Child care (0-5 years)

Table of content

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Synthesis on child care...........................................................................................................i

Child care and its impact on young children (0-2) (Revised edition)
Jay Belsky............................................................................................................................1-6

The impact of child care on young children (0-2)
Carollee Howes ...................................................................................................................1-4

Child care and the development of young children (0-2)
Margaret Tresch Owen .......................................................................................................1-6

Child care and its impact on children 0-2 years of age
Commenting Belsky, Howes and Owen
Bengt-Erik Andersson ........................................................................................................1-4

Child care and its impact on young children (2-5)
Lieselotte Ahnert and Michael E. Lamb .............................................................................1-6

Current research on child care effects
Kathleen McCartney .........................................................................................................1-6

Child care and its impact on young children’s development
Ellen S. Peisner-Feinberg ..................................................................................................1-7

Child care and its impact on children 0-2 years of age
Commenting McCartney, Peisner-Feinberg and Ahnert and Lamb
W. Steven Barnett .............................................................................................................1-5

Early childhood education and care systems in the OECD countries: the issue of tradition and governance
John Bennett ......................................................................................................................1-5

A comparative perspective
Rianne Mahon ...................................................................................................................1-6

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Synthesis on child care (0-5 years)

(Published online July 6, 2006)

How Important Is It?

The number of women participating in the Canadian labour market has increased substantially over the past 25 years. According to Statistics Canada, the labour force participation rate of women with children under three rose from 28% in 1976 to 63% in 2003. Similarly, the number of women with children between the ages of three and five increased dramatically, from 37% in 1976 to 69% in 2003.1

The need for non-parental care, or child care, has risen alongside the ever increasing number of women joining and returning to the workforce. In 1996-97, almost 2 million children under 12 years of age were participating in some type of non-parental care. Approximately 25% of infants under one and 46% of children between the ages of one and five were involved in some form of non parental care.2

Non-parental care or child care can be defined as the care of children in their home, someone else’s home or in a centre, where care and education are provided by a person other than an immediate family member. As child care programs vary in location and design, so do the levels of quality.

The provision of quality in child care centres is mainly determined by three factors:

- low child-adult ratios;
- highly educated providers with specialized training; and
- stimulating environments.

What Do We Know?

Studies examining the effects of early child care experiences on young children’s development investigate diversity in child care quality and differences among individual children and their families. Variations in the quality of child care are reflective of program practices, educators’ training and teacher-child relationships, whereas variations among children and families include socio-economic status, parent education, parent-child relationships, child temperament and choice of care.

Only a few studies have investigated the level of quality available in the United States and Canada, and even fewer studies have attempted to determine the level of quality needed for optimal development. These few studies suggest that the degree of quality needed for optimum development is high — higher than the average child care arrangements currently available in North America.

Evidence suggests that high-quality child care is associated with moderate gains in cognitive, linguistic and social and emotional development for children. Quality care is also associated with increased cooperation and compliance with adults and social
Synthesis on child care (0-5 years)

interactions among peers. On the other hand, participation in low-quality care, large
groups, long hours of care and instability within the care environment may have a
negative impact on early child development. Young children participating in this low-
quality care are at risk for insecure attachments and heightened behaviour problems.

Additional research demonstrates that:
• mothers’ sensitivity and responsiveness have a greater impact on early
  childhood social and emotional development than early care experiences;
• children enrolled earlier, before age 3, may experience higher levels of stress
  (worry) and antisocial behaviours;
• participation in high-quality child care may act as a protective factor for
  children from disadvantaged homes and increase their chances of academic
  success.

Family factors influence parents’ decisions on the use and type of care they select for
their children. Socio-economically advantaged families tend to choose higher quality
care for their children.

What Can Be Done?

Recommendations from researchers for child care policy focus on accessibility,
affordability and high-quality care for all young children. The likelihood of children
accessing quality child care is dependent on the material and social resources of
parents. If high-quality child care is positively associated with improved development
in young children and if all children are to benefit from their early experiences in
child care, the overall quality of care needs to be enhanced. Nevertheless, is quality
care enough?

Researchers have provided valuable information about the impacts of early care and
development, yet further longitudinal studies are needed to examine short and long-
term outcomes (i.e. “sleeper” influences) of child care and to evaluate which types of
child care should be promoted.

Additional recommendations include monetary provisions to support families with
infants and toddlers (extended and paid parental leave, child tax credits). In
Sweden, child care is included in the educational system and efforts to provide
quality care are ensured through state regulation. Family support also plays a large
role in the context of early care in Sweden. Family support includes, but is not
limited to, the parents’ ability to stay home when a child is very young (parental
leave, lasting for twelve months with 80% of the salary paid by the state) or ill
(same financial support as received from parental leave if a child falls ill during the
preschool years). These provisions greatly alleviate parental concerns regarding
child-rearing choices and care arrangements.

To ensure that all children receive the highest quality of child care, policies and
regulations need to promote and support:
• well-trained and educated staff;
• high staff-child ratios (plus attention to group size and composition);
• low staff turnover and good wages;
• quality of the curriculum and access to a variety of positive social
  relationships and experiences;
• quality of the care provider-child relationship;
• effective leadership.
All levels of government and the public need to take decisive action to assign responsibility for the provision of quality child care. Benefit-cost analyses regarding interventions provide wide margins for benefits over costs, suggesting that even small to moderate benefits from quality care are of sufficient value to warrant government regulation and financial support on behalf of all children.

References


Child Care and Its Impact on Young Children (0–2)

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Topic
Child care (0-5 years)

Introduction
Although few contemporary experts in child development view the first two years of life as a “critical” period during which the path of future development is determined, this stage of development is still regarded by many as being a “sensitive” period, during which trajectories are first established. Because developmental trajectories can be self-sustaining (if not impossible to alter), experiences that shape early development have important ramifications for both science and social policy. In particular, early rearing experiences are thought by many to play an important role in shaping early developmental trajectories, including non-maternal child-care experiences.1

Subject
Over the past 25 years, the United States has experienced major changes in rearing arrangements for young children. This transformation stems, in part, from changes in the roles women now play in society — especially changes in maternal employment at an early stage in children’s lives. Today, the majority of mothers in the U.S. who return to work after having a child do so before their child’s first birthday. Recent figures (from 1998–1999) indicate that 58% of all women with infants under one year of age are in the labour force.2 Comparable rates in 1970 and 1985 stood at 27% and 46%, respectively.3 Consequently, non-maternal care initiated in the first year of life has virtually become the norm for many children and their families.

Research Context
Much debate has surrounded what might be regarded as a core developmental question of the modern age: How does the early non-maternal child-care experience affect child development? Several views have been advanced, with varying degrees of empirical support.4-5 One view is that because development is largely shaped by genes rather than by experience, the effects of non-maternal child care, like the effects of care provided by mothers, will be rather minimal once a basic threshold of care that is “good enough” has been provided.5-7 Others have argued that when children spend a great deal of time in non-maternal care arrangements during the early years of life, they will be more likely to develop insecure attachments to parents and evince heightened, though by no means clinical, levels of externalizing problem behaviour (e.g. aggression or disobedience).8-10
Still others contend that it is not the amount of routine child care that affects development, but the quality of care — that is, whether non-maternal care-providers are attentive, nurturant and stimulating.11-13

Challenges
Sorting out these alternative perspectives has not been easy for a variety of reasons, most of which have to do with limitations in available research literature. To answer questions regarding early-experience effects, children would be randomly assigned to different rearing conditions. But this strategy is virtually impossible to implement, as few parents would agree to place their children with an unskilled caregiver for 40 hours a week beginning early in the first year of life, in the name of science. The alternative has been to study natural variations in child-care experiences and determine how such experiences relate to individual differences in children’s functioning. Since children receiving varying degrees of non-maternal child care, varying degrees of quality care or different types of care often come from families with varying characteristics, researchers must attempt to control for these kind of pre-existing differences before any inferences can be drawn about child-care effects. Such controls have not always been applied, or have only been considered to a limited extent. In addition, few studies have simultaneously examined the multiple features of child care, since most focus on the quality or type of care, thereby disregarding issues such as the amount of care provided or the age of entry into care.10

Recent Research Results
In the face of such challenges and the limits of past research, in the early 1990s, the American government initiated the largest and most extensive study of the effects of non-maternal child care ever conducted, called the NICHD Study of Early Child Care. (NICHD — The National Institute of Child Health and Human Development — a government funding agency). The families of more than 1,300 children (under one month of age) drawn from 10 different locations (though not representative of the U.S. population), were recruited in an intensive study of non-maternal child-care experiences. Extensive assessments of family characteristics were conducted so that family factors likely to create differences between children could be statistically controlled for prior to estimating the effects of child care. Repeated and extensive observational evaluations of child care quality were also conducted when children were 6, 15, 24, 36, and 54 months of age, along with assessments of the children’s socioemotional and cognitive development at these ages and into their primary-school years. Moreover, the amount of time spent in care and type of care experienced were repeatedly measured. This research design enabled the NICHD Study to move beyond simplistic debates about whether early child care is good or bad for children, to elucidate the conditions under which child care enhanced or undermined various aspects of development.14

