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## How to support toddlers' autonomy: A qualitative study with child care educators

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### ABSTRACT

*Research Findings:* The present study explored the concrete manifestations of autonomy support (AS) toward toddlers. Eight child care educators were interviewed. Based on our assessment, these educators all valued AS. A qualitative content analysis revealed 18 practices that this group of child care educators considered supportive of toddlers' autonomy. The present findings are in line with the traditional conceptualization of AS, namely, offering choices and encouraging initiatives, acknowledging the child's feelings and perspective, and providing rationales and explanations for requests (Deci, Eghrari, Patrick, & Leone, 1994; Koestner, Ryan, Bernieri, & Holt, 1984), suggesting that these practices are developmentally appropriate for toddlers. Yet, they also widen the scope of AS, highlighting additional caregiving practices that may support the autonomy of toddlers. *Practice or Policy:* The results are discussed in light of child care educators' professional training context and the relationship between AS and structure. The practices found in this study offer many means of actualizing AS with toddlers on a daily basis.

Toddlers are spontaneous explorers of their social and physical environments, achieving many interesting learnings. Toddlers are also increasingly taught the everyday rules, values, and conventions of society, a process called *socialization* (Grusec, 2011; Smetana, Kochanska, & Chuang, 2000). One of socialization's main goals is for children not only to comply with these rules and regulations but to internalize them; to adopt them as their own and regulate their behaviors accordingly (e.g., Grolnick, Deci, & Ryan, 1997; Ryan & Deci, 2000b; Schaefer, 1968). Although children demonstrate natural tendencies toward exploration and mastering important aspects of their environment, they are usually not left alone in doing so. Assisting them are different socializing agents, mainly parents (Grusec, 2011) and other caregivers close to the child. Nowadays, early childhood education is no longer limited to the home environment, as it also takes place in child care centers (Malenfant, 2014). Child care educators thus play a key role in young children's socialization and global development. In 2011, 38% of children ages 4 and younger attended a day care center in the province of Quebec, Canada (Sinha, 2014). As such, child care educators must find ways to support young children's learning of rules and regulations while also sustaining their exploration and curiosity. Autonomy support (AS) is one such approach that may help to promote toddlers' optimal development, internalization, and well-being. The present study aimed to investigate the daily practices used by child care educators to support toddlers' autonomy.

### Self-Determination Theory (SDT): Basic propositions

SDT (Deci & Ryan, 1985, 2000) offers a helpful framework within which one can better understand how to promote children's optimal development and functioning. With its organismic perspective,

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SDT is a metatheory that emphasizes two important and natural developmental tendencies: intrinsic motivation and internalization (Deci & Ryan, 2000). First, *intrinsic motivation* refers to people's natural energy source for psychological and behavioral processes (Grolnick et al., 1997). This spontaneous motivation is what drives individuals to engage in activities that are of true interest to them, for no other reasons than personal pleasure and inherent satisfaction. Such behaviors are a source of enjoyment, personal growth and learning, and do not require socialization in order to occur (Deci & Ryan, 1985, 2000, 2013; Grolnick et al., 1997). Examples of intrinsically motivated behaviors in young children are numerous, such as playing, manipulating new objects, and exploring their surroundings.

Second, *internalization* refers to the process by which uninteresting behaviors, such as following rules and social conventions, are taken in, transformed, and integrated into personal functioning (Ryan & Deci, 2000b). As a result, individuals come to experience these principles as their own and feel volitional in regulating their behaviors accordingly (Deci & Ryan, 2000; Ryan & Deci, 2000a, 2000b). Indeed, self-regulation is an important aspect of internalization, as such an ability enables people to adjust spontaneous behaviors (e.g., initiate, cease, postpone) in order to concur with rules and standards of behaviors (Baumeister & Vohs, 2007; Kopp, 1982). Note that internalization occurs to varying degrees, with fully internalized behaviors being the most autonomously self-regulated (Deci & Ryan, 2013; see Ryan & Deci, 2000b, for more details). Of course, socializing agents aim to foster the most fully internalized behaviors in the children they care for (Ryan & Deci, 2000b). Some examples of internalized behaviors in children are saying thank you, washing their hands, and not playing with food. Research has shown benefits of intrinsic motivation and greater internalization for optimal development and functioning (for brief overviews, see Deci & Ryan, 2013; Ryan & Deci, 2000b).

Even though both intrinsic motivation and internalization are considered natural processes, they require support from the social environment to unfold optimally (Deci & Ryan, 2000; Deci & Vansteenkiste, 2004). Within SDT, such support involves the fulfillment of three universal and innate psychological needs: competence, relatedness, and autonomy (Deci & Ryan, 1985, 2000). Although support for competence and relatedness needs is significant, satisfaction of the need for autonomy is of central importance (Deci & Ryan, 2000; Ryan & Deci, 2000b; Ryan, Deci, Grolnick, & La Guardia, 2006). When the need for autonomy is supported, only then do individuals experience an internal locus of causality for their behaviors and they can fully take in social requirements as their own (Ryan & Deci, 2000b). Thus, the extent to which the social context, such as socialization practices, satisfies the need for autonomy has a great impact on children's healthy internalization, motivation, and development (Deci & Ryan, 2008; Ryan & Deci, 2000b).

## The need for autonomy and AS

The need for autonomy (i.e., self-determination) denotes the need to experience volition, choice, and personal endorsement regarding the enactment and the regulation of one's actions (Deci & Ryan, 2000; Joussemet, Landry, & Koestner, 2008; Ryan et al., 2006). It is important to note that this need should not be confused with independence or individualism (Ryan & Deci, 2000a; Ryan et al., 2006; Soenens et al., 2007). Indeed, being autonomous implies acting in a coherent fashion with both a sense of self and the external environment (Deci & Vansteenkiste, 2004; Ryan & Deci, 2000a). In light of such a definition, AS from socializing agents is globally characterized by the active support of a child's abilities to be self-initiating and autonomous (Ryan et al., 2006).

