

SUPPORTING INFANTS, TODDLERS, AND THEIR FAMILIES  
TRANSITION FROM HOME TO GROUP CHILD CARE

by

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## Abstract

Recent social changes, such as an increase in female participation in the workforce and various non-traditional family compositions have resulted in a greater demand for group child care for infants and toddlers. These trends have rapidly developed in Canada, and this raises the question as to how early childhood educators can provide quality care for this group of young children. The goal of this project is to highlight the importance of successful and positive transitions from home to group child care for infants, toddlers, and their families. Two theoretical perspectives frame this project: Attachment theory (Bowlby, 1969) and Social Ecological Systems theory (Bronfenbrenner, 1979). In this project, I review the literature on the transition process that infants, toddlers, and their families experience from home to group child care. I also provide early childhood educators and child care program managers with suggestions on how transitions to group child care for infants, toddlers, and their families can positively occur. These suggestions draw from both the literature and my own experiences with young children and their families.

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## CHAPTER ONE: INTRODUCTION

As an early childhood educator who predominantly works with infants and toddlers, I have reflected on whether early childhood educators are prepared to support infants, toddlers, and their families in the adjustment process to their group child care settings. Bushnik (2006) revealed that over the past several years in Canada, there has been a significant increase in infants' and toddlers' enrolment in group child care, including the number of hours they spend in these child care centres. Bushnik (2006) added that due to increased enrolment, questions need to be addressed on the quality of child care in these contexts.

The rise of female participation in the labour market over the past three decades has dramatically influenced young children's early learning experiences. It has resulted in caregivers outside of a child's familial network assuming a more prominent role in a child's life. The employment rate of mothers in Canada whose children are under the age of three was 64.4% in 2009, more than double the 27.6% in 1976 (Statistics Canada, 2011). Despite this increase of working mothers, there are still a limited number of child care spaces available for young children in Canada. In 2011 in British Columbia, there were only 4,788 spaces in group child care for the 69,200 mothers whose youngest child is under two years of age (The Coalition of Child Care Advocate in BC, 2011). This new societal demand raises questions and concerns as to how we can provide quality care for young children in all areas of development (e.g., physical, cognitive, and social/emotional). Even though all developmental domains are closely linked, a particular child may develop at different rates in any of these domains (B.C. Ministry of Health, 2011). This reality requires that early childhood educators understand the unique needs of each infant or toddler.

In response to these recent questions and concerns, the following question guides this project:

i) How can early childhood educators support infants, toddlers, and their families as they transition from home to group child care?

This question addresses the importance of ensuring positive experiences for infants, toddlers, and their families when they begin their group child care arrangements, and focuses on the well-being of the entire family.

### **Rationale**

Each September, my classroom in a group child care centre is filled with anxious infants, toddlers, and parents. This period is quite stressful for the children who are experiencing an out-of-home environment without their primary caregivers for the first time. In addition, parents often experience feelings of guilt when leaving their child in a child care setting, and may also feel overwhelmed with the professional demands and expectations of returning to the work force (Stearns, 2004). In my role as an early childhood educator, I try to support and assist the children and their families by making their transition to group child care as positive as possible.

This project will focus on infants and toddlers who are in the sensorimotor stage, and who are transitioning to group child care settings. It is important to note that infants and toddlers have different needs when compared to older children. Piaget (1952) conceived cognitive development from infancy to adulthood into four stages; sensorimotor, pre-operational, concrete operational, and formal operational. During the sensorimotor stage, infants and toddlers expand their knowledge through trial and error with their sensory perception and motor activities. At this stage, infants and toddlers are also developing attachments with their primary caregivers which enable them to feel secure in exploring the world (Waters, Crowell, Elliott, Corcoran, & Treboux, 2002). According to Sroufe (2003),

children in this stage need sensitive and responsive primary caregivers in order to develop secure-based attachments. Infants and toddlers who experience secure-based attachments during their early years are more likely to have better social and cognitive outcomes in their later lives (Sroufe, 2003).

DeGraffenreidt, Gransmick, Grafwallner, and O'Malley (2010) conceived child development into five closely linked areas: physical, social, emotional, cognitive, and language. They argued that children are born with tremendous potential and capacity for learning across all developmental domains. For example, the progress a child makes in one area affects the progress he or she makes in another area. Not one area of child development is more important than another, which emphasizes the importance of a well-balanced nurturing environment. Although many children follow similar patterns of development, developmental stages vary between each child, as well as within a child, due to different domains. In other words, each child needs to be seen as a unique individual (B.C. Ministry of Health, 2011).

The differences in infants' and toddlers' development have inspired me to learn more about the importance of transitions for children as they move from home to group child care. In this capstone project, it is my hope that early childhood educators will thoughtfully reflect on the importance of providing a developmentally appropriate and nurturing environment for infants, toddlers, and their families as they begin their first group child care experiences.

### **Theoretical Framework**

This graduating project is framed by two theoretical backgrounds. The first theory is attachment theory (Bowlby, 1969) which helps us understand infants, toddlers, and their families in terms of their bonding experiences. Infants and toddlers have a natural tendency to develop attachment with their primary care givers. Even though infants or toddlers respond differently to their caregivers (Bernier & Meins, 2008), in general, secure-based attachment is



positively correlated to their social and emotional development, as well as their learning (Bowlby, 1969). Several studies (Bohr & Tse, 2009; Schore, 2001; Sroufe, 2005) have also addressed the notion that the formation of attachment in young children's early lives has a direct correlation to their future self-reliance, emotional regulation, and social competence. In fact, developing attachment requires a lengthy amount of time and a dedicated effort by new care givers (Bowlby, 2007). For these reasons, developing attachment is the most crucial emotional milestone for children in this age group.

Social ecological systems theory (Bronfenbrenner, 1979) also provides insight into children's development from a sociocultural perspective. This theory acknowledges the ways that children are positioned within their families, child care settings, neighbourhoods, and the broader society, and how this impacts their development. This perspective is based on four different levels: microsystem, mesosystem, exosystem, and macrosystem. The microsystem represents the immediate settings or people which directly impact a child's development, such as his or her family, child care, neighbourhood, and peers. The mesosystem refers to the relationships between microsystems and the people who belong to them (e.g., relationships between parents and teachers). The exosystem addresses how social structures (e.g., a parent's work environment, mass media) impact a child's development and experiences through interactions with the microsystem. Lastly, the macrosystem describes the child's world in terms of geography and the government policies that impact the child's everyday life. Based on this theory, the different systems impact each other; therefore, when discussing quality child care for young children, it is important to consider and understand how these interconnected systems impact a child's growth and development.