Results to date reveal
1. that children are somewhat more likely to develop insecure attachments to their mothers by 15 months of age when they experience more than 10 hours of care per week in the first year of life, or more than one child-care arrangement across the first year, or low-quality child care and mothering that is relatively low in sensitivity,15 when attachment is measured again at 36 months, however, only the
amount of time in care through age three (i.e. >10 hours) continues to predict elevated rates of insecure attachment (when it coincides with low levels of maternal sensitivity);16

2. that patterns of mother-child interaction from six to 36 months are somewhat less harmonious when children spend more rather than less time in any kind of child care (irrespective of its quality), and that the same is true, though to a lesser extent, when children experience poorer- rather than higher-quality child care;16 when mother-child interaction is followed up through first grade, more time in care across the first 54 months of life continues to be a predictor of somewhat less harmonious patterns of mother-child interaction for whites and somewhat more harmonious patterns of interaction for blacks;17

3. that children evince higher levels of externalizing problems (as reported by caregivers, mothers and/or teacher) when they spend more time in child care across their first two, or first 4 1/2 years of life, irrespective of child-care quality, and that this is true when problem behaviour is measured at two years of age, 54 months of age, and in kindergarten and the first grade;18,19 this effect is no longer apparent, however, by the time children are in third grade, around the age of eight, though at this time, more time in care through the first 54 months of life is a predictor of less teacher-reported social competence and poorer academic work habits;20

4. that children who spend more time in child-care centres also evince higher levels of problem behaviour, even after taking into account time spent in any kind of child care, and this is so through third grade;19,20

5. that children who experience a higher rather than a lower quality of child care evince somewhat higher levels of cognitive-linguistic functioning at two, three, four and five years of age.20-24

Conclusions
In certain respects, all of the seemingly competing perspectives highlighted earlier pertaining to the question of the effects of child care have been supported in the NICHD Study and related research.1,5,10 First, placing children in an average non-maternal care facility for long hours does seem to be associated with some (modest) developmental risk, especially with respect to the mother-child relationship (through first grade for white children), problem behaviour (through first grade), and social competence and academic work habits (by third grade), and such outcomes are not merely by-products of low-quality child care. Second, in keeping with more than two decades of research, cognitive-linguistic development seems to be (somewhat) enhanced by high-quality child care. But third, in no case are these child-care effects, or those pertaining to the type of care (i.e. centre care associated with greater cognitive-linguistic competence and more problem behaviour), particularly sizeable in magnitude. Indeed, such effects are often dwarfed by the effects of family factors and processes (e.g. income, maternal sensitivity, maternal depression, paternal presence).

Implications for Policy and Services
The fact that a growing number of children seem to be spending more and more time at younger and younger ages in child-care arrangements that are often of questionable
quality suggests that even those effects of child-care quality, quantity, and type that are modest in magnitude should not be discounted. After all, small effects (be they positive or negative) on many children may be of far greater consequence to society than large effects on just a few. This said, the modest child-care effects detected in the NICHD Study and other research may not lead to immediate recommendations for any single family or child struggling with decisions about childrearing and child care. Nevertheless, from the standpoint of public policy, the NICHD Study results, along with those of other studies, provide grounds for recommending:

1. that parental leaves be extended (and preferably paid) to match the duration provided for in some Scandinavian countries;
2. that tax policies support families raising infants and toddlers in ways that afford parents the freedom to make the childrearing arrangements they deem most appropriate for their children, thereby reducing the economic coercion that pushes many to leave the care of their children to others, against their wishes;
3. that, given the clear benefits of high-quality child care, more of these services are called for. Indeed, all of these recommendations could be justified on humanitarian grounds alone.
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The Impact of Child Care on Young Children (0–2)

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Topic
Child care (0-5 years)

Introduction
Increasing numbers of children between birth and age 2 are now being placed in nonparental care during the day and work week, primarily due to increases in maternal employment. In the United States, between 1980 and 1998, the labour force participation rate of mothers with infants rose from 38% to 59%. In 1999, 44% of infants under 1 year of age, 53% of 1-year-olds, and 57% of 2-year-olds were in nonparental care on a regular basis. Research on early social, emotional, and cognitive development suggests that the short- and long-term consequences of care giving contexts are less dependent on the form of care (eg, maternal care versus other care) than on the quality of care. Therefore, to examine the impact of child care on young children is to examine issues surrounding the quality of care both at home and in child care contexts.

Subject
In order to examine the impact of child care on the development of very young children it is necessary to define child care and quality of care. Child care may simply be defined as nonparental care in a child’s own home, someone else’s home, or in a centre that can provide children with nurturance and learning opportunities that complement and/or supplement those provided at home. Child care can also provide support services for working parents and, in some cases, can contribute to reducing the number of children living in poverty, and provide respite care for children at risk of being harmed in their own families. Whether child care can enhance children’s social and emotional development depends on the quality of the care provided. Quality of care is defined not as the form of care (eg, in the home, or in a centre), but the provision of nurturing relationships, a stimulating environment, and basic health and safety.

Problems
Families with more material, social, and emotional resources tend to use higher-quality child care. In order to determine the influence of the quality of child care on development, quality of care within the family and in child care facilities must be measured. Moreover, there may be both short-term and long-term or “sleeper” influences of child care on children’s development. Therefore, measuring the impact of early care requires longitudinal research. Furthermore, since there are no critical periods in the influence of various environments, home, and wider community contexts on children’s
development, longitudinal research studies should use ecological models that measure influence over time. These are complex and expensive research protocols. Furthermore, although the structural aspects of child care (e.g., the formal education of the caregiver) do correlate with child care quality in the short term, since the structural aspects of care tend to be interrelated (caregivers with more formal education tend to care for only a few children at a time), there are no single indicators of quality in child care. There are few race, ethnicity, or home-language differences in the influence of quality on children’s development. However, the practices used to create quality in child care do differ in ethnicity and home language.

**Research Context**
Research studies on links between child care and development for young children are, of necessity, correlational rather than experimental. Furthermore, as more very-low-income parents join the low-wage workforce (due to changes in the global nature of work and in welfare policy), more very young children from very-low-income families are being placed in very informal child care contexts. There is scant data on the course of development for these children.

**Key Research Questions**
Important research questions in this area include the following:

4. What are the short- and long-term impacts of varying quality on child development?
5. Is the association between child care quality and child development different in children of colour or in families with very low incomes?
6. Does the age the child enters child care influence development?

**Recent Research Results**
There is a solid body of evidence linking child care quality to children’s concurrent development and an increasing body of literature regarding further long-term consequences. Such findings are consistent across studies and across families that vary in ethnicity, home language, and income level. Only a few studies have attempted to define the level of quality needed to be associated with optimal development. These studies, all conducted in licensed child care centers or family-child care homes, suggest that the threshold of quality is very high, much higher than the modal child care arrangement in the United States. However, when children do experience high-quality care, in some studies child care emerges as a protective factor for children.

Another body of research suggests that the age of entry into child care is not a risk factor, in and of itself. However, very early and extensive care in poor-quality facilities does emerge as disadvantageous. In addition to studies that link poor-quality care to less-than-optimal development, other studies have shown that extensive early child care may interfere with the development of harmonious mother–child interaction. For example, the NICHD Early Child Care Research Network found that infants and toddlers with more hours of care experienced less positive mother–child interaction.
Conclusions
Being in child care, cared for by an adult who is not the parent, does not need to be associated with less–than–optimal development in young children. In fact, it may be associated with enhanced development or even be a compensatory factor. However, in order to enhance development or serve a protective function, child care must be of sufficiently high quality. High-quality child care goes beyond being a safe place for children to include the provision of nurturing relationships and stimulating environments that organize and scaffold children’s learning. Whether or not a child experiences high-quality child care depends in part on the material and social resources of families. High-quality child care is in short supply, accounting for perhaps 10%–15% of all available care. But it should be noted that the quality of child care is not confounded with form of care — children can experience high-quality child care in a variety of settings. Nonetheless, there is very little information on the concurrent and longitudinal consequences for children who experience both very informal child care of low quality in combination with family poverty and mothers whose sensitivity may be impaired by their own difficult working conditions.

Implications for Policy and Services
If the influences of child care on the development of very young children is dependent on the quality of care they receive, it follows that the overall quality of care needs to be enhanced in order to enhance child development.
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Child Care and the Development of Young Children (0–2)

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Topic
Child care (0-5 years)

Introduction
Given the importance attributed to maternal care in cultural ideals\(^1\) and psychological theories,\(^2\) and the working role assumed by growing numbers of mothers with very young children, there has been widespread concern about effects of non-maternal child care for young children, and for infants in particular.

Subject
Rates of employment for the mothers of infants and preschoolers have tripled in the US since 1969. In fact, in the US, the majority (63%) of women with children under 3 spend time in the labour force and their children experience considerable amounts of nonmaternal care. Reliance on nonmaternal child care beginning in the first year of life has become normative.\(^3\),\(^4\) The number of weekly hours of paid employment among mothers has also grown, along with the number of hours of child care. In 1998, 32% of women with children under 3 worked full time throughout the year, compared with 7% in 1969. The very young children of nonemployed mothers experience child care on a regular basis too.\(^5\) Figures from the National Household Education Survey in 1999 indicated that 53% of 1-year-olds and 57% of 2-year-olds received regularly scheduled child care in the United States (according to tabulations reported in Shonkoff and Phillips\(^5\)). Are there systematic effects for young children whose care experiences take place with the first two years of life?