In an early study of AS, Koestner, Ryan, Bernieri, and Holt (1984) demonstrated that it was possible to encourage children to abide by behavioral rules (cleaning brushes during a painting activity) without thwarting their interest and motivation for the task, as long as the rules were presented to the children in an autonomy-supportive manner. AS was operationalized in terms of the four following elements, adapted from Haim Ginott's (1959, 1961) empathic limit setting: (a) providing a rationale and explanation for the behavioral request, (b) acknowledging the feelings

and perspective of the child, (c) offering choices and encouraging initiative, (d) minimizing the use of controlling language and techniques such as *should* or *must* statements to have the child behave as desired (Deci, Eghrari, Patrick, & Leone, 1994; Koestner et al., 1984). AS, conceptualized with such practices, has been found to be beneficial for intrinsic motivation (Koestner et al., 1984) and for better task internalization (e.g., Deci et al., 1994; Joussemet, Koestner, Lokes, & Houliort, 2004).

Additional positive outcomes for youth (i.e., children and adolescents) have been repeatedly demonstrated in the literature investigating AS across different socializing agents: teachers, sports coaches, and parents. For example, teachers' AS has been found to relate positively to children's motivation, engagement, and functioning in school (e.g., Assor, Kaplan, & Roth, 2002; Reeve, 2002; Reeve, Jang, Carrell, Jeon, & Barch, 2004); coaches' AS to enjoyment, subjective vitality, and motivation in sport involvement (Adie, Duba, & Ntoumanis, 2012; Alvarez, Balaguer, Castillo, & Duba, 2009); and parental AS to more autonomous school and emotional self-regulation (Grolnick & Ryan, 1989; Roth, Assor, Niemiec, Ryan, & Deci, 2009), social adjustment (Joussemet, Koestner, Lokes, & Landry, 2005), and academic adjustment/performance (Grolnick & Ryan, 1989; Grolnick, Ryan, & Deci, 1991; Joussemet et al., 2005; Soenens & Vansteenkiste, 2005). Note that AS is one of the three constituent dimensions of Baumrind's (1967, 1971, 1978) optimal authoritative parenting style, alongside structure (or behavioral control) and acceptance (or involvement; e.g., Gray & Steinberg, 1999; Grolnick & Ryan, 1989; Steinberg, Elman, & Mounts, 1989).

### AS with toddlers?

Supporting the universal need for autonomy seems particularly important during toddlerhood. First, this developmental period is one in which the issue of autonomy is central, as toddlers begin to assert themselves, to want choices, and to pursue their personal desires and drives in an increasingly volitional manner (Erikson, 1963; Kopp, 1982; Ryan et al., 2006). Socializing agents must find a balance between this nascent autonomy of children, and control and responsiveness to the child (Spegman & Houck, 2005). Second, toddlers spontaneously explore, play, and interact with their environment, learning by way of such natural propensities. Encouraging these behaviors is thus of central importance for their development. Third, the socialization process takes off in the early toddler years, with parents increasingly expressing rules and social standards to children (Gralinski & Kopp, 1993; Smetana et al., 2000). Lastly, toddlerhood is one of the significant periods for the emergence and refinement of self-regulation abilities (e.g., Kochanska, Coy, & Murray, 2001; Kopp, 1982; LeCuyer-Maus & Houck, 2002; Smetana et al., 2000) and the gradual internalization of rules (e.g., Kochanska et al., 2001).

Yet AS with children of younger developmental periods has received relatively less empirical attention. To our knowledge, a few studies have looked at AS with infants (e.g., Grolnick, Frodi, & Bridges, 1984; Landry et al., 2008), and relatively few studies have investigated whether AS is also beneficial for toddlers (e.g., Bernier, Whipple, & Carlson, 2010; Cleveland, Reese, & Grolnick, 2007; Frodi, Bridges, & Grolnick, 1985; Laurin & Joussemet, 2015; Leyva, Reese, Grolnick, & Price, 2009; Matte-Gagné & Bernier, 2011; Whipple, Bernier, & Mageau, 2011; Zuk, 2012). Nonetheless, positive toddler outcomes have been found for parental provision of AS, such as better task-oriented persistence (Frodi et al., 1985), better executive functioning performance (Bernier et al., 2010), more engagement in conversations about past events (Cleveland et al., 2007; Leyva et al., 2009), and long-term self-regulated obedience to parental requests (Laurin & Joussemet, 2015). All together, this emergent literature suggests that AS is beneficial not only for children and adolescents but also for younger children, such as toddlers. Autonomy-supporting caregiving practices can thus be of great interest for both socializing agents and researchers looking at toddlers' optimal development and functioning.

When looking at the literature on AS in toddlerhood, a central interrogation remains around its concrete manifestations. Indeed, in previous observational studies with toddlers, behavioral codifications and their related definitions of AS have varied. In codification systems, elements

reminiscent of the traditional conceptualization of AS (Deci et al., 1994; Koestner et al., 1984) are sometimes used (e.g., taking the child's perspective, offering choices, providing rationales for a task; Laurin & Joussemet, 2015; Whipple et al., 2011), as are a variety of other practices thought to reflect AS (e.g., scaffolding, following the child's ongoing activity, making suggestions; e.g., Bernier et al., 2010; Cleveland et al., 2007; Laurin & Joussemet, 2015). These variations may conceivably be due to sensible adaptations of AS for younger children and to the different contexts in which AS was studied (e.g., challenging game, requests, and parent-child conversations). Nonetheless, this variability in what may be autonomy-supportive practices with toddlers puts forward interesting and significant questions: Is the traditional operationalization of AS, which was initially conceptualized in a study involving elementary school-age children (Koestner et al., 1984), developmentally appropriate for toddlers, as there are various developmental differences between these age groups? What may be the practices involved in supporting the autonomy of toddlers across various situations?

## The present study

The purpose of the present study was thus to explore possible manifestations of AS toward toddlers. To achieve this goal, we conducted individual interviews with child care educators, one important socialization agent in a toddler's life. Specifically, this research aimed to identify and describe different practices used by child care educators working in childhood day care centers to support the autonomy of toddlers ages 18 to 36 months. By *practices*, the present study refers to (a) behaviors (actions toward toddlers, accomplished in reaction to what they did or in prevention of what they will do, including the alteration of toddlers' immediate day care environment) and (b) communication (what is said to toddlers, including nonverbal ways of communicating with them, in prevention of and/or in reaction to what they did or what they will do).

