

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.^{1,2} The greatest fear has been that child care may disrupt parent–child relationships and damage children’s social and emotional development.³ 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.⁴ 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 3.⁵

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.⁶⁻⁷ 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.⁸

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.^{2,9-13} Contributors to this knowledge base include meta-analytic reviews of interventions and large longitudinal studies conducted in several countries.^{2,14,15} 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.² Teacher quality and group size are important contributors to quality, according to findings in the broader education literature.¹⁶⁻¹⁷ 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.^{11,16}

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.¹⁸ 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.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.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.^{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.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.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.^{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.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.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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