Problems
To understand the effects of early child care, we must address many facets of the care experience — the amount, type and quality of child care provided, the age at which care was initiated, and the stability or changes introduced regarding care and caregivers. Moreover, the effects of child care may depend on characteristics in individual children (especially child temperament and gender) and families (such as income, attitudes towards working, and quality of parenting). For example, longer hours of child care during infancy or more changes in care may be harmful for children with certain temperamental characteristics, but beneficial or benign for others. Measuring the effects of early child care must rely largely on non-experimental, correlational designs that disentangle the true effects of early child care from differences among the families who use child care services.
In the early 1990s, the National Institute for Child Health and Human Development initiated the NICHD Study of Early Child Care, a large-scale longitudinal study of children and their families. Children were monitored from birth to investigate the short-term and long-term effects of the child care experience by following a sample of over 1,200 children beginning at birth, from all over the United States. This study carefully examined the characteristics of the child care contexts chosen by the children’s families, the characteristics of the families, the children’s experiences within the family, and multiple domains of child outcomes over time (see NICHD Early Child Care Research Network for a comprehensive overview). The families were representative of the various local populations from which they were recruited. Most of the children experienced child care beginning early in their first year. Greater use of child care in infancy was related most strongly to family economic factors, but the mothers’ education, personality, and beliefs, as well as family size were also associated with child care use. A variety of types of care were used in infancy, including centre care, family child care, relative care, in-home care, and father care. Both low-income and high-income families had their children in higher-quality child care centers in infancy; higher-quality care in homes was associated with higher incomes.

Research Context
Recent research has emphasized the long-lasting effects of early environmental influences and their significance for emotional security, cognitive development, and learning skills. Indeed, the effects of child care need to be addressed by examining the nature of child care experiences and accompanying family experiences. Early research on the effects of child care has largely ignored selection biases, and such biases may still be undercontrolled in research. But attempts to disentangle family from child care effects may also lead to underestimating child care effects, given the reciprocal effects between child care and families. Thus, for the past decade, research into the effects of early child care for infants and toddlers has been based on an ecological model of development that addresses environmental influences in family and child care contexts in conjunction with child characteristics and how experiences in one setting may shape the effects of experiences in the other.

Key Research Questions
Widespread concerns about the effects of routine nonmaternal care in a child’s first 2 years of life have focused primarily on how such experiences may affect the developing mother–child relationship, but have also addressed effects on a child’s developing language and cognitive development, social competencies, problem behaviours, and peer relations. An additional focus has been the concern that parents may suffer a loss of influence over their children’s development when non-parental caregivers provide significant amounts of care on a daily basis.

Recent Research Results
Child care and the mother–infant relationship. The NICHD Study of Early Child Care is considered to be the most thorough investigation to date of the effects of child care on infant–mother attachment. Contrary to meta-analytic findings of the earlier literature that focused only on the effects of the amount of care provided without adequately controlling
for selection effects, the NICHD Study found that a number of features in the child care experience (the amount of child care, age of entry into care, and the quality and stability of the child care experienced) were unrelated to the security of infant–mother attachments or to an increased likelihood of avoidant attachments, except when mothers were relatively less sensitive in their interactions with their children. For these children, extended experience with child care, lower-quality child care, and more changes in child care arrangements were each associated with an increased likelihood of developing an insecure attachment with their mothers. The strongest predictor of security in the infant–mother attachment, regardless of children’s experiences with child care, was the sensitivity in a mother’s care of her infant (which includes a positive regard for her infant, responsiveness, and lack of intrusiveness or hostility), suggesting that it is the quality of mother–child interactions rather than maternal absence or child care experiences per se that determine the quality of attachment.

A recent study of Israeli infants has indicated that infants’ experiences with very low-quality centre care was associated with increased rates of insecure infant–mother attachment, regardless of the mothers’ sensitive parenting of their infants. The quality of care observed in the Israeli centres was generally poorer than that typically observed in the NICHD Study in the US, thereby enhancing our knowledge regarding the associations between the child care conditions and the mother–child relationship. Other evidence from the NICHD Study indicates that child care bears some relation to the mother’s abilities to respond with sensitivity to her child and the child’s positive engagement with mother in mother–child interactions. Mothers were somewhat less sensitive with their infants and their children were consequently less positively engaged in interactions with their mothers when they experienced more child care. But mothers were more sensitive when children were placed in higher-quality care. These subtle effects have not been found consistently across studies, but other studies have rarely tackled such a large and diverse group of young children with such careful controls, and have not observed mother–child interactions throughout the preschool years.

Some studies have found that nonparental care experiences appear to lessen links between parent–child relationships and child development. However, recent evidence from the NICHD Study and other studies have indicated that families continue to matter, and family influences are consistently stronger and more pervasive than the effects of child care in child development.

**Effects on cognition and language.** Positive associations have been consistently demonstrated between higher-quality child care and greater cognitive and language development in children’s first 2 years of life, even after taking into account associations with family selection factors, and other potentially confounding correlates, such as the cognitive stimulation received in the home, and a mother’s language abilities. In addition, more experience with centre-based care was found to be related to greater language development (more language production) at 15 and 24 months as well as better cognitive development at age 2, controlling for family factors as well as language stimulation in the care setting.
Effects on peer relations, compliance, and behaviour problems. Early child care experience is generally accompanied by greater exposure to peers at early ages and possible associated effects on early peer competencies. Indeed, more experience in child care settings with other children is associated with positive skills with peers in those settings but is also associated with caregiver ratings of negativity. The effect of child care on child compliance and behaviour problems has been controversial but fairly consistent. More hours of child care, care with multiple peers, and poorer-quality child care have each been related to heightened behaviour problems, beginning at age 2; higher-quality care has been related to 2-year-old children’s cooperation and compliance with adults and social interaction skills.

Conclusions
The positive linkages between child care quality and a variety of positive outcomes in the first 2 years are among the most pervasive findings in developmental science. Higher-quality child care (in the form of responsive and stimulating care) is associated with better cognitive and language development, positive peer relations, compliance with adults, fewer behaviour problems, and better mother–child relations. While there have been fewer consistent relations to different types of child care experiences, centre-based care appears to be beneficial to children’s cognitive development (although it may also be associated with problematic social relations). Unless child care quality is poor, or the mother is insensitive to a child’s needs, nonparental child care does not appear to undermine the security of the infant–mother attachment per se, but there are indications (in some conditions) that this relationship may be more vulnerable.

Implications for Policy and Services
Nonparental child care is experienced by a majority of young US children beginning at very early ages. The implications of research into the effects of child care clearly support the provision of high-quality care and parental access to such care. Poorer-quality child care may be harmful to children’s healthy development and relationships with their parents, while good-quality care appears to be beneficial to their development and relationships. Research implications regarding which type of care should be promoted and which type of care parents should choose for their infants and toddlers are not clear. Indeed, the benefits of centre-based care in the cognitive and language development of children, even when the quality of care is high, may be accompanied by problems in social development. The effects of child care are manifested in the first 2 years of life and can be given greater meaning by examining subsequent developmental outcomes in the context of child care and family experiences.
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Child Care and Its Impact on Children 0–2 Years of Age
Commenting: Belsky¹, Howes, and Owens

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Topic
Child care (0-5 years)

Introduction
Three highly respected researchers have written papers for the CEECD about child care and its impact on young children, aged 0–2. This topic has enjoyed vigorous debate among both the general public and researchers as a large proportion of mothers with young children are currently working outside home — some by choice, others, out of necessity. Most parents are therefore concerned with the following questions:

1. What should I do with my child when I am not at home?
2. Will it hurt my child if I work outside of the home?

These questions have occupied the minds of both scientists and parents for the past 50 years and no clear answers have emerged, to date. One author has been reviewing research in this area for a quarter of a century.¹⁻⁷ Looking back on the early years of research, parents were provided with information that was based more on theories than on scientific facts.⁸⁻⁹ According to these theories, separating a young child from his or her mother was deemed to be detrimental before age 3.

The researchers in a number of countries were not satisfied with existing answers to parents’ concerns, many studies were conducted to seek more definitive information. Despite their efforts, for a long time, there was no proof to substantiate the claim that day care either damaged or benefited children.

In the late 80s and early 90s, published data from Sweden showed that early experiences in day care could actually be beneficial to young children.¹⁰⁻¹³ Results were contrary to most expectations, American researchers in particular were forced to embrace a more ecological view of day care. It was no longer a question of supporting day care or not. Nor was it simply a question of the age at which a child could be placed in child care. In order to understand the differences in results between American and Swedish research, it was necessary to take other variables into consideration. The reputed high quality of

¹ Comments on original paper published by Jay Belsky in 2003. To have access to this article, contact us at cedje-ceecd@umontreal.ca.
Swedish day care was cited by American researchers to explain the differences in results. However, there are other likely explanations, which I will discuss later on.