## Epistemology

The present qualitative methodology was inspired by a constructivist approach. This approach stipulates the existence of multiple realities, each constructed by every observer based on his or her social environment and lived experiences (Guba & Lincoln, 1994). To fully comprehend a lived phenomenon, one seeks the point of view of those who experience it daily (Schwandt, 1994, 2000). Through dialogue (Ponterotto, 2005), we aspired to obtain respondents' multiple and experiential points of view to better understand toddler AS.

We considered interviews an informative step in the exploration of autonomy-supportive practices with toddlers, as this qualitative methodology enables an open, exploratory, and ecologically valid outlook on the topic. Indeed, interviews allowed access to actors' experiential meaning of AS expressed in their own words, thus complementing existing research that uses the traditional, theory-based conceptualization of AS. By exploring AS from actors' point of view, our hope was to nourish further empirical, applied, and theoretical work.

## Child care educators and Quebec's child care system

In 1997, in the province of Quebec (Canada), a universal child care system was implemented. At the same time, an integrated educational program was put into place for early childhood services. This educational program, reviewed in 2003, is intended for all early child care services of Quebec (Berger, Héroux, & Shéridan, 2012; Québec, 2007). Currently there are four main types of child care services, three of them publicly funded: child care centers (*Centre de la Petite Enfance*), family day care, and day care centers (subsidized and unsubsidized). Class sizes vary according to child age groups, with a typical ratio of 8 children to 1 educator for children ages 18 to 48 months (Berger et al., 2012). In child care services, at least two thirds of child care or day care personnel must hold professional qualifications (Québec, 2014). A college (i.e., preuniversity level) vocational diploma in

childhood education is the primary training granting access to the profession (*Technique d'éducation à l'enfance*). Other college- or university-level trainings are recognized as equivalents by the government (e.g., a university certification in childhood or a college diploma in day care services), most of them requiring additional relevant experience or classes (e.g., educational approach, child safety; Québec, 2015).

## Method

### Participants

Eight child care educators took part in the research project to investigate autonomy-supportive practices with toddlers. All participants were women and had received training related to their work as child care educators either at a college level ( $n = 6$ ) or at a university level ( $n = 2$ ) in different recognized programs. Four participants also held university-level training in other disciplines. Among the participants, seven participants worked in child care centers (*Centres de la Petite Enfance*) and one worked in an unsubsidized day care center, all located in the greater Montreal region. Further participant characteristics are available in Table 1.

Participants were selected on the basis of the age of the children under their care and their motivational style. All participants were currently working with children in the target age group, namely, toddlers between the ages of 18 and 36 months old. Moreover, all participants valued AS, as measured by their mean score on two questions of a motivational style questionnaire adapted from the Problems in School Questionnaire (Deci, Schwartz, Sheinman, & Ryan, 1981; Reeve, Bolt, & Cai, 1999). These questions were completed beforehand as part of two ongoing projects or for the purpose of recruitment in this study. Participants' mean score was 4.75, with all above the reference sample mean ( $M = 2.29$  for the two items; reference sample maximum = 10, minimum = -5), which was composed of 94 child care educators from the greater Montreal area. In light of this purposeful sampling strategy, these child care educators were considered information-rich and expert respondents (Patton, 2002).

### Procedure

After obtaining ethical approval, the principal investigator recruited all child care educators (with the exception of one) from among participants of a larger ongoing project, contacting solely educators who had agreed to be contacted for further studies and who met the selection criteria. After they consented verbally to take part in the study, the consent form and the interview protocol were sent electronically to each participant a few days before the planned meeting. This allowed participants to look over the consent criteria and the interview questions beforehand. Individual face-to-face semistructured interviews were then conducted between March 2014 and September 2014. These interviews took place at one of the following locations: the participant's workplace, our institution

**Table 1.** Participant characteristics.

Child Care Educator Identifier	Sociodemographic Characteristics		Toddlers			
	Age	Ethnicity	Age Group (Months)	Experience With This Age Group (Years)	Total Experience (Years)	Number of Children Under Care
1	35	Greek/Canadian	18–36	13	13	—
2	28	Quebecker	21–25	1	7	5
3	43	Quebecker	32–40	3	19	8
4	34	Quebecker	31–35	2	13	8
5	25	Quebecker	10–36	2.5	2.5	4–8
6	32	Bulgarian	24–35	1.5	2.5	8
7	25	Quebecker	18–36	2	5	6
8	33	Haitian	24–30	3	12	8

Note. Participant 1 was a specialized child care educator for children with special needs.

(the Université de Montréal), or the conference room of a public library. All interviews were audio-recorded and later transcribed verbatim for analysis by a professional transcriber. Following the interview, participants filled out a short sociodemographic questionnaire. A \$35 monetary compensation was given to each participant to thank her for her time and participation.

## **Data collection instruments**

### **Interview protocol**

The individual semistructured interviews lasted approximately 45 min. The interview protocol was specifically designed for the needs of the present study. At the beginning of the interview, the three distinct caregiving dimensions of acceptance, structure, and AS were defined, and it was made clear that only AS would be the topic under discussion. Moreover, as the word *autonomy* can have different connotations (e.g., independence, self-reliance), and as the meaning of self-determination can sometimes be difficult to grasp, *supporting authenticity* was chosen to stand for AS in the interview. We used this expression in an effort to render accessible the notion of AS to respondents and to facilitate a common understanding of the topic under discussion. In choosing the terminology, we had identified alternative words we judged to convey the essence of AS: *authenticity* and *respect*. In furthering this reflection, we conducted an informal survey among eight adults unfamiliar with SDT. After being provided with a simple definition of AS, they were asked to select the word that best reflected AS from among *authenticity*, *respect*, and *self-determination*. They were also free to suggest any other terms. In light of their answers and further discussion among ourselves, *supporting authenticity* was chosen. Furthermore, Ryan and colleagues (2006) presented authenticity as one of the concepts compatible with SDT's view of autonomy, as authenticity also pertains to the experience of acting from the self and fully endorsing one's actions (see Ryan et al., 2006, for more details).

Next open-ended questions were asked, allowing each participant to elaborate freely on her autonomy-supportive practices with toddlers. Participants were first guided through five situations that were thought to arise daily in a toddler's life in day care: (a) free play, (b) organized activities (i.e., activities planned by the educator, in which toddlers are expected to participate), (c) clean-up time, (d) lunch and snack time, and (e) misbehaviors (i.e., when a child hurts another child or breaks a classroom rule, such as standing on a chair). Participants were also invited to share additional autonomy-supportive practices if desired.

