519909540118
 - Huffman, T., & Tracy, S. (2018). Making claims that matter: Heuristics for theoretical and social impact in qualitative research. *Qualitative Inquiry*, 24(8), 558-570.

- Hur, E., Jeon, L., & Buettner, C. K. (2016). Preschool teachers' child-centered beliefs: Direct and indirect associations with work climate and job-related wellbeing. *Child & Youth Care Forum*, 45(3), 451–465.
- Jennings, P. A. (2015). Early childhood teachers' well-being, mindfulness, and self-compassion in relation to classroom quality and attitudes towards challenging students. *Mindfulness*, 6(4), 732–743. https://doi.org/10.1007/s12671-014-0312-4
- Jeon, L., Buettner, C., & Grant, A. (2017). Early childhood teachers' psychological well-being: Exploring potential predictors of depression, stress, and emotional exhaustion. *Early Education and Development*, 29(1), 53–69.
- Jeon, L., Buettner, C. K., & Hur, E. (2015). Preschool teachers' professional background, process quality, and job attitudes: A person-centered approach. *Early Education and Development*, 27(4), 551–571. https://doi.org/10.1080/10409289.2016.1099354
- Jeon, L., Buettner, C. K., & Snyder, A. R. (2014). Pathways from teacher depression and childcare quality to child behavioral problems. *Journal of Consulting and Clinical Psychology*, 82(2), 225–235. https://doi.org/10.1037/a0035720
- Jowers, K. (2018, October 12). *It's now easier for Army spouses to keep their jobs in Child and Youth Services when they PCS*. Army Times. https://www.armytimes.com/paybenefits/2018/10/12/its-now-easier-for-army-spouses-to-keep-their-jobs-in-child-and-youth-services-when-they-pcs/
- Kamarck, (2018). *Military child development program: Background and issues*. Congressional Research Service.
- Kamarck. (2020). *Military child development program: Background and issues*. Congressional Research Service.

- Kapp, L. (2020). Defense primer: Active duty enlisted retention. https://fas.org/sgp/crs/natsec/IF11274.pdf.
- King, E., Johnson, A., Cassidy, D., Wang, Y., Lower, J., & Kintner-Duffy, V. (2016). Preschool teachers' financial well-being and work time supports: Associations with children's emotional expressions and behaviors in classrooms. *Early Childhood Education Journal*, 44(6), 545–553. https://doi.org/10.1007/s10643-015-0744-z
- Kwon, K.-A. (2019, October 9). Are early childhood teachers happy and healthy? This research study will find out. *EdSurge*. https://www.edsurge.com/news/2019-10-09-are-early-childhood-teachers-happy-and-healthy-this-research-study-will-find-out
- Kwon, K.-A., Malek, A., Horm, D., & Castle, S. (2020). Turnover and retention of infant-toddler teachers: Reasons, consequences, and implications for practice and policy. *Children and Youth Services Review*, 115, 105061. https://doi.org/10.1016/j.childyouth.2020.105061
- Lang, S. N., Jeon, L., Schoppe-Sullivan, S. J., & Wells, M. B. (2020). Associations between parent–teacher cocaring relationships, parent–child relationships, and young children's social emotional development. *Child & Youth Care Forum*. https://doi.org/10.1007/s10566-020-09545-6
- Liu, L. B., Song, H., & Miao, P. (2018). Navigating individual and collective notions of teacher wellbeing as a complex phenomenon shaped by national context. *Compare: A Journal of Comparative and International Education*, 48(1), 128–146.
 https://doi.org/10.1080/03057925.2017.1283979
- Lohr, S. L. (2019). Sampling: Design and Analysis (2nd ed). Chapman and Hall/CRC.
- Lucas, M.-A. (2001). The military child care connection. *The Future of Children*, 11(1), 129–133. JSTOR. https://doi.org/10.2307/1602816