**Research and Conclusions**

Most research has been conducted with very small groups of children who have been followed for only a few years. Unfortunately, there are serious problems with this kind of research. First, when working with small investigation groups, it is difficult to know anything about how the results gathered may apply to the general population. Second, it is impossible to say anything about the long-term effects of child care.

In an effort to overcome these problems, a large-scale research project was undertaken by the National Institute of Child Health and Human Development (NICHD). The study follows 1,274 mothers and the development of their children who have experienced various kinds of child care. Each child has entered child care early in life. Data has been published up to the age of 4½–5 years. Twenty-five of the United States’ most recognized researchers are participating in this study — a very impressive team. Other research projects have also involved significant numbers of subjects. For example, one study followed 733 children from ages 4 to 8 and another monitored 414 children, from 14 to 54 months of age.

Two of the authors — Belsky and Tresch Owen — rely heavily on data from the NICDH Study in their papers while Howes also relies on other sources. Their conclusions are relatively similar. All concur that early day care experiences can be positive for children’s cognitive and linguistic development. On the other hand, the quality of interaction with their mothers may be jeopardized by low-quality care and extended periods of time spent in care. Belsky in particular stresses these points and cites a noteworthy, albeit modest, developmental risk. This position is congruent with his earlier writings. However, Belsky’s warnings of developmental risks are far less rigid in this paper than in previous papers.

All three authors agree that high-quality child care is important, but none of them attempt to define what high-quality might mean.

Indeed, these papers comprise some problems. For one thing, the authors rely solely on American studies. Thus, we learn nothing about what child care can mean for children’s development in countries that have chosen to support families in other ways and with other kinds of child care. In Sweden, for instance, child care is regarded as part of the educational system from the first years of life, and employees are preschool teachers with three-year university training or child minders with a vocational three-year training. The Swedish system thereby ensures a high level of quality in child care.

Another problem is the short follow-up period in the studies cited by the authors. Even if some of the children showed some behaviour or disciplinary problems after spending time in child care, we know nothing about how long-lasting these effects may be. Furthermore, some effects may manifest themselves years later. These sleeper effects may be positive or negative.
In my own studies, I found that positive effects on social development did not show up until the early teenage period, when they were very substantive.

**Implications for Policy and Services**

The authors all stress the importance of increasing the quality of child care. Belsky also recommends that other steps (e.g., expanding parental leave and introducing tax policies conducive to good-quality, affordable child care) need to be taken. I fully agree with these recommendations, but would add some further suggestions, based on my experience regarding the Swedish system.

In Sweden, the concept of family support has a broad connotation. One important aspect of it is that parents should be able to stay home with their children when they are most in need of a mother or father at home (i.e., when the child is very young or ill). Therefore, parental leave (with 80% of the salary paid by the state) lasts for 12 months. In addition, it is possible for one parent to stay home if the child falls ill during the preschool years, while receiving the same payment he or she would for parental leave. This means that parents can feel confident and relaxed about the care of their children and therefore be better parents at home. It is also worth noting that medical care is free for children, along with a number of other measures.

Some readers may ask: “Can we really afford to spend so much money on our children?” My answer is as follows: Either we spend this money now or we will have to spend ten times as much to take care of all of the problems a bad family support system will create later on.13
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Child Care and Its Impact on Young Children (2–5)

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Topic
Child care (0-5 years)

Introduction
Through the ages and across cultures, nonparental assistance with child care has been an enduring norm. All over the world, children typically live with and are cared for primarily by their parents but also receive care from extended family members, neighbours, friends, and paid care-providers. In industrialized countries, increased reliance on paid child care, often provided by publicly subsidized child care centers, has fostered intense research over the past 20 years on the effects (both positive and negative) on children’s health, cognitive capacity, adjustment, and social relationships. Although there is consensus that parents remain the most important influences on children’s adjustment, it is equally clear that nonparental care can also have a substantial impact.

Subject
The nature and extent of public support for nonparental care facilities varies depending on whether or not
1. the lack of child care is considered necessary to promote women’s participation in the labour force
2. child care is viewed as a public responsibility or private concern
3. child care is viewed as a social welfare program or an early educational program.

Within any culture, moreover, a variety of family circumstances, multiple types of nonparental child care, and the complex effects of temperamental differences among children all ensure that child care in and of itself is unlikely to have clear universal effects, either positive or negative. As a result, researchers have focused on the nature, extent, quality, and age-of-entry into child care, as well as how the combined impact of these factors affects children from different family backgrounds, with different educational, developmental, and individual needs.

Problems
Students of early development have typically sought to explain the impact of parental care on child development and have only attempted more recently to consider the impact of nonparental care. According to attachment theory, for example, successful early socio-
emotional development depends on the development of trusting relationships (attachments) with a few reference figures, such as parents. Attachment theorists initially proposed that continuous care was necessary to build and maintain those primary attachments, and that such attachments also influence children’s emotional regulation and social behaviours, even later in life. Infant–parent attachments are formed in the first year of life and thus attachment theory has particular relevance to infant care practices, which are not the focus of this article.

According to many theorists, child care may also be problematic for toddlers and preschoolers. Because nonparental child care necessarily disrupts the continuity of access to primary attachment figures, first of all, it can damage primary attachments and thus hinder socio-emotional development. In addition, many theorists argue that unrelated care providers are, on average, not as committed to their child care responsibilities as parents would be. Sociobiologists further argue that quality of care is a function of the degree of relatedness between care providers and children, such that the poorest quality of care should be expected from unrelated care providers, including paid teachers, babysitters, and nannies. A much more positive view of child care has been advanced by cognitive theorists who stress the value of well-designed stimulation and instruction on the mental and communicative development of children.

Research context
Despite a voluminous body of literature on the effects of early child care, the big picture is often ambiguous or unclear. In part, this confusion underscores the need to focus, not only on children’s experiences when they are in nonparental care facilities, but also on other aspects of the broader ecology, including the intersection between parental and nonparental care. For example, children in child care have different experiences at home than do children who only experience parental care. Thus, research must determine whether differences between children at home and children who also attend child care settings are attributable to their experiences in care or to their different experiences at home. Research must also seek to improve the clarity of the findings by conducting meta-analyses that summarize the results of multiple smaller studies, or by carrying out multi-site studies with large numbers of participants (NICHD Early Child Care Network, CQOS Cost Quality and Outcome Study).

Key research questions
Researchers have explored the effects of child care on many aspects of development, although research on cognitive and language development (especially in the context of compensatory educational programs) and social-emotional development has been of greatest interest. Scholars and politicians who question the value and appropriateness of child care have been particularly interested in determining whether children can maintain supportive relationships with their parents when they attend child care centers. Meanwhile, those who value child care emphasize the need to develop good relationships with care providers and socialize with their peers to take full advantage of the enriching experiences at their disposal. Such a view would also suggest that stimulating care at home is valuable or necessary and should be born in mind when studying the effects of educational strategies and programs for infants, toddlers, and preschoolers.
**Recent research results**

Whether or not children in child care develop and maintain good relationships with their parents depends upon parents’ ability to provide sensitive care at home. Furthermore, it is important that parents establish a balance between home and child care settings, and that they themselves continue to provide types of intimate interaction seldom available in child care centers. Long hours in child care and stressful parent-child relationships are associated with angry aggression in preschool children, whereas good relationships with care providers help minimize behaviour problems and aggression. Care providers, of course, are able to develop significant relationships with children but the quality of those relationships depends on the care providers’ behaviour towards the group as a whole, rather than on the quality of interactions with individual children. Indeed, the emerging relationships between care providers and children reflect the characteristics and dynamics of the group whereas infant–parent attachments seem to be influenced more directly by dyadic interactions. From age 2 on, children are able to interact more extensively with peers. Such encounters provide excellent opportunities for learning the rules of social interaction: how to evaluate social offers, to conduct dialogues, and most importantly, to resolve conflicts with peers constructively.

Despite contradictory earlier findings about the effects of child care on cognitive and linguistic development, more recent research has revealed the enduring and positive effects of high-quality child care — even on school performance. Almost all children (not only those from less stimulating home environments) can benefit cognitively, especially when they enjoy positive relationships with their care providers.

**Conclusion**

Do children in child care develop differently from those without child care experiences? In the past, many scholars worried that nonparental child care might be risky for children and thus sought to determine whether children in child care were as well adapted as children cared for exclusively at home. This line of research was somewhat surprising in light of the striking differences between parental and nonparental care contexts. Only recently have researchers begun to explore the advantages of good-quality care and its potential benefits for children. In particular, child care offers opportunities for more extensive social contacts with peers and adults, and thus may open an extended social world for children. Positive child care experiences may also enhance later educational opportunities, such that those experiencing early nonparental care are better able to benefit from education, adjust to routines, and resist conflicts. Nevertheless, home remains the emotional center of children’s lives and it is important that supportive parent–child relationships not be harmed by child care experiences even when children spend considerable amounts of time in care.