The five situations were selected by us based on personal knowledge and some readings on child care centers (Malenfant, 2014). They were also thought to vary in terms of educational goals and level of challenge for both children and educators. Moreover, these contexts targeted the two developmental processes put forward by SDT, namely, intrinsic motivation (e.g., free play) and internalization (e.g., clean-up time). All together, these five different situations were regarded as allowing for the exploration of a wide range of AS practices, the main objective of the study.

### **Sociodemographic questionnaire**

Sociodemographic and child care-related information was gathered for each participant by means of a short questionnaire. Information can be found in Table 1.

### **Data analysis**

A content analysis, adapted from L'Écuyer (1990) and Paillé and Mucchielli (2008), was performed by the first author on the overt content of the interviews with the support of NVivo 8 software. Content analysis entails identifying, coding, and categorizing the central patterns in data (Patton, 2002). The present analysis was cross-case (i.e., horizontal), aimed at synthesizing and classifying the autonomy-supportive practices revealed by participants.

After the entire corpus was read a number of times to get a sense of its global content, the sections containing relevant information to answer the research questions were identified. As the present

project aimed to explore autonomy-supportive practices, only discourse regarding actual practices was analyzed. Other information provided by participants, such as practices to avoid, rationales for behavior, or objectives of the practices, were beyond the scope of the present study. Next informative sections of the corpus were divided into precise meaning units, each corresponding to an idea or a theme (i.e., autonomy-supportive practices). For each unit, a category representing the conveyed idea was assigned to the excerpt, with all excerpts carrying similar ideas classified under the same category. This data reduction procedure was performed sequentially. Furthermore, as a mixed categorization process was selected, categories emerging from the participants' discourse were created and preexisting categories based on the traditional conceptualization of AS (offering choices and encouraging initiatives, providing a rationale for behavioral requests, and acknowledging feelings and perspective) were refined. This categorization process resulted in a coding grid comprising a number of categories representative of the interviews' content (L'Écuyer, 1990; Paillé & Mucchielli, 2008) and respecting L'Écuyer's (1990) quality criteria, such as exhaustiveness, coherence, homogeneousness, exclusiveness, relevance, and well-defined. The grid was developed by the first author (identification, definition, and illustration of categories) and validated by the two coauthors. All problematic excerpts for the primary investigator were submitted to these authors and were classified through consensus. Based on shared meaning and relationships (Paillé & Mucchielli, 2012), the individual practices were clustered into practice domains, which were subsequently grouped into stances an educator may have in relation to a toddler.

Finally, redundancy is a qualitative criterion that can be used to evaluate sample size (Lincoln & Guba, 1985; Patton, 2002). Although redundancy cannot be definitely confirmed, thematic recurrence was observed in respondents' discourse, suggesting a satisfactory and useful sample size for exploring autonomy-supportive practices with toddlers.

## Results

Respondents' discourse revealed 18 autonomy-supportive practices with toddlers, discussed throughout five differing situations, from free play to misbehaviors. We clustered these individual practices into five practice domains, as presented here. A summary of these practices can be found in Table 2.

### Knowing the toddler

This first practice domain joins three of the autonomy-supportive practices revealed by child care educators' discourse: (a) observation, (b) chatting with the toddler, and (c) collaboration with parents. Together, these practices can be seen as aiming to know and understand the toddler. As understood from the discourse, knowing the child can refer to his or her state (e.g., his or her mood), traits (e.g., his or her interests or eating habits), or factual information (e.g., what he or she is doing right now).

Observation of the toddler consists of observing and paying attention to one child or to the group of toddlers under care, noticing various child-related information such as play interests, friendships, abilities, or current states: "*I watch, I see that such child, such child goes to see such child to give him offerings or to invite him to play*"<sup>1</sup> (Participant 2). As highlighted in child care educators' discourse, observing the child takes place throughout the daily routine, can be more informative when achieved over the long term (as opposed to 1 day), and can sometimes be written down on planning tools or verbally communicated to the child.

Chatting with the toddler refers to the child care educator talking with and listening to the toddler. Indeed, respondents evoked three types of behaviors: (a) chatting with the child about various topics; (b) questioning children on matters such as their food preferences, their interests, or desired activities; and (c) being attentive to what the toddler has to say. For example, Participant 7 recounted asking toddlers about their weekend activities or talking about subjects brought up by children under her care.

<sup>1</sup>Free translation of respondents' discourse by the first author. Salient linguistic errors and informal expressions were corrected.

**Table 2.** Autonomy-supportive practices by practice domain.

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<b>Knowing the toddler</b>
Observation of the toddler
Chatting with the toddler (chatting about various topics, questioning children, being attentive to what toddlers say)
Collaboration with parents
<b>Being sensitive and responsive</b>
Availability (being physically present, providing help if needed)
Perspective taking*
Adapting to the child
Reflexivity
<b>Being partners</b>
Offering choices*
Responsibilities
Make it fun/educational
Initiatives and exploration* (allowing the toddler to determine his or her activities, allowing him or her to lead, welcoming and supporting discoveries)
<b>Mentoring the child</b>
Modeling
Scaffolding (letting the child accomplish actions within his or her abilities, guidance and scaffolding actions)
The intense feelings zone
<b>Providing explicit guidelines and feedback</b>
Requests and instructions (explaining rationales for requests, rules, and refusals*; establishing steady routines and preparing transitions; ways to provide rules and request)
Positive feedback (congratulations, positive reinforcement, encouragements, motivation)
Feedback for misbehaviors (communicating disapproval, redirecting to alternative activities or behaviors, guided reflective discussion, ways to provide feedback)
Consequences for misbehaviors (asking to make amends, giving consequences, intentional ignoring, temporary withdrawal)

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Note. Asterisks identify practices similar to the traditional conceptualization of autonomy support (Deci et al., 1994; Koestner et al., 1984).

Collaboration with parents entails communicating with the caregiver, formally or casually, about diverse subjects regarding the toddler. According to some child care educators, this collaboration can be bidirectional, with both the educator and the caregiver providing valuable information to each other. Some examples taken from respondents' discourse are talking about the toddler's achievements, his or her interests, or his or her daily mood: "*And comments also from parents, in the morning. If he tells us: 'Ah he/she did not sleep last night,' then us, we know that, maybe he/she's less in shape*" (Participant 8).