These two theories have commonalities in terms of viewing development as interaction between many different variables and a child. This concept can be seen as the transactional theory (Sameroff, 2009). This theory explains that developmental outcomes are

shaped by constant interplay of nature and nurture within the context of the environment. Environment transacts occur at two different levels: proximal influences which affect the child closely (e.g., family interaction) and distal influences which affect the child less directly (e.g. parent unemployment). Based on this theory, group child care settings are one of the most influential environmental transacts when considering developmental outcomes among children in modern society.

### **Significance**

Even though there is an increasing demand for child care for infants and toddlers, there is very little empirical evidence available with respect to the well-being of infants and toddlers in quality child care programs (Cryer, Wagner-Moore, Burchinal, Yazejian, Hurwitz, & Wolery, 2005). In terms of human development, the first three years are the cornerstone for future success (Sroufe, 2005); thus, it is crucial to conduct more research in this area for improving their well-being and developmental outcomes.

This graduating project is guided by a review of the literature that addresses the unique needs of infants, toddlers, and their families who utilize child care. This project also provides guidelines that may assist in developing positive transitions for infants and toddlers from home to group child care settings. The literature review in this project focuses on studies that have examined the transition process for infants, toddlers, and their families to group child care settings. It is my belief that this project will enable parents, early childhood educators, and other professionals to be more conscious of the needs of infants and toddlers in relation to their transition process from home to group child care.

### **Project Outline**

In this chapter, I shared my position as an early childhood educator who has supported infants, toddlers, and their families as they transitioned from home to group child care. I have explained the challenges that are often linked to this transition period for families, as well as

the lack of evidence available in relation to the well-being of infants and toddlers in quality child care programs (Cryer et al., 2005). In chapter two, I further explore the theoretical frameworks that are guiding this project and I present the current research on children's and families' experiences in group child care. In chapter three, I connect the findings in the previous chapter with practices that can be used by early childhood educators and program managers. Chapter three also includes strategies and resources that may be useful for early childhood educators who are working with infants and toddlers. Finally, in chapter four, I share my final thoughts and suggest future steps for research with respect to infants and toddlers in group child care settings.

## **CHAPTER TWO: LITERATURE REVIEW**

In this chapter, I draw on the two theoretical frameworks outlined in chapter one - attachment theory (Bowlby, 1969) and social ecological systems theory (Bronfenbrenner, 1979). These two theories provide the lens for the reviewed literature in this chapter. Based on these theories, I examine the literature on the new and evolving roles of group child care in Canada with respect to recent changes in family structures. I also share literature which examines the development of infants' and toddlers' physical, cognitive, and social/emotional characteristics.

### **Attachment Theory**

Bowlby (1969) argued that when children are born, they start building attachments with their primary caregivers which impacts the rest of their lives. These bonding relationships allow children to feel secure exploring their worlds. However, if these relationships are grounded in negativity (e.g., a child's primary caregivers are neglectful, they reject the child, or the relationships are unpredictable), the child develops insecure attachments with his or her caregivers. Thus, developing secure-based attachments are very important when early childhood educators interact with infants and toddlers. Bowlby (2007) also emphasized that developing attachment requires a lengthy amount of time and a dedicated effort from new caregivers. Fraiberg, Adelson, and Shapiro (1975) added that it can be difficult to repair a previously built insecure attachment relationship. This theory demonstrates the relevance of infants' and toddlers' developing initial attachments with caregivers, and emphasizes the important roles of caregivers as attachment figures.

### **Social Ecological Systems Theory**

Bronfenbrenner's (1979) theory outlined the influence of four different levels (microsystem, mesosystem, exosystem, and macrosystem) on an individual's development. These levels must be considered when early childhood educators interact with infants,

toddlers, and their primary caregivers in terms of direct/ indirect influences on developmental outcomes among infants and toddlers. Many studies (e.g., Chan & Koo, 2011; Dooley & Stewart, 2005; Gimenez-Nadal & Molina, 2013) have revealed the significant associations that exist between family influences, such as parental educational levels, family income and parenting styles, and the educational, behavioural, and emotional outcomes of children. In fact, the Child Care Advocacy Association of Canada (2004) claimed that quality child care promotes and strengthens children's development and supports families with their parenting responsibilities. These two theories share a concept in terms of influences of many different environmental variables on human development with the transactional theory (Sameroff, 2009). The transactional theory views development as an outcome of interplay between nature and nurture. Moreover, these two theories have similarities with Piaget's (1952) epistemological theory in terms of a child's development as a result of change during the process of adaption. These views emphasize the importance of providing quality child care environmental factors which can tremendously impact the development of infants and toddlers in group child care settings.

### **Review of the Literature**

Since the 1970's, population, economic, and social trends have contributed to a steady increase in the need for child care in Canada. As stated in chapter one, this is largely due to an increase in working mothers with young children, and new family compositions which has resulted in an increase in demand for child care (Doherty, Friendly & Beach, 2003).

**Rise of females in the labour force.** Over the past three decades, female employment rates have continued to increase both globally and nationally. In fact, Canada has one of the highest rates of female employment amongst countries in the Organization for Economic Cooperation and Development (OECD) (OECD, 2013). However, as previously stated, there is still limited child care available for infants and toddlers in Canada. Chudnovsky (2009)

described this issue as a “child care crisis,” as only 14% of children in British Columbia under the age of 12 have access to a licensed child care space. Furthermore, Vanleenhove (2013) argued that greater availability in child care can potentially stimulate female labour supply. Liu (2012) examined the child care situation in Quebec, Manitoba, and Alberta in regards to availability, cost of child care, and female labour participation. This study revealed that Quebec, which provides publicly funded child care programs, and Manitoba, which has set fees for centre-based child care, have increased in availability and decreased in cost for child care. However, Alberta was revealed to have considerably less child care spaces for children under the age of 12 years old. Alberta also had higher child care costs when compared to Quebec and Manitoba. This data may relate to the fact that there are higher levels of female labour participation in Quebec and Manitoba than in Alberta - 76.9 %, 69.8%, and 66.9% respectively in 2010. This study also questioned the quality of child care in each province. Even though public funding support initiatives were successful in increasing the availability of child care in Quebec and Manitoba, they also had higher levels of early childhood educator - child ratios, an important determining factor in quality child care.

