



POLICY BRIEF

Translating early childhood research evidence to inform policy and practice

Caring for Young Children: What Children Need

Caring for young children, and getting the caring right, is becoming recognised as one of the most significant challenges facing parents, communities and societies. Young children who develop secure attachments through positive caregiving are more likely to experience lower levels of stress and other associated benefits. In turn, they are more able to contribute positively to society and care for future generations. This Policy Brief summarises what is known about what young children need from parents and caregivers, and explores the implications for policy and practice.

Why is this issue important?

The care children receive in their first years of life has a lifelong impact and may even influence future generations. Parenting styles impact children's development (Aunola & Nurmi, 2005); the Longitudinal Study of Australian Children has shown that even subtle variations in parenting styles can have significant effects on child outcomes (Australian Institute of Family Studies, 2006).

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Parents may feel confused and anxious about their parenting role. Often, the more stressed they become, the less effective their parenting and the more negative the outcomes for their child (Essex et al, 2002; Keller, et al., 2004; Parke, et al., 2004). While healthy debate about how parents care for their children is useful, the conflicting advice widely available in the public domain can be stressful for parents, particularly for sensitive topics such as persistent crying, sleep problems and discipline.

Not surprisingly, evidence has shown that children who experience abuse and neglect may

have lifelong problems with emotional regulation, self concept, social skills and learning. This can lead to decreased academic achievement, early school drop-out, delinquency, drug and alcohol problems and mental health problems (Anda, et al., 2006; Perry, 2000).

What does the research tell us?

‘Nature versus nurture’ has been debated for decades, but it has not been until recently that we have been able to explain how ‘nurture’ in the external world (families, communities and society) combines with ‘nature’, or the internal world (biological and neurological), to influence outcomes in children. We now know that the relationships young children have with the important people in their lives shape the development of their brains. Thus sensitive and responsive caregiving is a requirement for the healthy neurophysiological, physical and psychological development of a child (National Scientific Council on the Developing Child, 2004a, 2004b, 2008; Richter, 2004; Siegel, 1999).

Nurturing and attachment

Decades of research has demonstrated the importance of attachment in shaping outcomes for children. Bowlby’s classic research on

maternal separation found that children who had experienced long periods of separation from an attachment figure had poorer outcomes (Bowlby, 1969, 1988). Since then, it has been found that children with secure attachments with a parent (usually the mother) demonstrate better academic, social, emotional, behavioural, health and wellbeing outcomes (Hutchins & Sims, 1999).

“Disturbances in attachment can have long-term consequences for children’s development and functioning”

Animal research on the neurobiology of caring for the young shows how crucial such relationships are. For example, research with rhesus monkeys has shown that cortisol or stress levels in offspring are related to the amount of nurturing the mother provides (Maestripiri, 2005; Suomi, 2003). When fostered with nurturing mothers, rhesus monkeys showed more positive outcomes than those fostered with low nurturing mothers; they were more likely to be socially dominant, have lower stress levels and a better immune response and were more likely to become nurturing mothers themselves. Those reared in more negative environments had high stress levels, were more likely to show mental health problems (depression and anxiety), and had higher levels of aggressive behaviours. They were also less likely to be nurturing when they themselves became mothers.

Disturbances in attachment can have long-term consequences for children’s development and functioning (Siegel, 1999; Stien and Kendal, 2004; Ranson and Urichuk, 2008; Schore, 2001b; Thompson, 2000). Infants in foster care demonstrate higher neurological stress levels than those infants living with their parents. However, training foster parents in sensitive caregiving can result in more normal stress levels (Gunnar & Quevedo, 2008).

Research on Romanian orphans (Gunnar, Morison, Chisholm, & Schuder, 2001) shows that later improvements in the child rearing environment do not always compensate for early impaired attachment. This further supports research that early intervention is more effective (Karoly et al., 2005; Lynch, 2005; Reynolds, et al., 2004; Schweinhard, et al., 2005; Watson & Tully, 2008). If left until later in life, interventions are less effective, more time consuming and consequently more expensive.

A cost/benefit analysis of one of the most famous early year’s programmes, the Perry High/Scope preschool programme, showed significant savings to society over time in a range of outcomes. Programme graduates, in comparison to the control group, had fewer arrests for drug, alcohol or violent crimes, producing savings in the criminal justice system, and less likely to be welfare dependant, producing savings in welfare payments.