### **Being sensitive and responsive**

This second practice domain encompasses four autonomy-supportive practices that reflect the child care educators' attunement to toddlers: (a) availability, (b) perspective taking, (c) adapting to the child, and (d) reflexivity. The toddler seems to be the adult's point of reference for behaviors and interactions, in what could be qualified as a child-centered attitude.

Availability is twofold, as two patterns emerged from respondents' discourse. First, the child care educator is physically present with the toddler in various contexts (e.g., during play or snack time), with some respondents qualifying this presence as discreet: "*Myself, I really believe in playing with the child, to sit down, you know, not necessarily participate in children's games, but being present*" (Participant 1). Second, the child care educator provides help and support to the toddler if he or she is in need of assistance or is experiencing difficulties.

Perspective taking consists of acknowledging and understanding the toddler's point of view or experience; in other words, putting oneself in the child's shoes. Child care educators presented different perspective-taking themes, such as the toddler's emotions and his or her perspective in a conflict situation with another toddler. Furthermore, they spoke of putting into words what the child may be experiencing or what might have happened in a given situation: "*I will put words for him, verbalize it, in fact. For example: I think you were mad because [...] child X wanted your truck. Hum, so I acknowledge what he's experiencing [...]*" (Participant 2).

Adapting to the child is defined as the child care educator adjusting or modifying her behaviors, activities, requests, and/or the classroom environment according to the individualities of one toddler

or of toddlers in general. Respondents discussed different child features to which they adapt, which can be divided and labeled as follows: (a) pace and abilities, (b) interests and preferences, (c) temperament and mood, and (d) perceived needs and difficulties. Some illustrations are organizing activities according to children's interests, adjusting lunch portions to food preferences, providing play materials within children's reach, and letting children clean up at their own pace. Furthermore, some educators highlighted the need to be flexible and creative to adapt to children. Lastly, others pointed out limits to this practice. For example, Participant 7 spoke about respecting children's food preferences but requesting that a child eat something if this toddler continually refuses to eat lunch.

Reflexivity refers to a process by which the child care educator is thinking and questioning herself on subjects related to the child and to her role as an educator. Indeed, some respondents talked about reflecting on the toddler's reactions or behaviors (e.g., why a child may not want to do an activity), whereas others discussed reflexivity regarding their daily activity planning for the children (e.g., Are the activities adapted for the day?) or their personal stance as educators (e.g., Is it necessary that my classroom be all cleaned up before we move on to the next activity?).

### **Being partners**

This third domain groups together four autonomy-supportive practices that seem to be characterized by a collaborative stance between the child care educator and the toddler, as the former (a) offers choices, (b) offers responsibilities, (c) makes some tasks more fun/educational, and (d) allows initiatives and exploration. With these four practices, child care educators appear to treat toddlers as partners and volitional individuals.

Offering choices consists of giving the toddler the opportunity to make choices or suggesting more than one option for him or her to make a choice. As can be highlighted from respondents' discourse, offering choices can be explicit (e.g., "*What color toy do you want to put away?*" Participant 6) or implicit (e.g., through the disposition of games in the classroom or the availability of activity material). Some child care educators also spoke of choices they sometimes labeled *false choices*, in which the child is given options about ways to engage in a task rather than about engaging in the task or not: "*You want to eat with your fork or your spoon?*" (Participant 4).

Responsibilities as an autonomy-supportive practice consists of the child care educator involving the toddler in various tasks, having him or her take part in the day care center routines and jobs. Respondents spoke about assigning responsibilities to children (e.g., cleaning up specific toys, distributing plates and utensils) and soliciting toddlers' help and knowledge at times. In further describing this practice, some participants talked about using a responsibility chart, which visually presents tasks and which children are in charge of them, whereas others indicated that responsibilities should be specific and adapted to the child's developmental level.

Making tasks fun/educational primarily refers to including playful features in a task or transforming a chore or task into a game. While evoking this practice, participants spoke of songs, music, and games, sometimes tailored to the toddler's personal interests: "*I do a clean-up game. For example, to say, 'Now, we're going to pretend that our toys, they are treasures. We're going to put them away in the treasure chest'*" (Participant 3). Adding another dimension to this practice, some respondents discussed the inclusion of educational themes in fun activities or tasks (e.g., learning colors while building block towers).

Initiatives and exploration is defined as the child care educator allowing the toddler to take on a leading role. Several behaviors were discussed by respondents and can be divided into three categories. First, the adult allows the child to determine his or her activities (e.g., pursuing his or her desired game or selecting the day care task he or she wants to do). The child is even free to decide if he or she wishes to take part in activities planned by the child care educator. Child care educators may invite the child to join the activity but ultimately respect his or her decision. Second, the adult allows the toddler to lead his or her activities. Different illustrations were found in respondents' discourse, such as letting the child decide on the materials and direction of a craft project, how to eat his or her lunch (e.g., with hands or utensils), or whether he or she wants the

adult to take part in his or her play or not. Third, the adult welcomes and supports the toddler's discoveries, entailing here a more active stance on the part of the child care educator. For example, Participant 8 spoke of bringing new foods for children to discover. Lastly, limits to allowing initiatives and exploration were mentioned in domains such as child safety and classroom rules.

### ***Mentoring the child***

The practices encompassed in this fourth domain can be seen as sharing a common guidance feature, in which the adult, in a mentoring posture, provides help and information to the child: (a) modeling, (b) scaffolding, and (c) making use of an *intense feelings zone*.

Modeling refers to the child care educator demonstrating a behavior to the child or performing a desired action alongside the child. Several modeling behaviors were highlighted in participants' discourse, such as eating or cleaning up with the toddler, showing him or her how to use a toy, and demonstrating an activity.

Scaffolding refers to the child care educator letting the child accomplish tasks or behaviors that are within his or her abilities and engaging in scaffolding and guidance behaviors. With regard to guidance behaviors, some respondents referred to breaking down tasks into steps and gradually enabling the child to accomplish more behaviors by himself or herself, whereas other respondents spoke of making suggestions or asking reflective questions about the child's activity: "*You want this BIG truck to fit in the SMALL house, do you think that it's possible?*" (Participant 6).