- Madill, R., Halle, T., Gebhart, T., & Shuey, E. (2018). Supporting the psychological well-being of the early care and education workforce: Findings from the national survey of early care and education. Office of Planning, Research and Evaluation.
- Maxwell, J. A. (2013). *Qualitative Research Design: An Interactive Approach* (3rd ed). SAGE Publications, Inc.
- McGrath, B. J., & Huntington, A.D. (2007). The health and wellbeing of adults working in early childhood education. *Australian Journal of Early Childhood*, 32(3), 33-38.
- McMillan, J. H., & Schumacher, S. (2006). *Research in Education: Evidence-based Inquiry*. Pearson/Allyn and Bacon.
- Meadows, S. O., Griffin, B. A., Karney, B. R., & Pollak, J. (2016). Employment gaps between military spouses and matched civilians. *Armed Forces & Society*, 42(3), 542–561. https://doi.org/10.1177/0095327X15607810
- Merino, J., & Wangsness Willemsen, L. (2021). Turning off the recorder: Centering caring relationships in research with youth. In D. Levinson, M. Maynes, & F. Vavrus (Eds), Children and youth as subjects, objects, agents: Innovative approaches to research across space and time. Palgrave Macmillan.
- Military Child Care Act of 1989. Pub. L. No. 104–106, 110 88 (1989).
- Modigliani, K. (1986). But who will take care of the children? Childcare, women, and devalued labor. *The Journal of Education*, *168*(3), 46–69. JSTOR.
- Mooney, C. (2009). Theories of attachment: An Introduction to Bowlby, Ainsworth, Gerber, Brazelton, Kennell, and Klaus (1st ed). Redleaf Press.
- Mooney, C. G. (2002). Theories of childhood: An introduction to Dewey, Montessori, Erikson, Piaget, and Vygotsky (1st ed). Redleaf Press.

- Morra, L. G. (1988). *Observations on the military child care program* (GAO/T-lHRD-88-28; p. 11). General Accounting Office.
- National Association for the Education of Young Children. (2019). NAEYC early learning program accreditation standards and assessment items.
- Nessenholtz, D. (1976). Military day care—A nationwide survey. *Young Children*, 31(2), 137–143.
- Nislin, M. A., Sajaniemi, N. K., Sims, M., Suhonen, E., Maldonado Montero, E. F., Hirvonen, A., & Hyttinen, S. (2016). Pedagogical work, stress regulation and work-related well-being among early childhood professionals in integrated special day-care groups.
 European Journal of Special Needs Education, 31(1), 27–43.
 https://doi.org/10.1080/08856257.2015.1087127
- Nislin, M., Sajaniemi, N., Sims, M., Suhonen, E., Maldonado, E. F., Hyttinen, S., & Hirvonen, A. (2016). Occupational well-being and stress among early childhood professionals: The use of an innovative strategy to measure stress reactivity in the workplace. *Open Review of Educational Research*, *3*(1), 1–17. https://doi.org/10.1080/23265507.2015.1128352
- Office of the Press Secretary. (1997, October 23). Remarks by the president and first lady at the white house conference on child care.
 - https://clintonwhitehouse2.archives.gov/WH/New/Childcare/19971023-16352.html
- Otten, J. J., Bradford, V. A., Stover, B., Hill, H. D., Osborne, C., Getts, K., & Seixas, N. (2019). The culture of health in early care and education: Workers' wages, health, and job characteristics. *Health Affairs*, *38*(5), 709–720.

https://doi.org/10.1377/hlthaff.2018.05493

- Papero, A. L. (2005). Is early, high-quality daycare an asset for the children of low-income, depressed mothers? *Developmental Review*, 25(2), 181–211. https://doi.org/10.1016/j.dr.2004.10.001
- Paths to a Healthier Child Care Workforce. (2019). Child Care Aware® of America.

 https://www.childcareaware.org/our-issues/health-nutrition/paths-healthier-child-careworkforce/
- Patton, M., & Newhart, M. (2018). *Understanding research methods: An overview of the essentials* (10th ed.). Routledge.
- Phillips, D., Austin, L. J. E., & Whitebook, M. (2016). The early care and education workforce. Future of Children, 26(2), 139–158.
- Reiter, B. (2013). The epistemology and methodology of exploratory social science research:

 Crossing Popper with Marcuse. Government and International Affairs Faculty

 Publications.
- Roberts, A., LoCasale-Crouch, J., Hamre, B., & DeCoster, J. (2016). Exploring teachers' depressive symptoms, interaction quality, and children's social-emotional development in Head Start. *Early Education and Development*, 27(5), 642–654. https://doi.org/10.1080/10409289.2016.1127088
- Rosseel, Y. (2012). Lavaan: An R package for structural equation modeling. *Journal of Statistical Software*, 48(1), 1–36. https://doi.org/10.18637/jss.v048.i02
- Rumbaugh, R. (2017). *Defining Readiness: Background and Issues for Congress*. Congressional Research Service.
- Saldana, J. (2015). *The coding manual for qualitative researchers* (3rd ed). SAGE Publications Ltd.

- Schwartz, J. B., Wood, L. L., & Griffith, J. D. (1991). The impact of military life on spouse labor force outcomes. *Armed Forces & Society*, 17(3), 385–407.
 https://doi.org/10.1177/0095327X9101700304
- Shannon-Baker, P. (2016). Making paradigms meaningful in mixed methods research. *Journal of Mixed Methods Research*, 10(4), 319–334. https://doi.org/10.1177/1558689815575861
- Smith, S. (2019). *Early Care and Education Teacher Well-being*. Child Care & Early Education Research Connections.
- Sperandei, S. (2014). Understanding logistic regression analysis. *Biochemia Medica*, 24(1), 12–18. https://doi.org/10.11613/BM.2014.003
- Stern, M. J., Bilgen, I., & Dillman, D. A. (2014). The state of survey methodology: Challenges, dilemmas, and new frontiers in the era of the tailored design. *Field Methods*, 26(3), 284–301. https://doi.org/10.1177/1525822X13519561
- Stoltzfus, Emilie. (2001). *Child care: The federal role during World War II*. http://congressionalresearch.com/RS20615/document.php
- Tashakkori, A., & Teddlie, C. (1998). *Mixed methodology: Combining qualitative and quantitative approaches*. Sage Publications, Inc.
- The Clinton Administration. (1997). The clinton administration and child care.

 https://clintonwhitehouse2.archives.gov/WH/New/Childcare/acomplish.html
- Torquati, J. C., Raikes, H., & Huddleston-Casas, C. A. (2007). Teacher education, motivation, compensation, workplace support, and links to quality of center-based child care and teachers' intention to stay in the early childhood profession. *Early Childhood Research Quarterly*, 22(2), 261–275. https://doi.org/10.1016/j.ecresq.2007.03.004

- Travis, D. J., Lee, A., Faulkner, M., Gerstenblatt, P., & Boston, J. (2014). Cultivating a thriving childcare workforce: A theory-driven qualitative analysis. *Community, Work & Family*, 17(3), 325–345. https://doi.org/10.1080/13668803.2013.850402
- Welch, Heidi. (2019). Office of the Deputy Assistant Secretary of Defense 2019 Inspector

 Training. Office of the Deputy Assistant Secretary of Defense Military Community and
 Family Policy.
- Ylitapio-Mäntylä, O., Uusiautti, S., & Määttä, K. (2012). *Critical viewpoint to early childhood education teachers' well-being at work*. Journal of Human Sciences, 9(1), 458-483.
- Zellman, G., Gates, S., Cho, M., & Shaw, R. (2008). Options for improving the military child care system. RAND Corporation
- Zellman, G. L., Gates, S., Moini, J. S., & Suttorp, M. (2009). Meeting family and military needs through military child care. *Armed Forces & Society*, *35*(3), 437–459. https://doi.org/10.1177/0095327X08330804
- Zellman, G., & Johansen, A.. (1998). Examining the implementation and outcomes of the Military Child Care Act of 1989. https://apps.dtic.mil/dtic/tr/fulltext/u2/a354085.pdf

APPENDICES

Appendix A: Acronyms

Army Child and Youth Services (CYS)