**New family compositions.** From 1961-2011, Statistics Canada (2012a) documented the dynamic changes in Canadian family compositions. The most significant changes were a decline in married couples and an increase in single-parent families. In fact, the figure for married couples was 91.6% in 1961 and 67.0% in 2011. Meanwhile, single-parent families have increased from 8.4 % in 1961 to 16.3% in 2011. Another change in contemporary families is fewer people in households due to low-birth rates. These new trends have therefore impacted the need for child care, and the types of child care utilized by contemporary families. For example, according to Statistics Canada (2008), high-income families and single-parent families are more likely to use group child care services.

Other family compositions - such as common-law couples, same-sex couples, step-families, and families with foster children have also generated new roles for group child care (Statistics Canada, 2012b). Davies and Robinson (2013) held a volunteer community forum and facilitated two focus group discussions in urban, Western Australia that explored the issues faced by queer families on heterogeneity<sup>1</sup>, acceptance issues by extended family members, sexual subjectivities, and concerns raised when children start out-of-home child care. By adopting the use of critical discourse analysis (Fairclough, 1992, 2003) where one explores complex relationships between text and practice, Davies & Robinson revealed that most early childhood education experienced by these participants does not accurately reflect the lives of most children, including those from queer families. They argued that early childhood educators in child care settings must emphasize equity, respect diversity, and transform educational practice on diverse family structures (e.g., foster families, adoptive families, same-sex couples).

In BC, nearly 30% of families display these types of non-traditional family compositions (Statistics Canada, 2012b). To respond to this social phenomena, the British Columbia Council for Families (2011) stated that early childhood educators, parent educators, and family service providers have a responsibility to ensure that all families, including lesbian, gay, bisexual, transgender, and queer families are able to access child care services

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<sup>1</sup> Heterogeneity refers to a composition of diverse ingredients and parts or in other words, diversity or variability (The Cochrane Collaboration, 2011)). Davies and Robinson (2013) used this term to explain diversity in gendered and sexualized subjects, and identities in different families.

that meet their needs. The BC Council for Families also stated that although these types of families have increased in Canada, they continue to feel isolation, barriers, and obstacles in their parenthood (2011, para. 5). Janmohamed and Campbell (2009) argued that one of the most significant barriers for young children from non-traditional types of families is heteronormativity<sup>2</sup> in education. Due to heteronormativity, only traditional straight families are viewed as “normal” by society. Consequently, this has impacted policy and practice in early childhood education. From the registration form which requires information from a father and a mother, to children’s literature which tends to focus on heterosexual storylines and reinforces gender stereotypes, heteronormativity persists in early childhood education. Therefore, they concluded that early childhood educators should strive to ensure representation of all types of families in an early childhood environment and curriculum and support diversity within child care settings. Wardle (1999) had already argued that early childhood educators should make efforts to represent family diversity in the classroom because all children need affirmation in their early learning environments.

Zagel, Kadar-Satat, Jacobs, and Glendinning (2013) indicated the positive impact of group child care for single-parent families and divorced parent families. Data were collected via interviews and Strength and Difficulties Questionnaire (Goodman, Lamping & Ploubidis, 2010), reported by 2,028 single mothers (98%) or other main carers from these families (2%) in Scotland between 2005 and 2008. These participants were selected to be representative of a

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<sup>2</sup> Heteronormativity is defined as a social phenomenon that considers heterosexuality as the only accepted form of sexual orientation or only normal status (Janmohamed & Campbell, 2009).



specific geographical zone. Zagel, Kadar-Satat, Jacobs, and Glendinning argued even though some children from these family structures displayed behavioural and emotional difficulties, their enrolment in child care centres had the potential to moderate any financial disadvantages or social inequalities they experienced.

**Developmental characteristics of infants and toddlers.** During the first three years of life, infants and toddlers experience significant milestones in their development (Berk, 2012). Sensitive periods, also known as “prime times” occur in this timeframe (Shore, 1997). During prime times, both positive and negative experiences have a greater chance of affecting the development of infants and toddlers in a serious and sustainable manner (Wittmer & Petersen, 2006). Previous views of children’s development held by many theorists such as Darwin, Chomsky, Bandura, and Skinner were believed to be a result of nature or nurture influences. These views have more recently been replaced by a more balanced point of view (Berk, 2012). Specifically, Bronfenbrenner’s (1979) social ecological systems theory, which considers the multidimensional influences impacts a child’s development and experiences.

**Physical development.** During the first two years of life, children experience significant changes in their body size and proportions. Many variables such as heredity, emotional well-being, nutrition, sleeping patterns, childhood injuries, and infectious diseases all affect children’s physical growth (Berk, 2012). Children typically grow 50% or more in height from birth to their first birthday, and approximately 75% from their birth to their second birthday (Karpowitz, 2008). In addition to body height, their weight at birth doubles by the age of 5 months, triples by their first birthday, and quadruples by their second birthday. Furthermore, an infant starts teething between ages of four to six months and by the age of two, a toddler has 20 teeth. Brain development is another attribute that increases rapidly during the first three years of life (The National Scientific Council on the Developing Child, 2004). Both gross and fine motor development occurs through interaction between the brain

and environment.

Even though there are general trends in motor development, Wittmer and Petersen (2006) revealed that different cultures have different views and approaches to motor development which can influence infants' and toddlers' early experiences. For example, Brazelton (1972) observed the child rearing practices of the Zinacanteco Indians of southeastern Mexico through four sets of 12 hour observations. In the study, Brazelton (1972) indicated a correlation between the differences in infants' environment and development in comparison to Caucasian infants in the United States. For example, the children in both contexts demonstrated identical sequences in motor development. However, the Zinecanteco children were generally delayed by a month in motor development due to a less exploratory environment as they were carried by their mothers in a reboze, a type of belly sling.

Another study by Kaplan and Dove (1987) examined the maternal practices of Ache mothers in eastern Paraguay. During their observations of 32 children aged two months to four-years-old, Kaplan and Dove found that these children displayed similar social development skills; however, they were significantly delayed in their language and motor development in comparison to typically-developing Caucasian American children. They concluded that variations between the two cultures (e.g., infant dependency, mother's intensive supervision) generated different developmental rates in children.

Konner (1977) compared the behaviours of thirty-three !Kung infants who resided with their families in the Kalahari Desert in Africa in comparison to North American children. The !Kung people live in semi-permanent or temporary villages in Namibia, Botswana, and Angola and are known for possessing hunter-gatherer life skills. Due to parental promoting and the encouragement of motor skills, Konner observed earlier motor skills and greater independence in !Kung toddlers. Based on these examples, Wittmer and Petersen (2006) concluded that children's diverse early experiences significantly affect their motor

development.