**Implications**

Because children can profit from experiences in nonparental child care, child care needs to be of good quality and should provide access to a variety of positive social relationships. To ensure that care environments are developmentally appropriate, however, adult–child ratios in child care must be kept low. Group size and composition also need to be considered as mediators of the quality of individual care provider–child relationships. It is also important that regulations and informed parents ensure and
demand the highest possible quality of care. Because minding the children of others (in groups) requires different care strategies than parental care, providers’ care giving activities need to be supported by society, well compensated, and enriched by serious and careful education or training.
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Current Research on Child Care Effects

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Topic
Child care (0-5 years)

Introduction
Child care may be defined as care for young children, provided by adults who are not their parents. Informal child care by relatives, nannies, or home care providers typically takes place in a home setting (either the child’s home or the adult’s home), while formal care by trained and untrained caregivers takes place in school or care centre settings.

Subject
Child care is now an ordinary part of life for children in most western countries. More than half of infants are placed in some form of child care for at least ten hours during their first year of life, and more than three-quarters of families with young children depend on child care as a support for maternal employment. Formal child care can also provide early childhood education. In fact, child care, nursery school, and preschool programs are often indistinguishable in their activities.1

Problem
The rapid increase in maternal employment over the past 25 years has led to an increase in reliance on child care for young children, from birth to 5 years of age. This increase represents a dramatic shift in child rearing styles, and has prompted concerns as to whether child care poses any risks to healthy child development.

Research Context
There have been three waves of child care research. The first wave focused on simplistic comparisons between children in child care and children in exclusive maternal care. There were two problems with these studies: Researchers could not draw definitive conclusions about child care effects, because these two groups of children differ in myriad ways; and child care was treated as a uniform experience. The second wave focused on variations in child care quality and controlled statistically for pre-existing differences among families. The third wave has extended this research by modeling how the family and child care contexts jointly influence child development.

Key Research Questions
Four questions have driven research on child care over the past ten years. Chief among them is whether extensive child care in the first year of life disrupts the mother–child
attachment relationship. For example, theorists\textsuperscript{2} hypothesized that daily separations might cause infants to lose confidence in the availability and responsiveness of their parents and reduce opportunities for interactions. The second area of inquiry concerns the impact of variations in child care quality on children’s development, especially with respect to school readiness skills. The third question focuses on hours in care as a risk factor for behaviour problems, such as aggression. The fourth area of inquiry concerns the effects of the types of care that have been examined.

**Recent Research Results**

*Mother–Child Attachment*

Early studies yielded mixed results regarding whether early, extensive child care posed a risk for the development of secure attachment relationships. For this reason, the National Institute of Child Health and Human Development launched their Study of Early Child Care and Youth Development, a longitudinal study of 1,350 children, from birth until the sixth grade. To assess children’s attachment relationships with their mothers, the investigators used a procedure called the Strange Situation, which consists of a series of separations and reunions between the baby and mother in the presence of a stranger.\textsuperscript{3} All children experience stress during separations. However, secure children are soothed by their mothers’ return. Associations between security and five child care parameters were examined, namely age of entry into child care, continuity of care, type of care, quality of child care, and amount of care. None of these associations were significant. Not surprisingly, maternal sensitivity predicted children’s security status with their mothers.

**Child Care Quality**

Child care quality can be assessed via structural features of the child care setting. For example, child–staff ratio, group size, and caregiver education and training. These kinds of variables are policy relevant, because governments can and do regulate child care programs. For example, a ratio of 3 or 4 infants to 1 teacher is generally accepted to be a quality threshold in western countries. Child care quality can also be assessed based on observations of behaviours that reflect positive interactions between children and their teachers as well as peers. In quality centers, teachers are sensitive and responsive to children’s needs, offer a language-rich environment, organize activities that promote development, and encourage children to behave in pro-social ways.

In advanced, controlled studies, the effects of differences in family background among children are controlled statistically in an effort to isolate the importance of child care. Results from a large number of studies demonstrate that child care quality matters. In fact, the importance of child care quality is one of the most robust findings in developmental psychology. Children who experience high-quality child care have higher scores on achievement and language tests, show better social skills and fewer behavioural problems.\textsuperscript{4} Child care can also function as an intervention for children from at-risk families. Children from families with fewer economic resources who attend quality programs begin school with skills that can increase their chances of academic success.
Hours in Child Care
Although the literature is mixed, there is increasing evidence that hours in child care may constitute a risk factor for the development of behaviour problems, including aggression. Some researchers link such a risk with infant child care in particular; however, other researchers have failed to replicate this finding, even when using the same data set. The NICHD researchers found that the more time children spend in any of a variety of non-maternal care arrangements across the first 4.5 years of life, the more acting-out problem behaviour (ie, aggression and disobedience) and conflict with adults they manifested at 54 months of age and in kindergarten. Surprisingly, these findings do not vary as a function of child care quality. It is important to qualify that the effects are relatively small; that most children with extensive child care experience do not have behaviour problems, and that the direction of such effects is not clear — in other words, parents with more difficult children may enrol their children in child care for more hours. In future work, it will be important to identify the processes through which hours in care may pose a risk. For example, some researchers have speculated that large group sizes (exposure to many peers) may increase the frequency of acting out behaviours that go unnoticed, and therefore uncorrected, by caregivers.

Type of Care
There are both disadvantages and advantages associated with formal arrangements, like child care centers. There is consistent evidence that more formal arrangements with more children pose a health risk. Children attending center care and child care homes have higher rates of early communicable illnesses, including ear infections, upper respiratory illnesses, and gastrointestinal illnesses. More formal arrangements also promote school readiness skills.

Conclusions
The main conclusion regarding child care is that its effects are complex and vary primarily as a function of the quality of care provided. In other words, whether child care poses a risk to children, protects them from disadvantaged homes, or promotes good developmental outcomes depends on the quality of care. There is some indication that individual differences among children with respect to characteristics like temperament, curiosity, cognitive ability, and gender influence how children experience child care, although more research is needed on these variables. In most studies, family variables are typically better predictors of children’s development than are child care variables. Indeed, the effect of child care often depends on family factors. For example, quality child care may buffer the negative influence of maternal depression with respect to children’s social and emotional development. Families making decisions about child care arrangements should be heartened by the knowledge that, when all is said and done, it is the care they provide to their children that matters most.

Implications
Quality child care programs promote children’s intellectual, language, and social development. Yet most children do not have access to high-quality programs because their parents cannot afford the fees. Researchers continue to voice concerns that most child care settings do not meet standards for quality. For example, in the NICHD Study of
Early Child Care, 56% of settings were observed to be of poor quality.\textsuperscript{11} Evidence of poor quality is hardly surprising, given that child care staff members are typically untrained and receive poor wages. Social policy efforts aimed at improving child care quality are underway in most western countries. Efforts range from teacher training to stricter regulations to subsidized programs, especially for children from families with fewer economic resources. For these programs to be successful, governments must be willing to invest in the early education and care of young children. Cost–benefit analyses suggest that these investments will result in better school performance in years to come.\textsuperscript{12}
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Child Care and Its Impact on Young Children’s Development

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Introduction
As the labour force participation rates for mothers of young children have risen over the past few decades, so has the use of child care, including both child care centres and family child care homes. A substantial majority of young children now regularly experience child care prior to their entry into school: rates of care for preschool-aged children are now higher than for infants and toddlers. Recent estimates indicate that nearly two-thirds of all 3- to 5-year-old children in the United States attend some form of regular child care prior to kindergarten. Given these high child care usage rates, both parents and professionals have sought to understand the impact of these experiences on children’s cognitive and social development.

Subject
Because children’s outcomes are influenced by the multiple environments they encounter, including both family and child care settings, there has been growing interest in research about the effects of child care experiences on children’s development. Moreover, the reported average quality of child care in the US falls short of the standards recommended by early childhood professionals, leading to concerns about how the quality of such environments affects children’s development. Coupled with the widespread interest in promoting children’s school readiness skills, a number of research studies have examined the extent to which variations in the quality of preschool child care experiences influence children’s cognitive and social skills during the preschool years, during the transition to school, and into the elementary school years. Examination of the quality of child care has weighed a variety of factors, including classroom practices (eg, materials, activities, daily organization), teacher–child relationships (eg, teacher sensitivity, warmth and closeness of the relationship with the child), and teacher qualifications (eg, education and training levels).

Problems
One difficulty with examining the impact of child care quality is the issue of family selection factors. Families choose the child care they use, and families with differing characteristics may choose different types and quality of care. In particular, studies have suggested that socio-economically advantaged families tend to choose higher quality care
for their children.\textsuperscript{7-10} Therefore, it may not be possible to completely separate the developmental effects of child care quality from the effects generated by family factors. While more recent studies have adjusted statistically for these family selection factors, they may underestimate the effects of child care quality when the two are highly correlated.

A second difficulty in this area of research is the need for longitudinal studies which also include varying levels of child care quality and representative samples of adequate size in order to examine the longer-term effects of child care quality on children’s development. While a few studies do exist (most notably, the National Institute of Child Health and Human Development Study of Early Child Care; and the Cost, Quality, and Child Outcomes in Child Care Centers Study), the expense and complexities of undertaking this type of research limit the availability of such data.