Army Human Research Protection Program (HRPP)

Confirmatory Factor Analysis (CFA)

Child Development Center (CDC)

Child and Youth Program Assistant (CYPA)

Civilian Employment Assignment Tool (CEAT)

Department of Defense (DoD)

Early Childhood Educator (ECE)

Family Readiness Group (FRG)

Installation Management Command (IMCOM)

Installation Management Command Directorate (ID)

Institutional Review Board (IRB)

Military Child Care Act of 1989 (MCCA)

Morale, Welfare, and Recreation (MWR)

National Association for the Education of Young Children (NAEYC)

Permanent Change of Station (PCS)

U.S. Army Records Management and Declassification Agency (RMDA)

Appendix B: University IRB Approval



TO: nuttallt@csp.edu

CC: Humans Subjects Review Committee File

The IRB Human Subjects Committee reviewed the referenced study under the expedited procedures according to federal guidelines 45 CFR Part 46.110 (Research Category 7): RESEARCH ON INDIVIDUAL OR GROUP CHARACTERISTICS OR BEHAVIOR (INCLUDING, BUT NOT LIMITED TO, RESEARCH ON PERCEPTION, COGNITION, MOTIVATION, IDENTITY, LANGUAGE, COMMUNICATION, CULTURAL BELIEFS OR PRACTICES, AND SOCIAL BEHAVIOR) OR RESEARCH EMPLOYING SURVEY, INTERVIEW, ORAL HISTORY, FOCUS GROUP, PROGRAM EVALUATION, HUMAN FACTORS EVALUATION, OR QUALITY ASSURANCE METHODOLOGIES.

ASSURANCE METHODOLOGIES.

Study Number: 2020_75

Principal Investigator: Tamara Nuttall

Title: Early Childhood Educators Employed in Army Child Development Centers: A Mixed-Methods Assessment of Workplace Wellbeing Factors Influencing Turnover

Classification: ____ Exempt ___ X__ Expedited ____ Full Review

Approved __ X__

Approved with modifications: ____ [See attached]

Declined ____ [See attached]

Upon receipt of this letter, you may begin your research. Please remember that any changes in your protocol need to be approved through the IRB Committee. When projects are terminated or completed, the IRB Committee should be informed in order to comply with Department of Health and Human Services (HHS) Regulations, Title 45 Code of Federal Regulations Part 46 (45 CFR 46). If you have questions, please call the IRB Chair at (651) 641-8723.

Signature, Chair Human Subjects Review Committee

September 8, 2020

Date

Appendix C: U.S. Army Human Research Protections Office (AHRPO) Administrative Review Approval



DEPARTMENT OF THE ARMY OFFICE OF THE SURGEON GENERAL 7700 ARLINGTON BOULEVARD FALLS CHURCH, VA 22042

DASG-HRPO 24 October 2020

MEMORANDUM FOR Tamara J. Nuttall, tamara.j.nuttall.naf@mail.mil

SUBJECT: Research Protections Administrative Review (RPAR) for Protocol "Early Childhood Educators Employed in Army Child Development Centers: A Mixed-Methods Assessment of Workplace Wellbeing Factors Influencing Turnover," PI: Tamara J. Nuttall

1. Review Outcomes

The Army Research Protections Office (AHRPO) RPAR of the above referenced protocol is complete, and AHRPO concurs with the Concordia University-Saint Paul Institutional Review Board's (IRB) approval of the protocol. RPAR concurrence is required to ensure that Department of Defense (DOD) supported research involving human subjects is compliant with DOD requirements in DOD Instruction (DODI) 3216.02. DoD-supported research involving human subjects is defined as research involving human subjects for which the Department of Defense is providing at least some of the resources, including but not limited to funding, facilities, equipment, personnel (investigators or other personnel performing tasks identified in the research protocol), access to or information about DoD personnel for recruitment, or identifiable data or specimens from living individuals. It includes both DoD-conducted research involving human subjects (intramural research) and research conducted by a non-DoD institution. DOD is supporting the above referenced activity by providing access to DoD personnel for recruitment.