***Cognitive development.*** The four stages of development as outlined by Piaget (1952) described the cognitive development of humans within a sequential model. According to this theory, infants and toddlers are in the sensorimotor stage and they construct their knowledge primarily through motor activities (Karpowiz, 2008). Similar to other areas of development, differences in cognitive development among individuals can greatly vary (Karpowiz, 2008; Whitebread, 2012). Whitebread (2012) argued that this may be due to innate differences in brain functionality, as well as early social interactions. For example, different parenting behaviours (Pino Pasternak & Whitebread, 2010; Karreman, van Tuijl, van Aken & Dekovic, 2006), maternal interaction styles (Fivush, 2007), and different types of maternal stimulation (Tamis-LeMonda & Bornstein, 1989) impact children's development and their performance of cognitive processes.

In terms of language development, infants start cooing at the age of two months followed by babbling at six months (Machado, 2007). Their language development usually accelerates at four months of age (Whitebread, 2012). Tomasello and Farrar (1986) revealed the vital role of joint attention<sup>3</sup> in the acquisition of language. In the study, twenty-four Caucasian, middle class children aged were recruited with their mothers through local

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<sup>3</sup> Joint attention refers to mothers' and infants' shared experiences on the same object or activity (Tomasello & Farrar, 1986). Infant joint attention is largely related to language acquisition, and social and behaviour outcomes (Vaughan Van Hecke, Mundy, Block, Delgado, Parlade, Pomares, & Hobson, 2012). Joint attention can be presented in various forms, such as mutual eye gazing, pointing, and gestures (Tomasello & Farrar, 1986).

daycare facilities in the United States. The children and mothers were given a set of toys to play while they were being videotaped for a 15 minute time period. Observations were performed using the same procedure when these children reached the ages of fifteen months old and twenty-one months old. In case of engaging joint attention with their mothers, toddlers produced more utterances per minute and maintained longer conversations. From these findings, Tomasello and Farrar (1986) concluded that joint attention can scaffold<sup>4</sup> early mother-child linguistic interaction.

Children develop language by interacting with their environment (Vygotsky, 1978, 1986). According to Buelow (1998), different environmental settings such as a child's home environment or a child's group child care environment can have different effects on children's language development. In her study, fifty-four American 4-year-old children from middle-class homes were observed to investigate the causal relationship between environmental settings and language development. The children were divided into two groups: a home based group (children who had not previously attended a group child care facility); and, a child care group (children who had been attending a group child care). Children in the home based group had been taken care of by their mothers who were not part of the female labour force. The children in the group child care setting had been in child care since six months of age, for approximately six to eight hours per day while their parents worked. Children in the child care group demonstrated better expressive skills, such as producing longer and more complex

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<sup>4</sup> Scaffolding refers to helping a child to achieve a goal beyond his or her own understanding through demonstrations and explanations from an adult or more advanced peer (Bruner, 1978).

speech patterns due to more opportunities to interact with peers, as well as adults (educators). However, they indicated less auditory comprehensive skills due to a lack of one-on-one attention with adults in the infant and toddler stage.

***Social/emotional development.*** According to Bowlby (1969), infants develop relationships with their primary care givers immediately after birth. Nurturing and responsive bonding experiences with their care givers leads them to achieve secure-based attachments. If infants and toddlers develop secure-based attachments, they begin to explore their worlds while maintaining proximity from the caregiver.

Ainsworth and Bell (1970) expanded on Bowlby's work when they observed 56 Caucasian infants and their middle-class parents in Baltimore, Maryland. In the study, they observed seven episodic sequences, each lasting three minutes after the mother and infant entered the room. The first observation focused on the mother and her infant in a laboratory playroom where a female stranger joined the mother and infant to play with the child. While the stranger played with the infant, the parent left the room, resulting in the first separation. The mother returned and the first reunion occurred which is shortly followed by the stranger leaving. The mother then left the room again in what is considered the second separation; however, this time, the infant is left alone in the room for a brief moment before the stranger returns. Lastly, the mother comes back to the room and the second reunion occurred.

Based on the observations of the infants, Ainsworth and Bell (1970) separated the results into three data sets: secure attachment, avoidant insecure attachment, and ambivalent insecure attachment. Secure attachment is facilitated by a sensitive and loving caregiver. Infants and toddlers who have secure attachment tend to seek proximity with a caregiver to feel safe. Avoidance insecure attachment is developed by a caregiver who exhibits insensitivity and often rejects infants and toddlers. Infants and toddlers with this type of attachment often minimize displays of negative emotion or stress in the presence of

caregivers. Ambivalent insecure attachment is assisted by a caregiver who is not sensitive and takes care of their child in an inconsistent manner (sometimes loving, sometimes rejecting). Infants and toddlers, who display this attachment, exaggerate negative responses such as anger and resistance to get a response from the caregiver (Benoit, 2004).

In Ainsworth's and Bell's study, the infants who demonstrated secure attachment engaged with both their mothers and the stranger. When the mothers left, the children were upset; however, when the mothers returned, they quickly became content and sought contact. They also freely explored their surroundings when their mothers were present. On the other hand, the infants with avoidant insecure attachment avoided or ignored their mothers. They showed little emotion when their mothers left and returned. They did not explore their surroundings regardless of whether they were with or without their mothers. The infants displaying ambivalent insecure attachment anxiously sought contact with mothers when their mothers were present and were difficult to comfort when they were reunited. They also displayed outbursts or refused comfort from their mother.

In their study, Main and Solomon (1986) added disorganized insecure attachment as an additional type of attachment. Distorted parenting and atypical caregiver behaviour cause this type of attachment. Approximately 15% of infants or toddlers from low-risk families and 82% of those from high-risk family display disorganized insecure attachment (Benoit, 2004). In this case, children can feel both comforted but frightened by their parents (Main & Hesse, 1990). This dynamic has been examined in many studies (e.g., Antonucci & Levitt, 1984; Main, Kaplan & Cassidy, 1985). Antonucci and Levitt (1984) studied forty seven Caucasian, middle class mother-infant pairs that were observed when the infants were seven months and thirteen months. Overall, they discovered a consistency between the two age groups in regards to their attachment. Similarly, in their study, Main, Kaplan, and Cassidy (1985) observed forty Caucasian and Asian upper middle class children interacting with their

mothers or fathers. They observed the children at twelve – eighteen months, and at six-years-old. ) They revealed a strong stability between the two in regards to displayed attachment styles as the children maintained the same attachment types even as they got older. These studies re-defined the importance of early attachment formation because of the persistence tendency of attachment types.