The intense feelings zone consists of an available space in the classroom where the toddler can calm down or relax when feeling strong emotions such as frustration or sadness. Respondents referred to different objects that are included in this space, such as a chair, teddy bears, or images depicting different emotions. The child care educators' discourse also revealed two patterns for this practice, which can be labeled as follows: (a) a child regulation focus, in which the child care educator directly asks the child to withdraw to the intense feelings zone to regain his or her calm and to return to the group once soothed; and (b) a helping focus, in which the child care educator more actively supports the child in calming down.

### ***Providing explicit guidelines and feedback***

This last practice domain joins together four autonomy-supportive practices: (a) requests and instructions, (b) positive feedback, (c) feedback for misbehaviors, and (d) consequences for misbehaviors. These practices can all be seen as characterized by the adult providing the child with explicit directives, information, and rules regarding his or her behaviors.

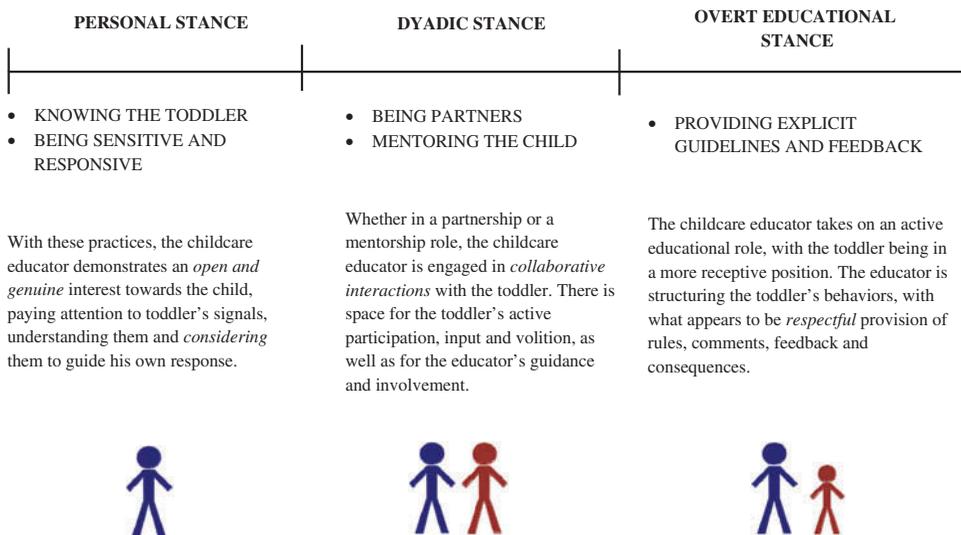
Requests and instructions consist of communicating rules, requests, and expectations to the toddler, either verbally or with nonverbal strategies. In further discussion of this practice, three themes emerged from respondents' discourse. First, the child care educator explains to the toddler the rationale behind requests, rules, or refusals. Second, the educator establishes steady routines and prepares transitions between activities by notifying the child in advance, stating what the following activity will be, and using nonverbal aids such as a schedule or a visual timer. Third, respondents mentioned ways to give rules and requests, such as regularly repeating rules, posting drawings depicting the rule, and wording requests positively and clearly: "*I always make the request positively, like 'Sit down on your bum' [...] not 'Don't stand on the chair'*" (Participant 5).

Positive feedback refers to the following behaviors evoked in respondents' discourse: congratulating or positively reinforcing toddlers' efforts, behaviors, or accomplishments; encouraging toddlers in activities or tasks; and motivating them. A few illustrations were given, such as saying "Bravo!" or "Thank you," praising the child (e.g., "*Bravo, you cleaned up well!*") giving a thumbs up, displaying children's artwork, and encouraging the child to accomplish a task by means of something he or she enjoys (e.g., telling a child who likes to draw that we took out the pencils, or using stickers). As can be understood from the discourse, positive feedback can be offered verbally or with nonverbal strategies.

Feedback for misbehaviors is defined as the child care educator providing various types of information to the toddler about his or her misbehavior. Different feedback behaviors were evoked, which can be grouped as follows. First, the child care educator communicates disapproval of the toddler's behavior either verbally (e.g., making a sound, stating disapproval) or with nonverbal strategies (e.g., hand gestures, stares). Second, the adult redirects the child to an alternative behavior or activity. Third, the adult engages and guides the child in a reflective discussion about his or her behavior, the consequences, and possible solutions. Finally, some ways in which to provide feedback were discussed, such as using short sentences and a firm tone, using "I" statements (e.g., "I don't like it ...") Participant 5), speaking individually with the child, or wording sentences to convey disapproval with the behavior and not with the child.

Consequences for misbehaviors consists of four types of consequences revealed by child care educators' discourse: (a) asking the toddler to make amends (e.g., verbal excuses, hugs, cleaning up his or her mess), (b) giving consequences (e.g., a child cannot eat his or her snack if he or she refuses to wash hands), (c) intentionally ignoring the child who misbehaves, and (d) temporarily withdrawing that child. With regard to consequences, some features were mentioned, such as giving logical (i.e., associated with the toddler's actions) or natural (i.e., occurring naturally in response to the act) consequences and using a calm voice. With regard to temporary withdrawal, some educators referred to isolating the child in response to the misdeed, whereas others spoke of withdrawing the child while taking care of the one who was injured (e.g., bitten) or when the toddler repeatedly misbehaves.

In further analyzing these five practice domains and their related autonomy-supportive practices, we suggest that they indicate three different positions the adult may embrace when socializing toddlers. We have thus grouped these practice domains according to the child care educator's stance in relation to the toddler: a personal stance, a dyadic stance, or an overt educational stance. We offer here a brief overview, as [Figure 1](#) fully presents these stances. The first stance is a personal one, in which the child care educator *orients himself or herself toward the child* to eventually understand and respond to him or her. Next, the dyadic stance presents the educator when engaged in *collaborative* interactions with the toddler. Finally, with the overt educational stance, the educator is more actively but *respectfully structuring* the child's behaviors. The child is still somewhat involved in the interaction, but in a more receptive role.



**Figure 1.** The five autonomy-supportive practice domains organized according to the child care educator's stance in relation to the toddler.