2. Requirements

Substantive Changes to the Protocol: The AHRPO must review and accept the IRB's determination when substantive modifications are made to this research protocol and any modifications that could potentially increase risk to subjects, before the changes are implemented to ensure compliance with the DODI 3216.02. Substantive modifications include a change in principal investigator, change or addition of an institution, elimination or alteration of the consent process, change to the study population that has regulatory implications (e.g., adding children, adding active duty population, etc.), significant change in study design (i.e., would prompt additional scientific review), or a change that could increase risks to subjects.

Study Closure: The AHRPO should be informed of the date and reason for study closure (i.e., study completed, insufficient enrollment to sustain the research, etc.). The AHRPO must receive the final study report submitted to the IRB, including a copy of any acknowledgement documentation and any supporting documents, as soon as all documents become available.

Notification: The investigator should immediately notify the AHRPO of the occurrence of any of the following:

DASG-HRPO

SUBJECT: Research Protections Administrative Review (RPAR) for Protocol "Early Childhood Educators Employed in Army Child Development Centers: A Mixed-Methods Assessment of Workplace Wellbeing Factors Influencing Turnover," PI: Tamara J. Nuttall

- · When the IRB used to review and approve the research changes to a different IRB;
- The knowledge of any pending, on-going or completed compliance inspection/visit by
 the Food and Drug Administration (FDA), Office for Human Research Protections of the
 U.S. Department of Health and Human Services, or other government agency
 concerning this research; the issuance of inspection reports, FDA Form 483, warning
 letters, or actions taken by any regulatory agencies including legal or medical actions;
- Suspension or termination of this research study by the IRB, the institution, the sponsor, or any regulatory agency;
- Substantiated unanticipated problems involving risks to subjects or others related to this
 research study; and
- Substantiated serious or continuing noncompliance related to this research study.

3. Other Considerations

AHRPO acknowledges that you have already obtained survey approval from the U.S. Army Records and Information Management and Declassification Agency (Control No. AAHS-RDR-PR-21-33).

4. Caution

Do not construe this AHRPO memorandum as IRB approval, DOD Institutional approval, or other DOD support agreement. This review confirms only that the above reference project is deemed by AHRPO to be compliant with the requirements identified in the DODI 3216.02.

5. Point of Contact

The AHRPO Point of Contact for any questions regarding this memorandum is Tara L. McDonough, at 703-681-0647 or tara.l.mcdonough.civ@mail.mil.

MCDONOUGH. Digitally signed by MCDONOUGH.TARA.LYNN 125 .1252821925 Date: 2020.10.27 10.41:55 .04'00'

Tara L. McDonough, CIP Research Ethics and Compliance Officer Army Human Research Protections Office

Appendix D: Army Records Management and Declassification Agency (RMDA) Survey

Approval

----Original Message-----

From: Slutzky, Jason M CTR (USA)

Sent: Thursday, October 22, 2020 1:23 PM

To: Nuttall, Tamara J NAF USARMY IMCOM HQ (USA) <tamara.j.nuttall.naf@mail.mil>

Cc: Baldini, Domenic A CIV USARMY HQDA OAA AHS (USA) <domenic.a.baldini.civ@mail.mil>;

Stroud, Sandra D CIV USARMY HQDA OAA AHS (USA) <sandra.d.stroud.civ@mail.mil>

Subject: Army Survey Request (UNCLASSIFIED)

CLASSIFICATION: UNCLASSIFIED

Ms. Nuttall.

RMDA is approving "Early Childhood Educators Employed in Army Child Development Centers: A Mixed-Methods Assessment of Workplace Wellbeing Factors Influencing Turnover" IAW AR 25-98, Chapter 6.

The Survey Control Number information block is as follows:

SURVEY APPROVAL AUTHORITY:

U.S. ARMY RECORDS MANAGEMENT AND DECLASSIFICATION AGENCY

SURVEY CONTROL NUMBER: AAHS-RDR-PR-21-33

AGENCY IDENTIFIER: IMWR Expiration Date: 10/22/2021

Please place the SCNs in the top margin of the "documents" that your participants will see like invitations, survey questionnaire, reminders, confirmations, results summaries, etc.