Ahnert, Gunnar, Lamb, and Barthel (2004) indicated that infant-mother attachments can greatly influence infants' transitions to a group child care setting. Ahnert et al, (2004) observed seventy 15 months old infants in Berlin, Germany before and after starting group child care. The infants who had secured-based attachments with their mothers regulated stress more efficiently and effectively during the transition period. However, insecurely attached infants demonstrated higher stress levels which were accompanied with fussing and crying, followed by significantly lower levels of stress during the adaptation period. This study also indicated the importance of maternal contributions to a child through building a secure attachment as they adjust to group child care settings. These findings revealed the importance of promoting secure-based attachments and providing a significant amount of time for infants and toddlers to adapt as they transition to group child care.

Many studies (e.g., Bohr & Tse, 2009; Schore, 2001; Sroufe, 2005) have also addressed the link between secure-based attachment in children's early lives in relation to their future success. Sroufe (2005) examined 267 first-time mothers and their children. Mothers were recruited in their third trimester of pregnancy by the Minneapolis Public Health Department and the Hennepin County Medical Center. These mothers were considered to have moderate difficulties with respect to stress, hardship, and instability with parenting which were related to poverty. In this 30 year longitudinal study, commencing in 1975, Sroufe concluded that one's attachment history is related to an individual's self-reliance, ability for emotional regulation and emergence, and social competence. These findings

confirmed the importance of children establishing strong attachments in their early years.

In his review of multiple areas (e.g., developmental psychology, infant psychiatry, and developmental neuroscience), Schore (2001) concluded that the connection between infants who failed to receive secure-based attachments with their primary caregivers and their ability to develop stress coping systems, as well as positive mental health. Through this interdisciplinary approach, he used an integration of the aforementioned areas of expertise to reach a deeper understanding of early attachment and development. He described that quality early attachment which is secure and stable affects the development of an individual's pattern of engaging and seeking social relationships later in life. In contrast, traumatic experiences from severe attachment failures cause negative emotional states that can last well past childhood. Based on this study, it appears that infants who fail to develop attachment with their primary caregivers have a higher risk of developing atypical mental health issues.

Bohr and Tse (2009) observed twelve newly immigrated Chinese families to Canada who sent their infants to their home country to be raised by extended family members for several years. These parental decisions were the result of different reasons (e.g., financial burdens in their new country, availability of family support, their strong commitment to preserve Chinese culture for their children). Regardless of the reasoning for sending their infants to China, Bohr and Tse found there to be expected concerns from the parents with respect to disrupting attachment with their infants caused by separation and an infants' ability to adapt in their new country.

### **Summary**

Recent social changes have increased the need for group child care, especially for infants and toddlers. Increased working mothers and non-traditional family compositions, such as single-parent families, fewer people in households, and various other forms of families such as same-sex couples, and step-families, have resulted in a shift in child care



responsibilities from home to society. This trend has therefore increased the demand for group child care.

Infants' and toddlers' developmental trajectories also need to be considered so that quality child care can be provided to these young children. For example, changes in physical growth, motor development, and cognition all need to be recognized and supported from the onset of a child's group child care experience to maximize his or her development across domains. Finally, social and emotional development, which is strongly linked to attachment, emphasizes a secure and stable relationship with caregivers. In this chapter, I explained the societal changes which have led to an increase in group child care, as well as the developmental characteristics of infants and toddlers. In the following chapter, I draw connections between these findings and the relevance of drawing on this knowledge in an early childhood context. Based on these connections, I present strategies and techniques, including a sample initial meeting questionnaire, which early childhood educators can utilize to create a group child care environment that ensures continuity between the children's home and their group child care setting.

### CHAPTER THREE: CONNECTIONS TO PRACTICE

In this chapter, I connect the reviewed literature to practices that we, as early childhood educators can utilize to support infants, toddlers, and their families as they transition from home to group child care. I specifically illustrate the importance of positioning children and their families in the center of the program by drawing on Bronfenbrenner's (1979) social ecological systems theory. Since infants and toddlers depend on adults for protection and learning, their families are the best sources of information (California Department of Education, 2006) in developing education plans for young children. Early childhood educators must also be cognizant of their own cultural backgrounds, values, and beliefs, and make every attempt to learn about the children's families in their group child care setting to make families feel welcomed, supported, and valued.

I also draw on literature (e.g., Buelow, 1998; Whitebread, 2012; Wittmer & Petersen, 2006) that emphasized the importance of providing a well-planned environment for infants and toddlers, and literature that addressed the different developmental domains that impact infants and toddlers as they progress through their lives (DeGraffenreidt, Gransmick, Grafwallner, & O'Malley, 2010). Therefore, an optimal environment for supporting the maximum potential of infants and toddlers should be balanced in order to promote all developmental domains. Furthermore, gradual entry is essential in creating a positive initial experience for infants, toddlers, and their families as they adapt to their new surroundings (Ahnert et al, 2004). In addition, I reference the importance of attachment in young children's lives and how this has a direct link to their future success (Bohr & Tse, 2009; Schore, 2001; Sroufe, 2005). As previously outlined, developing secure attachment requires a lengthy amount of time and dedication by new care givers (Bowlby, 2007). In this chapter, I suggest different strategies and techniques that early childhood educators can use to create and maintain strong bonding relationships with infants, toddlers, and their families.

## **A Family-Centred Program**

According to Bronfenbrenner (1979), children's development is influenced by multiple interconnected systems. For example, a child's family plays a significant role on his or her development and social and cultural learning experiences. A child's reliance on his or her family therefore necessitates a family-centred approach for infant and toddler programs.

**Educators' perspectives.** When welcoming families to a family-centred infant and toddler group child care program, it is important that early childhood educators recognize their own cultural backgrounds, values, and beliefs which will impact how they interact with young children. Previously mentioned studies on different developmental outcomes for infants and toddlers based on their early social interactions with caregivers (e.g., Fivush, 2006; Karreman, van Tuijl, van Aken & Dekovic, 2006; Pino Pasternak & Whitebread, 2010; Tamis-LeMonda & Bornstein, 1989) revealed the importance of early childhood educators understanding their own beliefs, values, and teaching philosophies when they support children.

Wardle (1999) argued that early childhood educators' support of children's differences or their own differences in child care settings largely depends on their own understanding and comfort level with these diversities. Therefore, early childhood educators need to recognize their own differences and biases on diversity. To learn about cultural backgrounds, values, and beliefs of families, early childhood educators need to take a "humble stance" and become

learners so families can best share their funds of knowledge<sup>5</sup>(Souto-Manning & Mitchell, 2009).