**Research Context**

Evidence regarding the effects of preschool child care on children’s development has been derived from two distinct areas of research — early intervention programs for children at risk, and typical community child care. Whereas several studies have explored the longitudinal effects of early intervention programs, few have examined the effects for children attending community child care programs as they make the transition from preschool to elementary school. Several studies of early intervention programs have found long-term positive effects on children’s cognitive development and academic achievement that last until the third or fourth grade, and even longer into adolescence and adulthood for broader indicators of school success, such as retention in grade, special education placement, total years of education, and intellectual functioning.\textsuperscript{9-15} These early intervention programs were generally high quality, very intensive, model demonstration programs, and while these studies clearly show lasting positive effects of providing such programs in the preschool years, they do not reflect the typical experiences of most children in child care.

A second area of research has examined the effects of the typical community child care programs utilized by families, which may vary widely in the quality of experiences provided. More specifically, substantial research literature has developed over the past two decades examining the effects of preschool child care quality on children’s cognitive, social, and emotional development. Research studies have included child care programs selected from those existing within the local communities sampled, as opposed to the model demonstration programs included in the early intervention studies. The strongest evidence has been gathered from studies examining the effects of child care quality after controlling for differences in child or family background characteristics, such as socioeconomic status, maternal education, family structure, gender, or ethnicity, with a view to allowing for differences related to both the selection of child care and to children’s outcomes.
Key Research Questions
Major research questions in this area include the following:

1. Is the level of child care quality in preschool related to children’s cognitive and social development?
2. How long are the influences of child care quality evident?
3. Are there differential effects of child care quality on developmental outcomes for children from different backgrounds?

Recent Research Results
Studies have been conducted in the US as well as other countries, including Canada, Bermuda, and Sweden, to examine the issues around the effects of child care quality on children’s development, both in the short-term, during the preschool years, and over the longer-term, into elementary school. The studies reported below have examined the effects of child care quality after adjusting for family selection factors, in order to disentangle the relations between the selection of child care of a particular quality or type and the effects of the child care itself.

Although there are relatively few longitudinal studies, several studies have found positive associations between child care quality and children’s cognitive development and social competence during the preschool years. These studies suggest that children who attend better quality child care during the preschool years demonstrate better cognitive and social skills during this time period, after accounting for differences in family background characteristics that are also related to children’s development.

A few studies have addressed this issue longitudinally for preschool-age child care, examining the long-term influences of child care quality on both cognitive and social development. Some studies have found modest, positive associations between preschool child care quality and children’s school-age cognitive skills. Fewer long-term associations have been found for social development, although some studies have found that better quality preschool child care is related to more positive behaviour and fewer problem behaviours in the early elementary school years.

Although most studies have found influences of child care quality on children’s outcomes, a few have found little effect for either cognitive or social development during the preschool years, as well as over the longer-term, into elementary school. The absence of effects in these studies may be accounted for by sampling issues in some cases (restricted ranges of child care quality and/or relatively small sample sizes) or by the outcomes measured in others (eg, very low-frequency behaviours such as social withdrawal).

Another issue of interest is whether the effects of child care quality are stronger among some groups of children, such as those who may already be at greater risk for less optimal development. Only a few studies relating child care quality to preschool children outcomes have examined this question, and fewer have followed children into elementary school. The findings in this area have been mixed, with some evidence of stronger effects for children at greater risk during the preschool years and school-age years.
although these differences were not found consistently for all outcomes studied. In contrast, other studies have found no differential effects of child care quality for children at greater risk. Given the likelihood that children at greater risk may be in lower-quality care, however, this issue merits further consideration.

**Conclusions**

The research evidence supports the contention that better quality child care is related to better cognitive and social development for children. While these effects of child care quality are in the modest to moderate range, they are found even after adjusting for family selection factors related to both the quality of care and to children’s outcomes. Numerous studies have found short-term effects of child care quality on children’s cognitive, social, and emotional development during the preschool years. Longer-term effects lasting into the elementary school years have also been found, although fewer longitudinal studies have been conducted to examine this issue. Moreover, these results indicate that the influences of child care quality are important for children from all backgrounds. While some studies have found even stronger effects for children from less advantaged backgrounds (suggesting that this issue may be even more critical for children already at greater risk for school failure) the findings indicate that children from more advantaged backgrounds are also influenced by the quality of care.

**Implications**

As a whole, these findings suggest that policies which promote good quality child care during the preschool years are important for all children. Other research suggests that good quality care is expensive to provide; it is associated with well-trained and educated staff, high staff–child ratios, low staff turnover rates, good wages, and effective leadership. Given the high cost as well as the relative paucity of good-quality care, consideration needs to be given to both the availability and the affordability of care. The most successful policies will need to take all these factors into account, so that good quality care is a realistic option for all children. Given the high usage rates of child care during the preschool years, such an investment would seem to be an important path to explore in improving children’s readiness for and success in school.
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Child Care and Its Impact on Children 2–5 Years of Age
Commenting McCartney, Peisner-Feinberg, and Ahnert and Lamb

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Topic
Child care (0-5 years)

Introduction
McCartney, Peisner-Feinberg, and Ahnert and Lamb have surveyed research on the hopes and fears that have emerged as formal child care has become the norm in many nations around the globe. The greatest hope has been that child care may significantly improve the lives and development of young children, especially those most at risk of poor outcomes. The greatest fear has been that child care may disrupt parent–child relationships and damage children’s social and emotional development. Typically, the change in child care arrangements is attributed to the movement of mothers into paid work outside the home. However, even children whose mothers are not in paid employment now commonly participate in similar arrangements.

In this way, we see that child care has two purposes:
1) Enabling parents to work and conduct other activities away from their children
2) Providing education and social activities for children.

Demand for both has driven changes in care; and attendance in school-like programs for much of the day is now nearly universal in some countries as early as age 3.

Research on child care is largely conducted and published in sub-specializations, each with its own perspective, as reflected in the reviews. McCartney describes child care research as evolving in stages; from simple comparisons of children in and out of care to analyses of the effects of quality — controlling for family characteristics — to examinations of the joint influences of child care and family contexts. Peisner-Feinberg categorizes research according to its focus on
1) Interventions seeking to improve education and development, or
2) Ordinary child care available to the general population.

Ahnert and Lamb tend to focus on children’s relationships with parents, other caregivers, and other children. The fragmentation of research by specialization limits the clarity of conclusions from their review. Yet, all of the authors recognize the need for research to become more multidisciplinary and to encompass the broader social ecology if it is to
increase our understanding of the effects of child care on development.

**Research and Conclusions**

The authors of these reviews identify as a primary goal of their research the production of estimates regarding the effects of variations in child care experiences on children’s language, cognitive, social, emotional, and physical development, and well-being, both concurrently and projected in the future. The dimensions of experience they cite as important include age of entry, hours in care, type of caregiver and setting, and quality. Quality has been defined in terms of both process (activities) and structure (teacher characteristics, class size, etc.) and is poor to mediocre in many countries. The effects of variations in care are not expected to be uniform; rather, it is expected to vary with the characteristics of the children, their families, and the broader social contexts in which they live. Indeed, researchers have come to view child care and home experiences as being jointly determined.

Overall, the research gives us reason to hope and has allayed some major fears. Nevertheless, these particular reviews raise questions about whether we can expect only modest cognitive and social benefits which may be at least partially offset by modest negative effects on social behaviour and health. In my view, a more optimistic assessment of the potential of child care to improve development is called for based on a somewhat broader review of the research, with a greater emphasis on education.

To date, the immediate and lasting positive effects of quality care on language, cognitive development, and school achievement have been confirmed by converging findings from large, reasonably representative longitudinal studies and smaller, randomized trials with long-term follow-ups. Contributors to this knowledge base include meta-analytic reviews of interventions and large longitudinal studies conducted in several countries. Null findings in cognitive and social domains in a few studies may reasonably be attributed to the limitations inherent to their designs, samples, and measures. Benefits were most often found for quality center care, and further research is warranted on the effects of other types of care. Teacher quality and group size are important contributors to quality, according to findings in the broader education literature. Results are mixed regarding the extent to which the benefits derived from the quality care are (at least in some domains) may benefit disadvantaged children more than other children — but such findings would be generally consistent with results from intervention and education studies.

There is also sufficient research to conclude that child care is not a serious threat to children’s relationships with parents or to children’s emotional development. Maternal sensitivity is much more important than child care experiences with regard to attachment; and parental influence is largely relative to that of child care. However, accumulated evidence shows that increased hours in child care are associated with increased problem behaviours. The NICHD study confirms this association and such findings are not mediated by quality. A recent and even larger study of preschool centres in England produced somewhat similar results: children who started earlier had somewhat higher levels of anti-social or worried behaviour — an effect reduced but not eliminated by
higher quality.\textsuperscript{19} In the same study, an earlier start in care was not found to affect other social measures (independence and concentration, cooperation and conformity, and peer sociability), but was found to improve cognitive development.