## Discussion

The central goal of this study was to explore autonomy-supportive practices with toddlers ages 18 to 36 months. To this end, eight child care educators who, based on our assessment, appeared to value AS were interviewed. The qualitative analysis of the interviews revealed 18 practices these child care educators considered supportive of toddlers' autonomy. They were discussed in the contexts of intrinsic motivation (e.g., play) and internalization (e.g., clean-up time), two important processes in child development and socialization (Ryan & Deci, 2000b). These practices were grouped into five practice domains, which were then organized into three stances the educator may have in relation to the toddler.

In light of these findings, we propose that being supportive of autonomy is a threefold stance. First and foremost, it is a *child-oriented* personal stance, in which educators genuinely pay attention to toddlers' signals, try to apprehend them accurately, and use them to guide their responses. Second, it involves engaging in a *reciprocal and collaborative relationship* with the child. Educators do not establish a one-up/one-down relation with toddlers. Instead, they strive to foster a horizontal, cooperative climate. Third, AS is about considering the child as a *full-fledged individual*, granting as much importance to toddlers' reality and experiences as to one's own. The practices found in this study represent many means of actualizing AS with toddlers.

The eight participating child care educators, presumably not familiar with SDT, evoked practices similar to the traditional conceptualization of AS: providing a rationale and explanation for behavioral requests, acknowledging feelings and perspective, and offering choices and encouraging initiatives (Deci et al., 1994; Koestner et al., 1984). As our findings are in line with such practices, they offer further support for their validity and suggest that these practices are developmentally appropriate for a younger age group, namely, toddlers. Yet the study's results also widen the scope of AS, highlighting additional caregiving practices that may support the autonomy of toddlers. Indeed, respondents discussed practices such as adapting to the child, being available, and modeling, which capture what it means to be autonomy-supportive from their professional perspectives and perhaps their personal perspectives as well.

Like all of us, child care educators are part of a larger context that influences beliefs, interactions, and practices. Indeed, the sociocultural context shapes educational models and practices by establishing educational norms among diverse existing values and practices (Schultheis, Fraunfelder, & Delay, 2007). In Quebec, offering conditions for optimal child development, providing caring environments, and preventing child adversity are some prevailing societal values (Québec, 1991). Policies in turn tend to reflect these sociocultural messages regarding childhood education. Of particular significance is Quebec's educational program for child care services, a central reference document in child care educators' professional training (Québec, 2007). As we were unaware of child care educators' professional context during the interview protocol design and data analysis, we explored it further to better appreciate respondents' perspectives on AS. In a nutshell, this program promotes five basic principles grounded in attachment theory (Ainsworth, Blehar, Waters, & Wall, 1978), Bronfenbrenner's (1979) ecological model, and the active learning approach (HighScope; Hohmann & Weikart, 2002) as well as the democratic intervention style (Québec, 2007). The five basic principles suggest central caregiving guidelines: respecting each child's individualities, supporting his or her natural developmental tendencies, facilitating child development in all of its domains (cognitive, affective, motor, etc.), considering play as a main learning tool, and creating a collaborative and trusting relationship with parents to foster children's sense of security with educators (Québec, 2007).

When further exploring the interventions avenues advocated by this program and some of its key references, we discovered that several of them have similarities to our results (e.g., acquiring knowledge about each child, working with children's individualities, providing children with time and an adequate play environment, allowing choices and decision making, supporting initiatives, establishing steady routines and problem solving; Hohmann, Weikart, Bourgon, & Proulx, 2001;

Malenfant, 2014; Post, Hohmann, Bergeron, & Léger, 2003; Québec, 2007). It thus seems that our group of autonomy-supportive educators have brought some practices that are part of their professional context under the umbrella of AS, probably reflecting their internalization of these caregiving guidelines. In addition, we suggest that this correspondence also stems from conceptual similarities between AS and two basic principles of Quebec's program: (a) each child is unique, having his or her own individualities, developmental pace, needs, and interest; and (b) children are the primary agents of their development, with the majority of children's learnings stemming from their intrinsic motivation and active learning abilities (Québec, 2007). As can be noted, some facets of the program's caregiving philosophy bear a resemblance to the SDT perspective of AS: recognizing the child as active and self-directed and being responsive to his or her initiatives, ideas, and preferences. Such conceptual similarities probably facilitated the discussion of practices familiar to our respondents, which they personally considered autonomy supportive.

Some findings, however, were unexpected, in particular those concerning positive feedback and feedback and consequences for misbehaviors. These practices are more akin to the concept of *structure* than AS. In the parenting literature, *structure* refers to the provision of clear expectations, feedback, limit setting, and consequences regarding behaviors (Barber & Olsen, 1997; Grolnick & Raftery-Helmer, 2013). To our knowledge, behavioral interventions aimed at shaping desirable behaviors or decreasing undesirable ones are also part of child care educators' training (S. Major, *Petite enfance et famille: éducation et interventions précoces* program coordinator, Faculty of Continuing Education, Université de Montréal, personal communication, June 22, 2015). During interviews, respondents thus also spoke about some familiar structure practices, such as positive reinforcement, contingent attention, consequences, and timeout (e.g., Assa, 2002; Malenfant, 2014). As such interventions are not featured in Quebec's educational program per se, their place in educators' training and practice may have stemmed from the more general emphasis on behavioral interventions at the societal level (Kohn, 1999).

The design of the interview protocol can also shed light on such results. Participants were guided through five day care situations: free play, organized activities, clean up, lunch and snack time, and misbehaviors. This was intended to facilitate discussion of autonomy-supportive practices by means of familiar cues for child care educators. However, some of these situations can be seen as conducive to structure strategies, in particular misbehaviors, which may be thought as pulling for controlling methods (Grolnick, 2003). It thus appears that our interview protocol gave rise to a unique discussion about the close relationship between structure and AS. Indeed, this association was highlighted by some of the respondents during their interviews. This is interesting, as it may be more challenging to support autonomy in situations perceived as requiring greater authority, such as responding to misbehavior or lack of cooperation. Thus, we suggest that we had access to some of the respondents' structure practices, often with an autonomy-supportive twist. Some illustrations include engaging the toddler in a reflective discussion about his or her behaviors and asking him or her to make amends. These strategies can be seen as open to toddler input and self-direction. Moreover, positive verbal feedback, which was most salient in respondents' discourse, can be expressed in either a controlling or informational manner (e.g., Deci, Koestner, & Ryan, 1999; Henderlong & Lepper, 2002; Kast & Connor, 1988), the latter being more autonomy supportive. However, from the present results, we cannot clearly determine whether our autonomy-supportive respondents make such a distinction.

