

News You Can Use February 2007

Early Head Start: Mirroring the Early Parent-Child Bond for Infants and Toddlers

An infant coos and smiles as an adult speaks softly to him. A toddler makes eye contact and reaches for the adult, who gently nuzzles the toddler's ear and whispers to her. An adult rubs a crying infant's back to help soothe him, lulling him to sleep. These images illustrate the intimate and often intricate bonding and attachment experiences that happen between very young children and their adult caregivers in the earliest stages of development. Most people working in the early childhood community agree on one thing: early bonding and attachment between infants and caregivers is one of the most important elements of early childhood development. What the field has not always agreed upon is *how* to provide this secure base for infants and toddlers as they grow and develop. Early Head Start promotes the bonding between infants and their parents, but it also values building deep and meaningful relationships between staff and parents and caregivers and babies. These relationships between EHS staff and families mirror, and maybe model, the parent-infant relationship.

Studies of child care outside of Early Head Start sometimes pose questions that assume children are either with their parents or in child care. In an ongoing longitudinal study conducted in London, England by Penelope Leach and colleagues (2006), researchers found that young children ages birth to three who were cared for by their mothers fared better on developmental tests than those placed in group care, childcare centers or with relatives. The study showed that children placed in the care of someone other than their mothers were more aggressive, or more withdrawn, compliant and sad. It is important to note that this study was conducted on a population of families and children living in very different socio-economic, cultural and societal contexts than the families served in Head Start (HS) and Early Head Start (EHS). While studies such as this one can be distressing, they fail to address potential benefits from programs such as Early Head Start which can provide child care and be dedicated to supporting early relationships and social and emotional development.

There is a belief among many caregivers and parents of very young children that "mommy and daddy" care is best. However, this belief can cause added stress for parents who make the decision to place their young children in child care. Researchers often frame the question of child care as an either-or decision when, in fact, the issue for many parents in the United States is finding the child care situation that best nurtures their infant's or toddler's development, while simultaneously supporting the parent-child bond. The reality in the United States is that half of the children born in 2001 were in some form of regular nonparental child care by 9 months of age. Kreader, Ferguson and Lawrence (2005) found that 26 percent of these children were in relative care, 15 percent in nonrelative care, and 9 percent in center-based care.

Recent EHS and National Institute of Child Health and Human Development (NICHD) research reveals that there can be other caregivers who are also important in the lives of infants and toddlers. The results of the Early Head Start Research and Evaluation

Project (2006) show that children enrolled in the EHS program have better outcomes than children in similar situations, not enrolled in EHS. The research shows that by 3 years of age, EHS children performed better on cognitive, language, and social-emotional functioning than non-EHS children. EHS children also received more parental support for learning and experienced mothers with better mental health. The research shows that EHS programs that follow the Head Start Program Performance Standards (1996) provide the important, early attachment experiences necessary to support a child's healthy growth and development. The NICHD longitudinal Study of Early Child Care (1989) shows that children at 36 months had better school readiness and language comprehension scores, as well as fewer behavioral problems when recommended child/staff ratios and levels of caregiver training and education were followed (1999). The EHS and NICHD studies both reinforce the notion that well-trained caregivers working in quality early childhood programs actually provide additional support to parents of young children. When secure early bonding and attachment experiences can happen for infants and toddlers with more than one caregiver, very young children feel supported and cared for in all of the places they go. They also begin forming meaningful relationships with others as part of the natural process of development. For many years, EHS and Migrant and Seasonal Head Start programs serving infants and toddlers have provided an answer for parents struggling with this childcare dilemma. In this edition of News You Can Use elements of HS and EHS Center-Based, Family Childcare and Home-Based options will be highlighted as viable ways to support early bonding and attachment experiences between parents and very young children.

Early Head Start: An Answer for the Early Childcare Dilemma

HS and EHS program options meet parents where they are. HS and EHS program options are designed to meet the needs of the families in the particular communities served by programs. Regardless of the option, HS/EHS parents can be assured of a commitment to supporting parents and children in developing early attachment and bonding. Parents who use the Home-Based option have the unique opportunity of partnering with a home-visitor in the child's natural environment. Staff support families in building bonds with their children, helping them take advantage of rich relationship-building experiences through the major routines of the day, and offering opportunities to enhance these experiences through developmentally appropriate learning tools, materials, and toys. Socialization experiences give Home-Based parents occasions for interacting with their young children in groups, and forming informal networks with other parents of young children.

For working parents, HS/EHS Center-Based or Family Childcare options also support early relationship-building with both parents and caregivers while introducing the little ones to individual and group learning experiences. Center-based HS/EHS programs promote bonding and attachment between caregivers and very young children in many ways. Strong family partnerships, small teacher/child ratios, individualized care, and a safe and appropriate physical environment are all hallmarks of EHS programs and provide the atmosphere for healthy early care giving relationships to happen. Each independent element is crucial to overall infant/toddler development. Taken together, these aspects of the HS/EHS experience provide comprehensive support for infants and toddlers to thrive.

Most importantly, these elements encourage and support early relationships between parents and their very young children.