They were also less likely to need special education support, and more likely to gain tertiary qualifications and hold higher paying jobs, producing less special education costs and a greater tax revenue to the state. The economic return for this expenditure by the time the graduates were 40 years of age was \$US17.07 for every \$US1 spent. Interventions offered later in the lifecycle have demonstrably less impressive outcomes and tend to cost more per participant to run (Knusden, Heckman, Cameron, & Shonkoff, 2007).

The biology of attachment

There is a body of research which shows that young children in loving, caring relationships have a lower stress response than children in less secure relationships (for summaries of this work see McCain, Mustard, & Shanker, 2007; Shonkoff & Phillips, 2000; Shore, 1997).

Brain imaging research suggests there is a neurological basis to the human ability to establish secure attachments with others (adults and children). When first-time mothers look at their infants’ faces, the reward areas of their brains are activated (Strathearn et al., 2008).

“...young children in loving, caring relationships have a lower stress response than children in less secure relationships”

Hormonal changes associated with pregnancy and child birth prime mothers to respond in this way, but their neurochemical responses to their babies are also shaped by the actual experience of caring for their infants (Kringelbach et al., 2008). This same process allows biologically-based attachment relationships to develop between infants and non-maternal carers including fathers, grandparents, foster parents and child care workers (Sims, 2009).

Multiple attachments

The majority of research undertaken in the western world has focused on the attachment relationship between mother and child, and has demonstrated the crucial importance of this relationship in shaping child outcomes. There is only limited research investigating the impact of attachments outside this primary mother-child relationship, and much of this comes from non-western cultures. Hrdy (2001, 2008) introduces the idea of 'alloparenting' or multiple caregivers and cites many animal species and some human groups where the care of infants predominantly by mothers is not typical.

Some studies have shown that in some human groups, having multiple caregivers is associated with faster child growth and increased child survival (Hrdy, 2008).

Studies of African-American families (Jackson, 1993) and indigenous Australian families (Secretariat of National Aboriginal and Islander Child Care, 2005) highlight the ability of children to form multiple attachments. Children who form multiple attachments are said to be at lower risk for negative outcomes (Sims, 2009), as the withdrawal of any one attachment figure (such as the mother returning to work) can be buffered by the presence of another. When there are multiple equal attachment figures, the responsibility for meeting the child's needs can be shared.

"Children who form multiple attachments are said to be at lower risk for negative outcomes"

Overall, caregiving is thought to function as a regulator of the stress response (Gunnar & Quevedo, 2008), with the caregiver-child relationship seen as a stress buffer. Responding sensitively to children and forming secure attachments are the features of caregiving that have the most favourable impact on a child's stress response. Less sensitive caregiving results in higher stress levels and a poorer ability to manage stressful situations.

In summary, the research indicates that:

- Young children need secure attachments in order to develop to their potential.
- Secure attachments require attentive, sensitive and responsive care.
- Attachments can be formed with other family and community care givers in addition to the mother and father.

What are the implications of the research?

- All children need to be in loving and nurturing environments, particularly in their early years. Parents require support in order to provide this for their children.
- Strategies need to be explored to encourage families to build a network of caregivers around them to support them in their child rearing responsibilities.
- Stressed carers are not effective carers. The creation of supportive services and communities to minimise stress on those caring for young children is important. Appropriate interventions are required where the caregiver-child relationship is at risk.

Considerations for policy and programs

An extensive education campaign is needed to develop a public and political understanding of the contribution experiences in the early years have on long-term outcomes (and thus on the future of our nation). This includes ensuring that clear research-backed messages about what young children need are made available to parents and professionals, and that the care of young children is a central consideration in urban and service planning.

Making the care of young children a central consideration means:

- Ensuring parents have available parental leave provisions to care for young children.
- Ensuring that adequate funding is allocated to provide family support programs that:
 - are flexible, culturally and community sensitive
 - offer financial, social, emotional and practical support
 - are ongoing in their provision.

All family support services need to recognise and support the establishment of multiple attachments between young children and their carers (parents, grandparents, other family members, alloparents etc.). This means:

- Appropriate training needs to be provided for professionals working with young children and their parents, other family members and caregivers to recognise and support the development of secure attachments between children and their carers.
- Improving processes for helping parents and caregivers communicate with professionals when they are having difficulties with adult-child relationships.

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