Selection bias is a potential problem for most studies of child care as it may confound variations in child and family characteristics with variations in child care contexts. In research relating child care to behaviour problems, selection bias is especially worrisome as causality plausibly runs in the opposite direction. Children with higher levels of anti-social behaviour may be enrolled for longer hours due to parental avoidance or their hope of thereby ameliorating their children’s problems. In such cases, true experiments are particularly valuable. A randomized trial of Early Head Start found that a treatment group received more hours of care and had fewer behaviour problems in the preschool years.\textsuperscript{20} Other experimental preschool studies have found lower rates of behaviour problems, conduct disorder, delinquency, and crime into adulthood among subjects placed in child care earlier in life.\textsuperscript{9,21}

**Implications for Policy and Service Development**

All of the papers find that quality of care is frequently low, the primary reason being the relatively high cost of quality. For example, teacher quality is a compelling influencing factor in overall quality and its benefits for children — a factor that is also highly dependent on compensation.\textsuperscript{22} Parents appear to have difficulty affording or perceiving the need for quality care. Nations vary in the extent to which quality child care is viewed as a government responsibility to be supported by regulation and public funding.\textsuperscript{5} Since support for education is widely regarded as an appropriate government function, it would appear that some nations still have an inadequate appreciation of the educative role of child care. Benefit–cost analyses regarding interventions provide wide margins for benefits over costs, suggesting that even small to moderate benefits from quality care are of sufficient value to warrant government regulation and financial support on behalf of all children.\textsuperscript{23,24}

A comparison of results between randomized trials of interventions and other studies of child care raises concerns that non-experimental studies may produce results that are overly pessimistic.\textsuperscript{9} More specifically, selection bias may well lead to an overestimation of negative effects regarding social behaviour. Poor educational practices and a lack of concern with curriculum may lead to an underestimation of the potential benefits of quality care across all domains of development. An educational approach to child care has been found to strongly affect socio-emotional development, for example. But child care studies have not adequately examined how pedagogical and intervention-oriented improvements might ameliorate outcomes.\textsuperscript{25} Randomized trials are needed in which population, child care and context characteristics can be systematically varied and measured, in order to untie the knots that limit clear conclusions for policy and practice.
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Early Childhood Education and Care Systems in the OECD Countries: the Issue of Tradition and Governance

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Topic
Child care (0-5 years)

Introduction
The series of policy analyses carried out by the OECD Education Directorate from 1998-2006 show that the organisation of early childhood systems is extremely varied across the rich countries. Yet, distinctive patterns of governance emerge from this diversity. The following text will briefly describe two traditional approaches to system governance, namely, through integrated (one ministry or agency in charge) or split management. The adoption of one or other approach says much about how early childhood is understood in a country, and the relative value given by governments to policy-making, funding and regulation in this field.

An abridged history
For historical reasons, national policies for the “care” and “education” of young children have developed separately in most countries. To summarise a complex situation that took various forms across different countries: from at least the 18th century, many European cities had established child care institutions for abandoned or endangered young children. These institutions – often religious or charitable in nature – took care of children from poor or dysfunctional families. In the 19th century, a further development took place: the nation states began to establish 'infant schools' for young children prior to their entry into school, e.g. Sweden from 1836, France in 1881. The purposes of the two institutions were different: child care was viewed as an exercise in social protection while infant schools were educational in purpose, founded to provide an early education opportunity.

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aThe OECD countries are essentially the richer countries in the world. They are 30 in number – situated mainly in Europe but also in North American (Canada, Mexico and the United States) and Asian/Pacific region (Australia, Japan, Korea and New Zealand).
bDr. John Bennett was project leader of the recent OECD early childhood reviews of early childhood policy, with responsibility for organising the reviews in each country, collecting country information, and for publishing the country reports. He is also co-author of the two Starting Strong volumes, the first with Dr. Michelle Neuman (United States) and the second with Professor Collette Taylor (Australia). At present, he is chief researcher for the OECD Starting Strong country network: bennett.paris@gmail.com. The opinions expressed in this text are his own and should not be attributed to the OECD or to the OECD Starting Strong Network.
c The term 'infant school' is a misnomer. Care services, in fact, catered for infants or babies (from the Latin: infans, a child without speech) as well as for older children, while the 'infant school' typically enrolled young children 4-6 years.
CHILD CARE (0-5 YEARS)

for the children of the more affluent classes and/or to introduce the official national language and culture to children speaking a second language or patois. With the emergence of the modern state and the extension of its responsibility for young children, care services were assigned to health or social ministries, and the 'infant' or junior schools to ministries of public instruction or education. This splitting of responsibility has remained the de facto governance situation in many of the OECD countries.

Unlike most other countries, the Nordic countries further developed their early childhood systems in the immediate post-Second World War period. From the 1950s, a growing number of women began to access the labour market in these countries, with in consequence, a growing demand for child care services. As both infant schools and the original social care services were administered at local level, local administrations – for the sake of efficiency - combined these services, generally under the responsibility of social affairs. A new integrated sector emerged, administered at national level by the ministry of social affairs. A parallel development also took place in the same period in the Soviet zone of influence, with countries integrating children's services, often under the ministry of education. More recently, other countries have followed suit. Influenced by a growing concern to give form to the notion of lifelong learning, Iceland (1976), New Zealand (1989), Spain (1990), Slovenia (1993), Sweden (1996), England and Scotland (1998), Norway (2005) and Netherlands (2007) have brought early services into the ambit of education, with more or less success depending on the country.

Consequences of split system governance
In split systems, responsibility for services is divided among several ministries. This fragmentation of responsibility seems to be based more on traditional divisions of government than on the actual needs of families and young children. In the US, for example, the US General Accounting Office noted that in 1999, 69 federal programs provided or supported education and care for children under 5. Nine different federal agencies and departments administered these programs, though most were operated by the US Department of Health and Human Services and the US Department of Education. In general, across the OECD countries, differences of auspices and conceptualisation are translated into a two-tier organisation of services: ‘child care’ for the younger children followed by ‘pre-primary education’ for three, four or five-year-olds. The result is often a fragmentation of services and a lack of coherence for children and families. Care and early education institutions differ greatly in their funding requirements, operational procedures, regulatory frameworks, staff-training and qualifications.

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4In the US, a strong move toward the integration of services can be seen during the last decade. In May 2004, Georgia created an integrated governmental Department of Early Care and Learning to take in charge more effectively the State’s varied early childhood services. Similarly, in April 2005, the state of Massachusetts merged the Department of Education’s Office of School Readiness with the Massachusetts’ Office of Child Care Services into a consolidated office for early education and care. In 2006, Washington State brought together, under a newly created Department of Early Learning, several ECEC services, including Head Start, child care, state-funded preschool, and a small early reading program. In addition, several integrated governance structures (e.g. governors’ cabinets for children, public/private governance boards, inter-agency councils) have emerged to make ECEC policy and oversee its implementation.
Child care services, in particular, suffer from this division of auspices. They tend to be less developed in terms of coverage, and in some countries, the child care field is a patchwork of private providers and individual family day care services. Affordability to parents is often an issue, and as a result, low-income groups are often excluded from access to centre-based services, unless government financed targeted services are available. Frequently, staff – almost exclusively female – have low educational qualifications and wages, and may not be given employment contracts or insurance. In the area of private provision, a current trend is for smaller services to be bought up by larger commercial companies, some of which lobby for greater deregulation of the field.

A further fragmentation of child care services can be seen under governments that see early care as a private responsibility for parents, and not as a public responsibility. This has often been the approach in the liberal market economies (of the countries reviewed by the OECD: Australia, Canada, Ireland, Korea, the Netherlands, the United Kingdom and the United States). These countries generally acknowledge governmental responsibility for pre-school education from the ages of 3-5 (depending on the country), in particular for children from disadvantaged or ‘at-risk’ backgrounds. In contrast, care arrangements for children under 3 are considered to be a parental responsibility, and (depending on income, and/or the need to stimulate the labour market participation of women) parents may or may not be assisted to purchase child care in the market place.

In order to enhance the integration of early childhood services for children from birth to six years, the OECD Starting Strong reviews made the following suggestions to governments concerned to provide a more coherent system of early childhood services to working parents:

- To establish a co-ordinated policy framework for young children at centralised and decentralised levels
- To nominate a lead ministry for young children that would be responsible for overall policy, while working in co-operation with other departments and sectors
- To adopt a collaborative and participatory approach to reform
- To forge strong links across services, professionals, and parents in each community

**Integrated services**

Countries that integrate their services under one ministry or agency generally achieve more co-ordinated and goal-oriented services of a higher quality. In the Nordic countries, for example, municipal authorities ensure delivery of integrated services either directly or through contracted providers, who must follow public regulations and quality requirements. Highly subsidised services are widely available to parents. Pedagogues, educated to tertiary level, staff the early childhood centres, and enjoy employment.

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*It should be noted that different degrees of public involvement with families and young children exist in the liberal economies. For example, in the UK, although private provision and market competition in the child care sector have been maintained, government strongly subsidises access to child care for young children from working families, and plans to regulate the quality of this care as rigorously as public sector provision.*
contracts and remuneration roughly equivalent to primary school teachers. Services in the Nordic countries have so far avoided the weaknesses of the public early education systems of the liberal economies, which, because of their close connection with primary education, often practice very inappropriate child-staff ratios and are unavailable on a full-day, all-year basis. Thus, the Nordic countries that have transferred responsibility for early childhood services to education ministries — as was the case with Norway (2005) and Sweden (1996) — continue to practise low child:staff ratios that favour individual attention from pedagogues and the agency of the child.