Strategies That Work

- **Strong family partnerships support the bond between parents, infants and toddlers.** Strong partnerships between HS/EHS staff and parents are important to promoting the bond between parents and their young children in two ways. A solid partnership between HS/EHS staff and parents allows for trust and sharing to occur related to the infant's or toddler's strengths and challenges at home and in the daycare setting. This ongoing exchange of information promotes individualized care and consistency in care giving routines in both settings, and this further supports the infant or toddler. Infants and toddlers who know what to expect in both settings are more likely feel more connected to the HS/EHS staff person *and* the parent. In addition, parents who have a trusting relationship with the staff person will be more likely to share home experiences and cultural practices, as well as link to other community partners (e.g. work, school opportunities for parents; services for very young children) who can help the family meet their goals and support the young child when and where needed. When parents are able to work towards meeting family goals their self-esteem is increased and they are strengthened as the primary nurturers of their families.
- **Small teacher-child ratios, primary caregiving, and continuity of care promote consistent daily routines.** The combination of these three elements work well together to foster early infant and toddler relationships with teachers and support parent-child attachment. The classroom guidelines for infants and toddlers require 1 teacher for every 4 children with a group size of no more than 8. The small teacher-child ratio allows the same caregiver to attend to the needs of each infant/toddler. Primary care giving happens when a small group of children are assigned to one caregiver. Having 1 continuous caregiver from the time of enrollment until the child is 36 months or transitions into another child care situation is the practice of continuity of care. Over time this practice helps to strengthen the early relationships that develop throughout the different routines of each day. Even in the absence of regular staff, qualified, familiar substitutes are used to fill spots to maintain this ratio. Through open communication and ongoing partnering efforts, parents and teachers support a child's transition between home and the classroom, and develop consistent daily routines (e.g., feeding and diapering). The quality of interaction between caregivers and very young children as they move through daily routines ultimately strengthens and allows early bonding and attachment to occur with both the caregiver and the parent. The following images offer simple examples of important ways that low ratios and consistent routines promote early relationships:

A mother demonstrates to a teacher how her baby likes to be held while drinking from a bottle;

A home visitor provides information and support for breast feeding;

A caregiver asks a father to observe the EHS protocol for diapering and asks if they should discuss how to make it more similar to what happens at home.

- **Individualized care allows caregivers and very young children to be in-tune with one another.** Small teacher/child ratios allow teachers and very young children to be in-tune with one another and, in turn, for individualized care to happen. By interacting daily with the same four infants and toddlers, teachers learn to accurately read cues and are able to predict the baby's interests and timing of routine needs. Infants and toddlers begin to anticipate responses to their needs, and learn what to expect from caregivers and the daily HS/EHS experience. At any given moment, some very young infants might be sleeping, while mobile infants eat, and toddlers play individually or in groups. By knowing and understanding each of the children and families, teachers are better able to provide meaningful and appropriate experiences for each of the children throughout the day. The partnership process with parents helps everyone know what to expect, and in turn enables parents, teachers and very young children to develop feelings of safety and security in the process. Parents are confident that their young children are being cared for as they would be if they were home, teachers feel competent and knowledgeable about the young children entrusted to their care, and infants and toddlers know that their needs will be met whether at home or in the group care setting.
- **Physical environment promotes infant and toddler exploration.** Mobile infants and toddlers who feel secure in their primary relationships and in their environment are more likely to explore their surroundings and learn about their world. The physical environment of the infant/toddler group care setting is conducive to learning and reflects the different developmental stages of each child. Group care settings are organized into recognizable areas by infants and toddlers, allowing for individual activities and social interaction when and where appropriate. Very young infants have quiet places to play and be held. Mobile infants and toddlers have floor coverings and cushions to sit on, and an open area on the floor for movement. Additionally, the block, creative writing, art and housekeeping areas are designed to accommodate young children who choose to play alone or in groups.

Conclusion

Parents and families are faced with many dilemmas when it comes to the care of their very young children. Difficult choices often must be made. However, HS/EHS programs continue to create conditions through which healthy early bonding and attachment experiences between infants, toddlers and caregivers can occur. In this sense, EHS programs do mirror the parent-child bond for infants and toddlers, and for many working parents and those in school, this is the “next best thing to being there.”

RESOURCES YOU CAN USE

References

Administration for Children, Youth and Families (2000). *Early Head Start*. Head Start Bulletin: Enhancing Head Start Communication. (69). Washington, DC: Head Start Bureau.

Kreader, J.L., Ferguson, D., Lawrence, S. (2005). *Infant and toddler child care arrangements*. Child Care & Early Education, Research Connections: Research-To-Policy Connections, 1, 2-5.

Leach, P., Barnes, J., Malmberg, L.E., Sylva, K., Stein, A. (2006). *The quality of different types of childcare at 10 and 18 months: A comparison between types and factors related to quality*. Early Child Development and Care. <http://journalsonline.tandf.co.uk/>.

National Institute of Child Health and Human Development (NICHD) Early Child Care Research Network (1999). *Child outcomes when child care center classes meet recommended standards for quality*. American Journal of Public Health, 89, 1072-1077.

U.S. Department of Health and Human Services (1996). *Head Start program performance standards*. Washington, DC: Head Start Bureau

U.S. Department of Health and Human Services (1998). *Family partnerships: A continuous process. Training guides for the Head Start learning community*. Washington, DC: Head Start Bureau.

U.S. Department of Health and Human Services (2006). *Preliminary findings from the Early Head Start prekindergarten followup*. Early Head Start Research and Evaluation Project. Washington, DC: Office of Planning, Research and Evaluation.

U.S. Department of Health and Human Services (2003). *Program performance measures: For Head Start programs serving infants and toddlers*. Washington, DC: Office of Planning, Research and Evaluation.

Family Resources

Child Care Aware
<http://www.childcareaware.org/en/>

Websites

Child Care and Early Research Connections

www.childcareresearch.org

Families, Children and Childcare Longitudinal Study

Principal Investigators:

Kathy Sylva, Ph.D.

Alan Stein, FRCPsych.

Penelope Leach, Ph.D.

www.familieschildrenchildcare.org

National Childminding Association

<http://www.ncma.org.uk/>

U. S. Department of Health and Human Services

Office of Planning, Research and Evaluation

Early Head Start Research Findings

http://www.acf.hhs.gov/programs/opre/ehs/ehs_research/index.html