As outlined in chapter two, there have been significant changes in Canadian families due to demographic, social, and economic changes (Statistic Canada, 2012a; Statistic Canada 2012b). Early childhood educators need to recognize diversity in the families they work with and attempt to visually represent all types of families in their child care settings (BC Council for Families, 2011; Fairclough, 1992, 2003; Janmohamed & Campbell, 2009). A way to accommodate diverse families in child care settings is to make families feel welcome and comfortable at group child care centres through friendliness, optimism, patience, sincerity, genuineness, integrity, open-mindedness, and sensitivity (Brynelson, 1995). Open and reciprocal communication also enables families to create an appropriate rapport and partnership with early childhood educators (Moore & Larkin, 2005).

**Parents' perspectives.** Based on my observations, I have noticed that parents often feel anxious when their children first begin their group child care experience. As mentioned earlier, Stearns (2004) argued that parents often experience negative emotions when utilizing child care services. They may experience feelings of guilt for leaving their child at the centre for a number of reasons: feel pressure to return to work and feel anxious because of all the

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<sup>5</sup> Moll, Amanti, Neff, and Gonzalez (1992) defined funds of knowledge as a rich resource that is gained from students and their families based on their cultural histories and values. They explained that when educators take on a learner's role instead of being an expert, they can have a deeper understanding of their students and therefore develop culturally-responsive and meaningful lessons.

new duties. These complex feelings should be recognized and supported by early childhood educators since parental stress negatively affects their capability to build secure attachments with their child (Sroufe, 2005). These feelings can be somewhat alleviated during open two-way conversations where relevant information can help lessen parental anxiety (Brynelson, 1995; California Department of Education, 2006). Creating an opportunity for early childhood educators to meet the new child's parents is a significant strategy that can effectively assist children's well-being in child care centres (Adams & Parlakian, 2010). This provides families and early childhood educators with an opportunity to share information about the child care centre and the child including his or her development, home environment, health or any medical issues, etc.

### **A Planned Environment**

The environment has a significant impact on supporting infants' and toddlers' early learning experience which can determine their future developmental, physical, and emotional outcomes (McLean, Wolery, & Bailey, 2004; National Research Council, 2000). Early childhood educators should organize and prepare an environment which promotes children's development across all developmental domains (California Department of Education, 2006).

**A well-balanced environment.** DeGraffenreidt, Gransmick, Grafwallner, and O'Malley (2010) argued that all the developmental domains (e.g., physical, cognitive, language, social, emotional) impact each other. Therefore, different learning experiences can affect the development of infants and toddlers in different ways (B.C. Ministry of Health, 2011). For example, indoor learning experiences (e.g., circle time, reading books, art activities) can assist with fine motor skills and cognitive development. In comparison, outdoor activities (e.g., walking, running, climbing) largely address gross motor skills. Therefore, early childhood educators must plan an environment that provides different learning experiences that ensure children receive various and appropriate types of stimulation

which promotes all developmental domains.

Moreover, from the studies mentioned in chapter two, infants' and toddlers' development can be accelerated by caregivers' encouragement and challenging them at appropriate levels (Brazelton, 1972; Kaplan & Dove, 1987; Konner, 1977; Tamis-LeMonda & Bornstein, 1989). If the environment provides children with opportunities to take risks and to experiment in their surroundings, infants and toddlers will maintain their intellectual curiosity. However, if caregivers provide an inappropriate level of environment (e.g., too challenging or too easy), infants and toddlers will lose their interest in exploring and learning. Furthermore, each infant or toddler should be viewed as unique (B.C. Ministry of Health, 2011). Early childhood educators need to ensure that infants and toddlers have sufficient and individualized time to meet their needs.

According to the BC Community Care and Assisted Living Act and Child Care Licensing Regulation (2007), the early childhood educator to child ratio is 1:4 for infants and toddlers in a group child care setting. This current setting in B.C. can limit early childhood educators to pay constant attention to each infant or toddler. In fact, some researchers such as Liu (2012) used the early childhood educators to child ratio as an important determining factor in quality child care when comparing different child care systems in three Canadian provinces. Even though many studies revealed that group child care settings can be beneficial for young children (e.g., Buelow, 1998; Zagel, Kadar-Satat, Jacobs & Glendinning, 2013), early childhood educators need to be aware of the importance of providing individual support to each infant or toddler in a group child care setting. For example, the California Department of Education (2006) suggested using personalized care routines (e.g., changing diapers, feeding) as effective opportunities for one-on-one time with a child. These opportunities also allow infants and toddlers to develop strong bonds with early childhood educators.

As outlined in chapter two, the needs of infants and toddlers are quite different when compared to older children (Berk, 2012; Shore, 1997; Wittmer & Petersen, 2006). Therefore, early childhood educators need to invest in relevant training courses that will provide them with information on the children's development, how to effectively working with families, and attachment theory, etc. These leaning opportunities have the potential to increase early childhood educators' understanding of the importance of creating and maintaining an effective early childhood environment (McLean, Wolery, & Bailey, 2004; Wardle, 1999).

**Introduction to a new environment: Gradual entry.** As stated in the previous chapter, Ahnert et al. (2004) revealed that it is important that infants and toddlers are gradually introduced into group child care as it assists in creating a positive initial experience for the child and his or her family. The length of the process should be flexible, depending on each child's temperament, ability to adapt to a new environment, anxiety with new people, and previous experiences in group child care. This process can be beneficial for everyone - infants, toddlers, parents, and early childhood educators. For infants and toddlers, increasing familiarity in the new environment will help reduce stress and help them develop trust with early childhood educators (Adams & Parlakian, 2010). During this time parents may experience different emotions such as guilt or anxiety (Stearns, 2004). A gradual entry process will provide families with an opportunity to emotionally prepare themselves for their child's transition to group child care. During that time, early childhood educators can also learn about the child by observing the child's interactions with his or her parents.

### **Developing Relationships**

As mentioned in chapter two, it is crucial for caregivers to develop attachment with infants and toddlers since early attachment is directly correlated to children's mental health and learning experiences (Bowlby, 1969). For children who spend a significant amount of time at group child care centres, it is essential that early childhood educators ensure their

emotional well-being in the absence of their primary attachment figures at the centre. In fact, infants and toddlers often develop secondly attachment figures at their group child care centre which supports their mental health (Bowlby, 2007). In the following section some strategies are outlined for early childhood educators in regards to developing positive relationships with young children and their families.