Conclusion
The type of governance structure in place strongly influences the coverage and quality of early childhood services within a country. Split systems often mean a weakly regulated child care sector and a “junior school” approach to early education. In the child care sector, the quality of the learning environment is often poor because of weak state guidance and low staff qualifications and work conditions. In parallel, in split systems, the early education sector may be directed toward academic goals and be characterised by high child:staff ratios and a neglect of the child's natural learning strategies. Even in countries in which strong efforts are being made to improve quality in both the child care and early education systems, for example, in Belgium Flanders, the legacy of the past is difficult to overcome. The integrated systems of the Nordic countries seem to offer a more balanced approach to care and education. These countries provide affordable and comprehensive networks for all families needing services, and their approach to child development and learning is respectful of the young child's age, strengths and needs.
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Child Care Policy: A Comparative Perspective

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Topic
Child care (0-5 years)

Introduction
Growing recognition of the importance of child care has brought with it increased acknowledgement of the need for some form of government support. Yet, just as the reasons behind the growing demand for child care vary, so too do the forms of government involvement. Comparative analysis of these patterns of choice can contribute to the identification of best practices.

Subject
Decades of comparative research have led to a general agreement on the basic requirements for a good system of nonparental child care and recognition that the establishment of such a system requires government support. Comparative policy analysis shows that a few countries, like Denmark and Sweden, come close to the ideal. In other countries, there are real “islands of excellence” (e.g. Emilia Romagna in Italy). Yet many systems offer substantially less than this and recent developments suggest that the trend is not necessarily one of progress toward the ideal.

Issues
There is quite widespread agreement within the research community on the following core issues:

1. The system should be accessible. No child should be excluded on the basis of income, parental employment status, place of residence, or formal citizenship. Yet in many systems, access is a problem as there are insufficient spaces and fees represent a barrier to quality child care for many families.

2. The program should be high quality. Numerous studies have documented the importance of quality child care in the form of a healthy, safe, and stimulating physical environment; appropriate staff:child ratios; and a pedagogical program that recognises the child as an actor in the here and now. This requires public investment, not only to deal with affordability, but also to provide well-educated staff who will receive fair wages.
3. The program should be comprehensive. While promoting universal accessibility, the system also needs to recognize the diversity of needs, including respect for the cultural and linguistic diversity of the population. This too requires government involvement. The achievement of these goals, in turn, depends on the establishment of an effective governance structure to meet the challenges of integration, coordination and local diversity.

**Research Context**

Initial comparative research on child care policy was carried out under the auspices of the Organisation for Economic Development and Cooperation (OECD) in the 1970s. Additional applied policy research was conducted by the important, but short-lived, European Commission Network on Childcare in the 1990s, as well as the OECD’s more recent initiatives. In the 1990s, academic interest in the topic spread beyond experts in early childhood development as feminist students of the welfare state drew attention to the challenges posed by the growing “care crisis.” A separate line of investigation has highlighted the development of “global care chains,” that is, the recruitment of women from the global south (or Eastern Europe) to provide child care in the homes of families in Western Europe and North America.

**Research Questions**

What are the diverse ways that governments shape the scope and quality of nonparental child care arrangements? How have different countries responded to the governance challenges? Finally, to what extent have governments turned to recruitment through global care chains to meet the growing demand for child care?

**Research Results**

The early research conducted under the auspices of the OECD highlighted the need to integrate *day care*, a service originally provided for children whose mothers needed to work to sustain family incomes, and *kindergarten*, preschool education usually for children 3 to 6 years old, often on a part-time basis and, in many countries, largely available to upper-income families. By showing the need to combine the two, these studies highlighted the need to meet the demand created by women’s rising labour force participation by providing programs of quality, service to the developmental needs of the child, and quantity. Not all systems were designed to achieve this, however. The studies identified three patterns of provision: (a) The laissez-faire approach, characterised by the co-existence of several systems, partially age-related, with auspice often proprietary or voluntary, typical of the Anglo-American countries; (b) the dual system, based on an age break (crèches for infants and toddlers, preschools for those 3 years old to school-age), typified by France and Italy; and (c) the coordinated system, then being pioneered in the Nordic countries.

The various ways different countries combined (or failed to combine) education and care continued to be a focus of research within the early child development literature. Until the 1990s, those interested in broader patterns of social policy tended to ignore child care, focusing instead on social insurance and cash benefits. Feminist researchers, interested in
issues of gender equality began, however, to call attention to the social policy challenges posed by the growing need for child care.\textsuperscript{6, 7, 8} National responses were divided between male-breadwinner and female-friendly regimes, with the latter more inclined to take an active role. Mainstream welfare regime research subsequently picked up on the issue, focusing on the way in which child care policies reflected broader assumptions about the respective roles of states, markets and families.\textsuperscript{a, 9}

The welfare regime literature added two key points. First, this research showed that the ways countries deal with the demand for child care tend to reflect broader assumptions about the respective roles of states, families, markets and the voluntary sector. Second, by locating child care within wider welfare regimes, it showed that state involvement in this field is not limited to countries where the public sector plays a key role in financing and provision. All states have an impact on the respective roles played by the state, the family, the markets, and the community sector. In some, they work to support a market for care via information provision and corporate and individual tax deductions; in others, policies that might include generous family benefits, long parental leaves and part day or part week preschool, favour parental care.

Research Gaps

There has been some research on governance models, well-reflected in the OECD’s \textit{Starting Strong}, which focused specifically on the importance of coordinated policy development at the central level and the coordination of central and local levels to balance equity and diversity objectives.\textsuperscript{11} While recognising the critical role to be played by development of a coherent national framework, Peter Moss’s recent work also highlights the importance of a degree of local autonomy and capacity for making child care centres “sites of democratic practice.”\textsuperscript{12} Thus far, there has been less attention to this important aspect by students of welfare states, but there is growing interest in the way that different central-local (or, in federal states, such as Canada, central-provincial-local) arrangements affect governance of the child care sector.\textsuperscript{13, 14, 15}

Understandably, comparative research on child care policy has focused on national systems of provision. Yet globalisation is having an impact on child care policy, notably through the development of global care chains. This aspect has received even less attention internationally, with the partial exception of North American researchers, conscious of the critical role played by low wage earning immigrants in providing affordable child care within the home.\textsuperscript{16, 17} Recent research suggests this practice is not confined to “liberal” Anglo-American countries. In Western Europe the combination of immigration policies and new forms of support for in-home child care is actively promoting recruitment of migrant care providers.\textsuperscript{18} While this may provide an inexpensive solution to the growing demand for care in the North, it creates a different set

\textsuperscript{a} Esping-Andersen’s typology focuses on three systems: (a) liberal (programs targeted at low income, at-risk, or other families added, at best, via individual or corporate tax deductions), (b) conservative corporatist (support for at-home care), and (c) social democratic (public financing and provision of universal child care). For an alternative classification, see 10.
of care issues in the South, where children are left with grandparents or other kin while their mothers provide care for children in the North.\textsuperscript{19,20}

A second globalisation issue is the growing influence of international organisations on this field. The OECD has recently undertaken two substantial studies, one under the Directorate for Employment, Labour and Social Affairs (\textit{Babies and Bosses}) and the other under the Education Directorate. The World Bank, UNESCO and the European Union have also shown growing interest in the issue, as have international foundations such as Soros, which is playing an important role in Eastern Europe. Further research needs to be done on the diverse policy solutions being purveyed, from the more instrumental (child care as a means to promote women’s labour force participation) to the rights-centred view articulated by UNESCO.

Finally, work inspired by poststructuralist theorists challenges the developmentalist perspective that has contributed to a standardised view of quality that is heavily reliant on quantitative indicators. This new line of research highlights the importance of “complexity and multiplicity, subjectivity and context, provisionality and uncertainty.”\textsuperscript{21} As such, it underpins an open, dialogical conception of quality that is very much in line with the pedagogy practiced in Reggio Emilia.

\textbf{Conclusions}

Specialists in early childhood education and care largely agree on the main features of a good, high quality, inclusive child care system. The establishment of such a system depends, however, on effective government support. This is where the comparative analysis of child care policies, drawing on interdisciplinary research tools and concepts, can make a contribution. Early systems of classification of policy patterns highlighted the important question of whether existing policies fostered the development of an integrated system of early childhood education and care. More recent research, informed by the work of sociologists and political scientists, has helped to locate child care within the wider set of relations governing the respective roles played by states, families, and markets.

\textbf{Implications}

Comparative analysis of child care policies can help to identify best practices and some of the institutional and political impediments to their adoption. It is important, however, that such research does not restrict its focus to the national level. Arrangements governing the respective roles of national and local governments constitute an important component of the governance structures, limiting or enhancing capacities for overall coordination as well as for adjustment to local needs. In addition, researchers need to direct their gaze beyond the national level, and include analyses of the ways in which global inequalities combine with national migration and welfare regimes to shape a global care chain.

\textsuperscript{21} In Canada, Alan Pence’s work has been very important in this regard.
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