All together, these unexpected findings put forward the idea that an autonomy-supportive style does not imply permissiveness (i.e., lack of structure). Rather, it is about implementing rules, promoting appropriate behavior, and following through with consequences in a manner that is respectful of each child's feelings, ideas, and sense of volition. Indeed, structure can be provided in either an autonomy-supportive or a controlling manner (e.g., Grolnick et al., 2014; Reeve, 2006). Studies have demonstrated that providing structure in an autonomy-supportive way, as opposed to a controlling way, generally leads to better outcomes for children and adolescents (e.g., Grolnick & Ryan, 1987; Kast & Connor, 1988; Koestner et al., 1984; Mouratidis, Lens, & Vansteenkiste, 2010;

Sierens, Vansteenkiste, Goossens, Soenens, & Dochy, 2009). Moreover, recent studies looking at teachers' provision of AS and structure found those constructs to be both distinct and positively correlated (Jang, Reeve, & Deci, 2010; Sierens et al., 2009). In their study, Jang and colleagues (2010) found that both constructs uniquely promoted student engagement and concluded that to foster optimal student engagement, structure must be provided in an autonomy-supportive way. In sum, AS *and* structure are both needed for optimal outcomes in socialization relationships in which guidelines and supervision are involved, which is a reality also portrayed in our findings.

With regard to the larger literature on AS, some of our autonomy-supportive practices appear concordant with elements of the behavioral codifications of AS utilized in previous studies with toddlers, such as following the child's pace, making suggestions, and providing opportunities to make choices (e.g., Bernier et al., 2010; Laurin & Joussemet, 2015; Whipple et al., 2011). Moreover, some of the practices reported by our autonomy-supportive educators (e.g., attentively listening to children, engaging in perspective taking, offering choices) are in line with the parenting program based on Ginott's writings, "How to talk so kids will listen and listen so kids will talk" (Faber & Mazlish, 2010, 1980; Joussemet, Mageau, & Koestner, 2014), which includes numerous autonomy-supportive practices. Finally, Reeve and collaborators (1999; 2006) have observed the behaviors of autonomy-supportive teachers, and a number of their practices bear a resemblance to the present findings, such as allowing students to accomplish tasks in their own ways and giving progress-enabling hints (akin to scaffolding; Reeve, 2006; Reeve et al., 1999; Reeve & Jang, 2006). It thus appears that some of the autonomy-supportive practices revealed by our group of child care educators relate well to a number of existing practices in the youth AS literature.

### **Strengths, limitations, and future directions**

A methodological challenge encountered in this study related to rendering accessible to respondents the notion of AS (i.e., fostering self-determination). To foster common understanding, we used the term *supporting authenticity* in the interviews and provided an accessible definition that was found to make sense from respondents' points of reference: "*authenticity as the child being a unique individual who has a role to play in his learnings and development.*" These words we judged to be simple and meaningful, and they were found to be conducive to rich discourse. We would recommend the use of these words in future studies.

We identified three main limitations to the design of the present study. First, autonomy-supportive practices with toddlers were investigated through interviews and not through direct day care observations. Reporting one's own behaviors can sometimes be challenging, as people are not always fully aware of their own actions. Thus, some autonomy-supportive practices may not have been discussed by respondents. Second, the impacts of these self-reported practices on toddler outcomes (e.g., well-being, internalization of rules) were not investigated. Thus, it is not yet possible to assert the benefits of such practices for toddlers. Third, the child care educators' professional context may be seen as a possible confounding variable, as one may ask about the relative influence of this training versus the respondents' personal autonomy-supportive orientation on the present findings. Although respondents appeared to share a common professional training context, it was probably not identical. Indeed, there is heterogeneity in early child care training, which can be seen in day care centers (Major, 2014), and our respondents had studied in different recognized training programs and time periods, given their varied ages. Moreover, individuals integrate learnings into their sense of self to differing degrees as a function of the coherence between these teachings and their personal values and style. It is therefore likely that our group of autonomy-supportive educators spoke from both their professional context and personal styles.

Future studies on AS with toddlers could seek to replicate the present findings in another sample of child care educators to increase confidence in the results. This sample could include male educators, as all of our respondents were women. Replication studies could also be done among educators with different professional training in order to see whether common autonomy-supportive

practices would emerge. Methodological triangulation (e.g., interviews, classroom observation, self-reported questionnaires) could also strengthen and expand findings, allowing for deeper insight into caregiver autonomy-supportive practices and their influence on toddlers. Note that observation grids and self-report questionnaires could be inspired by the practices revealed by the present qualitative study, informing subsequent investigations of AS toward toddlers. Moreover, we suggest continuing the investigation of autonomy-supportive practices with child care educators and also with parents, as they may reveal additional and complementary practices. Finally, it would be informative to investigate how AS relates to other caregiving constructs, such as maternal sensitivity and cooperation with infant behaviors (Ainsworth, Bell, & Stayton, 1971; Bretherton, 2013; Mesman & Emmen, 2013), and to do so using longitudinal designs. Perhaps highly sensitive and cooperative educators are more likely to act in an autonomy-supportive way as infants grow into toddlerhood.

### Implications

The present study identified several caregiving practices developmentally appropriate for toddlers. All together, they contribute to a more comprehensive picture of the possible means of actualizing AS with young children, adding to both theoretical knowledge and practical applications of AS. With further support for their benefits with toddlers, such practices could also provide the basis for concrete recommendations for child care educators interested in promoting toddlers' motivation and functioning. Heightening educators' awareness of these practices could be achieved through workshops, for example. In a study by Reeve and colleagues (2004), high school teachers took part in a 1-hr information session workshop on AS and had access to an interactive website to assist them in applying the autonomy-supportive principles learned (see Reeve et al., 2004, for details). As empirical knowledge on autonomy-supportive practices with toddlers continues to grow, such a knowledge transfer strategy would be relevant to helping child care educators satisfy toddlers' basic need for self-determination.

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