**Infants and toddlers.** Ainsworth and Bell (1970) revealed links between the characteristics of caregivers and their ability to develop attachments with young children, as well as different types of attachment that can occur with infants and toddlers. According to this study, early childhood educators need to have the following characteristics: empathy, openness, warmth, dedication, carefulness, sensitivity, and responsiveness. These attributes will make children feel safe, supported, and respected in their group child care environment.

Developing relationships with infants and toddlers also provides early childhood educators with opportunities to acquire insight into each child. There are many things that contribute to the uniqueness of each child; developmental differences, temperament, strengths, and challenges. Understanding these complexities in young children occurs when early childhood educators and each infant or toddler maintain a consistent and positive relationship (California Department of Education, 2006). Once early childhood educators develop a deeper understanding of each child, they can tailor their teaching strategies and the environment to best support infants and toddlers in realizing their maximum potential.

**Families.** Parents are the experts on their child and they are the best source for obtaining information about the effectiveness of care for their child (California Department of Education, 2006). As mentioned earlier, mutual trusting relationships between early childhood educators and families is central to effective family-centred programming. Therefore, from the beginning of the group child care experience (e.g., initial meeting and gradual entry), early childhood educators need to develop positive relationships with



individual families through open communication.

**Initial meeting.** In this chapter, the benefits of an initial meeting with families were addressed. The initial meeting between the parents (or other care givers) of infants and toddlers and early childhood educators occurs before their group child care experience commences. Prior to the initial meeting, early childhood educators need to prepare a welcoming package (Child Care Resource and Referral, 2006) which includes information about the program, including policies, parental responsibilities and daily routines. When the parents arrive at the centre for their initial meeting, early childhood educators should provide families with a tour of the centre, introduce staff, and provide general information about the program (Adams & Parlakian, 2010). Early childhood educators should also explain details of their approach or philosophy in regards to working with families, including the expected roles of the parents (Brynelsen, 1995). During this meeting, explanations about centre policies, hours of operation, pick up and drop off procedures, and items needed for children will provide parents with a thorough understanding of the centre's expectations.

Early childhood educators can also draw ideas from the developed questionnaire (Appendix A) which addresses a range of pertinent topics/areas through different lines of inquiry. This questionnaire was designed based on a literature review and my experience as an early childhood educator. It includes questions about a child's characteristics, development, family/home environment, sleeping, eating, diapering (toileting), previous experiences, and health status. These questions are used for determining their own, unique gradual entry process and setting up their child care environment. For example, questions such as, "What does your child enjoy the most? What types of food does your child like? What types of toys does your child like to play with?" can also provide information that will enable early childhood educators to learn more about the enrolling child. This information is crucial for creating individualized plans for infants and toddlers, and for ensuring continuity between

home and the centre.

Since infants and toddlers experience rapid and dramatic growth and development (Berk, 2012), their needs are constantly changing. Therefore, the information for each child should be shared and adjusted on a frequent basis. Follow-up meetings and constant communication between early childhood educators and parents are also essential for meeting the needs of the child (California Department of Education, 2006).

### **Summary**

In this chapter I connected the reviewed literature to ideas on how early childhood educators can support infants, toddlers, and their families in terms of transitioning from home to group child care settings. I also provided strategies that early childhood educators can use at group child care centres. Additionally, I made reference to a questionnaire (Appendix A) that can aid early childhood educators during the initial meeting with parents to help share knowledge of the child. In the following chapter, I reflect on the findings revealed in the literature, and I provide concluding thoughts and suggestions for future research.

## **CHAPTER FOUR: REFLECTION AND CONCLUSION**

The literature in this capstone addressed the changes in contemporary Canadian society in terms of family dynamics, as well as developmental characteristics of infants and toddlers and the importance of quality child care centres in supporting children and families as they transitioned from home to group child care. This literature review has revealed the importance of understanding the needs of infants, toddlers, and their families in group childcare settings including their emotional well-being and providing an appropriate environment to each infant or toddler. It has also lead me ponder realistic implementations, which can be used by early childhood educators who work with this group with the goal of achieving a smooth transition.

One of the most significant ways we can support infants, toddlers, and their families is by increasing supply of high-quality child care programs which promote optimal development (California Department of Education, 2006). To do this, a family centred approach needs to occur which focuses on planning a well-balanced environment where infants and toddlers can experience various stimulation with individualized support, and developing positive and reciprocal relationships with infants, toddlers, and their families (Brynelsen, 1995). To reduce stress levels of infants, toddlers and their parents which coincide with a new environment, an initial meeting between early childhood educators and parents is essential. Lastly, I designed a questionnaire as a suggested form by Adams and Parlakian (2010), which has a list of key points that may assist early childhood educators in gathering better and more relevant information and insight on the individual child and their families.

### **Educating Early Childhood Educators**

Due to my investigation on the developmental characteristics of infants and toddlers, a number of different responsibilities have been revealed in regards to the multiple roles of

early childhood educators who work at group child care centres.

Through professional development, such as attending workshops and taking extra training or courses, early childhood educators can deepen their understanding of infants and toddlers' learning and development, elements of group care, children with disabilities or other special needs, and influence of families and curriculum (California Department of Education, 2006). Their effort for gaining knowledge should be an ongoing process. Early childhood educators who have adequate knowledge are better prepared to engage families, create more nurturing and balanced environment, and build trusting relationships including secure attachment with infants and toddlers.

There are few research-based studies on the well-being of infants and toddlers in quality child care programs when compared, to studies that are aimed at older children (Cryer et al., 2005). In other words, there are fewer resources available to support this group. However, increased effort in regards to further education and training for early childhood educators who work with infants and toddlers can maximize their abilities to meet the needs of infants, toddlers, and their families.

### **Areas for Further Research**

In contemporary society, there is an increasing demand for group child care for infants and toddlers. However, as mentioned earlier, there is a lack of empirical evidence available with respect to the well-being of infants and toddlers in quality child care programs (Cryer et al., 2005). In particular, knowing that development in the first three years of life is crucial for future success of an individual, (B.C. Ministry of Health, 2011) there is an urgent need for research in this area. Moreover, Brynelsen (1995) argued that many early childhood educators and families in B.C. easily misunderstand the concept of the family-centred approach since it can be shown in many different forms depending on the family circumstances. Therefore, it is important to develop locally applicable models which focus on the family centred approach

in group child care settings in B.C.