If you make any changes to the survey questionnaire or the information documented in the Army Survey Request Instructions and Supporting Statement (ASRISS) prior to survey administration (launch), please provide RMDA with the revised survey questionnaire and revised ASRISS for immediate review.

Also, please notify me when the survey closes.

Thank you,

Jason M. Slutzky

Records and Information Management Specialist / Martin Federal

Appendix E: ECE Workplace Wellbeing Participant Flier

Early Childhood Educator Workplace Wellbeing Questionnaire

Attention CDC CYPAs—this questionnaire is for YOU!!

We value your input—the purpose of this questionnaire is to learn more about what influences your workplace wellbeing and your reasons to stay or leave your employment with CYS.

- ❖ Please complete the survey between 2-25 November 2020
- ❖ You may complete the survey during duty time.
 - Please access the questionnaire at: https://surveys.max.gov/874566?lang=en

Thank you for your participation!

Army Survey Control Number: AAHS-RDR-PR-21-33

Appendix F: Informed Consent

CONSENT FORM

Early Childhood Educators Employed in Army Child Development Centers: A Mixed-Methods Assessment of Workplace Wellbeing Factors Influencing Turnover

Dear Early Childhood Educator,

Thank you for taking the time to complete this questionnaire. This questionnaire is a research tool to identify factors that may impact YOUR workplace wellbeing and your intentions to either stay or quit working with Army Child and Youth Services. This questionnaire is part of a doctoral research study affiliated with Concordia University. Your participation in this survey is voluntary, your input is strictly confidential, and your responses can not be linked back to you in any way. You may skip individual questions if you choose not to answer them. Please do not include any personally identifiable information or operationally sensitive information in your responses.

Background Information

The purpose of this research study is to assess workplace wellbeing factors that may influence the wellbeing of early childhood educators working in Army child development centers and how these factors relate to the early childhood educator's intentions to leave the profession.

Procedures

If you agree to participate in this study, we ask you to:

Complete the Early Childhood Educator Workplace Wellbeing questionnaire. This questionnaire consists of 35 questions that include rating scale responses, demographic information, and two open-ended questions. This questionnaire should take approximately 20 minutes to complete.

Risks and Benefits of Participating in this Study

There are no risks associated with participation in this study.

The results from this research are intended to inform Army Child and Youth Services policy-makers of early childhood educator workplace wellbeing factors and the influence on staff turnover. This information may be used to develop workplace policies and procedures to better support the wellbeing of early childhood educators and reduce turnover.

Compensation

There is no financial compensation and/or gifts for completing this questionnaire.

Confidentiality

The information gained through this questionnaire is strictly confidential and responses will not be linked back to the participants in any way. Demographic information requested in the questionnaire does not contain personally identifiable information.

CONSENT FORM

Early Childhood Educators Employed in Army Child Development Centers: A Mixed-Methods Assessment of Workplace Wellbeing Factors Influencing Turnover

Contacts and Questions

The researcher conducting this study is Tamara Nuttall, a doctoral candidate with Concordia University. If you have questions regarding this research, you may contact Tamara Nuttall at nuttallt@csp.edu. You may also contact the Concordia University IRB Committee at 651-641-8723.

Voluntary Nature of the Study

Participation in this study and completion of the questionnaire is voluntary. The decision to not participate will not affect your job in any way. Non-participation is not recorded. If you decide to participate, you are free to not answer certain questions you may feel uncomfortable answering.

Statement of Consent:

I have read the above information and I consent to participate in this study. (This questionnaire is electronically based. The participant will click the options below to either continue and complete the questionnaire or choose not to participate).

Yes, I would like to participate in the questionnaire.

No, I would not like to participate.

Appendix G: Early Childhood Educator Workplace Wellbeing Questionnaire

Assessment form removed for copyright reasons. Copyright holders are College Board and Tamara Nuttall.