The quality of early childhood educators directly impacts the development and well-being of infants and toddlers (California Department of Education, 2006). In B.C., there is an additional license for infant and toddler early childhood educators, which requires post basic training (B.C. Ministry of Children and Family Development, 2014). However, not all early childhood educators who work with infants and toddlers are required to have an infant and toddler educator's license. According to the Community Care and Assisted Living Act, Child Care Licensing Regulation (2007), based on the maximum group size of twelve infants and toddlers per class at a ratio of 1:4, only one educator instead of all (three) of the educators in the group is required to have an infant and toddler's license. Consequently, an ideal way to increase the potential quality of early childhood educators within the group child care setting is for early childhood educators in infant and toddler programs to have their infant and toddler licenses.

### **Final Summary**

The literature outlined in this project provided a review on the new role of group child care for infants, toddlers, and their families. Contemporary Canadian social changes including increased female-labour participation and dynamic changes in family composition have increased demand for group child care for infants and toddlers. Furthermore, unique developmental characteristics for children in this age group have resulted in different needs for quality group child care. In consideration of this issue, I suggested a few key points that early childhood educators can implement in their daily routines. Through the family-centred approach, early childhood educators and families can best share their knowledge about the child by having a trusting partnership that will aid the child in reaching his or her maximum potential in all developmental domains (e.g., physical, cognitive, and social/emotional) . In addition, infants and toddlers learn from their given environment, hence early childhood

educators should ensure they create a nurturing and well-planned environment. Lastly, relationships should be developed and reciprocal. This is crucial when developing attachment with early childhood educators as secondary attachment figures for the emotional well-being and learning capabilities of infants and toddlers. These three aforementioned strategies should be used throughout the entire child care program.

I also placed emphasis on the initial meeting between early childhood educators and families. The first step in building a successful relationship includes ensuring a solid base for two-way communication that will maintain continuity between home and the centre. It is my hope that early childhood educators can accommodate infants, toddlers, and their families more effectively by using the strategies discussed throughout this project.

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## Appendix A

**Initial Meeting Questionnaire**

This questionnaire is designed for the initial meeting between early childhood educators and parents (or other primary caregivers) of infants and toddlers prior to the start of the program. The questionnaire is followed by an orientation to provide a clear explanation of the program. The list of questions should be presented in a way that will encourage a two-way conversation between the early childhood educator and parents, as opposed to a formal interview. This questionnaire hopes to accomplish three overarching goals. Firstly, the shared information should be used to create a new centre environment. To create individualized plans, early childhood educators need to ensure continuity between the valued practices at home (e.g., feeding and napping schedules) and the centre. Secondly, the shared information helps with gaining insight into the new child and his or her family including family's values, practices, and beliefs on child rearing. Thirdly, the shared information can determine the gradual entry process. All information including the child's daily routine, temperament, and previous out- of- home social experiences and under the new situation should be considered.

Child's Name: \_\_\_\_\_ Date : \_\_\_\_\_

Family members : \_\_\_\_\_

1. Characteristics

- What type of temperament does your child often display? (e.g., easy going, difficult, shy, sensitive )
- What does your child like and/or dislike? (e.g., types of toys, food, activities, and people)
- How does your child react to meeting new adults?



- How does your child react to new or maybe unfamiliar?
- How does your child react to new environments?
- Is there any other information you would like to share with respect to your

child's temperament?

## 2. Development

- How does your child move his/her own body? (e.g., crawling, cruising, walking, etc.)

- How does your child communicate when tired/hungry/uncomfortable/scared?

- Is there any other information you would like to share regarding your child's development?

## 3. Family/ Home environment

- With whom does your child live?

- If your child has siblings, how old are they?

- How are your child's relationships with them?

- Who is the primary care giver?

- Does your child have extra care givers? (e.g., extended family members or nanny)

- What is your child's typical daily routine?

- What languages does your child hear at home?

- What languages does your child use?

- Is there any other information you would like to share with respect to your family?

#### 4. Napping

- How many naps does your child have and how long do they last?
- Does your child use a soother, sleeping sack and/or any other special items?
- Is your child's nap room dark?
- Is your child's nap room quiet?
- Does your child have a bottle before or after naps?
- How does your child fall asleep? (e.g., reading a book, rocked, patted)
- How long does your child take to fall asleep?
- Is there any other information you would like to share regarding your child's

napping habits?

#### 5. Eating

● What types of food does your child eat? (e.g., breast milk only, puree, small pieces of solid food, etc.)

- How often does your child eat?
- Does your child sit in a highchair or at the table?
- How independently does your child eat? (e.g., spoon feeding, finger food,

using spoon or other utensils)

- How much does your child eat?
- Is there any other information you would like to share regarding your child's

eating habits?

#### 6. Milk

● What type of milk does your child consume? (e.g., breast milk, formula, homogenized milk)

- What type of cup does your child use? (e.g., bottle, sippy cup, regular cup)

- What is the temperature of milk your child drinks? (e.g., warm, room temperature, cold)
- What is the method used to warm up the milk? (e.g., hot water, microwave)
- How often does your child have milk?
- How much milk does your child drink at once?
- How much help does your child need when drinking milk? Is there any other information you would like to share regarding your child's milk consumption?

#### 7. Bathroom

- Does your child use diapers or the toilet?
- If your child uses diapers, are they disposable or cloth diapers (with/ without liners)?
- Does your child require special wipes or cream?
- If your child is toilet training, does your child use always use diapers/pulls up, or only for sleeping?
- If your child uses the toilet, does your child use it with a baby toilet seat or without?
- How much help does your child need when using the toilet? (e.g., help sitting on the toilet, wiping the bottom, taking off /putting on clothes?)
- Is there any other information you would like to share regarding your child's diapering or toileting?

#### 8. Previous Experience

- Has your child attended any types of group activities? (e.g., playgroups, library story time)
- Did the experiences occur with parents (other primary caregivers) or without

parents?

- Is there any other information you would like to share regarding your child's previous experiences?

9. Health Status

- Does your child have any allergies/food restrictions?
- When your child is exposed to allergens, what are the symptoms and what types of first aid are required?

- Does your child take any medication?
- If your child does, for what reason? How should it be consumed? How often does your child need to take medication

- Do you want us to give your child his or her medication? (if yes, fill out the form)

- Does your child require specialized equipment? (e.g., hearing aids, high backed seats, body positioning bedding)

- Is there any other information you would like to share with respect to your child's health/medical conditions(e.g., hearing, vision, etc.)?

10. Determine the Gradual Entry Process

- Start date and time:
- Goal for total length of gradual entry process
- How many hours will be extended for each day going forward?
- How many days will the parents also attend?

11. Extra Comments

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