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Center and societal implications

Child Care as Shared Socialization

by Renatta M. Cooper

Who cares for America's children? What does it mean to care for children? Care has several definitions that include protection, custody (left in a friend's care), and to watch over or attend to — a responsibility. Child care certainly contains all of these elements, children are protected, attended to, and their needs are met when they are in the custody of their caregiver. There is more to caring for children, however. These definitions do not reflect the amount of interaction, teaching, and learning that are part of a child care day. Child care is in fact a system of shared socialization of children and a serious examination of this system has implications for parents, caregivers, center directors, and society at large.

Development of Hope and Will

Through the responses that they receive from their earliest caregivers, infants develop the attribute of hope, according to Erik Erikson. It is hope that develops from the exchange between the dyad of trust versus mistrust. In the same vein, the attribute that develops from the dyad of autonomy versus shame and doubt is will, that blend of curiosity and desire.

These attributes of hope and will are a necessary part of early childhood and important foundations to the expectations of western education. We want children to be curious, we want them to interact independently and in groups. We want young children to experience a minimum of separation related discomfort when they are left in the care of others. These qualities will not only make their care easier, but in a society that values independence above all else, these traits enable us to believe that our children are on the road to appropriately independent behavior.

Cultural Perspectives on Independence

If you ask most parents in the United States to list the traits that they hope their children will exhibit, independence would be in the top ten. Placement within the list will depend on a variety of factors, including the cultural and ethnic background of the parents. Members of acculturated ethnic groups value independence more than recent immigrants.

The reasons for this difference are quite varied and are based on cultural norms and traditions that may be rooted in safety issues. For purposes of this article reasons for the difference don't matter as much as the fact that there is a difference, and, as a result, children who are cared for by caregivers who are from other cultures may receive very mixed messages and responses which may create less than optimum conditions for growth and exploration.

Safety is a primary reason for parents in many cultures to keep their children close and to emphasize independent behavior. Convenience and the nature of socialization are other reasons. Breast feeding access at will and appropriate toileting behaviors also require physical closeness.

From a cultural perspective, family closeness, loyalty, and filial responsibility are highly valued in many cultures. I can recall a conversation I had with a Mexican-American student about a disabled sibling. The siblings in the family play a larger role for the care of this brother, as the parents are aging, but Anna did not see this as a hardship. "He keeps the family together. He keeps us connected and strong." This conversation made me very aware of how a situation that could

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be viewed as a negative was a positive in a cultural paradigm that values family closeness and contact.

At last year's World Forum in Athens, I was able to talk to child care providers from many countries of whom many found the idea of child care across cultures intriguing and not something that occurs in their countries. While there is often a difference in social class between those who use child care and those who provide the care, in countries with limited immigration, there is cultural consistency which results in a more unified approach in regard to parental expectations and staff behaviors.

One woman I spoke to had worked in New York where the work environment was a virtual United Nations in relation to the cultural and ethnic groups served. She found the uniform culture to be the biggest difference between her UN experience and her current work environment in her country of origin. "We are all Turks," she said, "and it makes some things a lot easier."

At the same time, her experience in the United States gave her a clear perspective on the difficulties faced by parents who move to another country with cultural expectations that they do not know or share. "There were so many little things that I was unprepared for, things that I didn't know mattered to me, and this is my field! How could a parent untrained in this discipline ever understand, or fully communicate their wishes?" How indeed!

Impact of Differing Cultural Responses on Child

And what of the child? The child who has no frame of reference for the differences in care and responses that they may receive from their parents and the caregivers who spend a signinficant amount of active awake hours with them? When a young child enters a child care center or other care arrangement in or outside of their home, there is going to be a shift in who interacts with the child on a day to day basis and how the child is responded to. How the child is responded to connects with the child's social and emotional sense of self. Who we are and who we become is all linked to the care we receive.

Young children learn *who am I and who I am not*. In a traditional western mother-child dyad, this learning is centered in infancy, on the separation between a mother and an infant. The infant must learn that Mom is not a part of me that appears when I want her to. This awareness is a contributor to the child's first separation anxiety. An infant who has multiple caregivers must learn that *when I cry someone comes*. Will it be the same person or will it be a different person each time? Will this person be as responsive to the child's cries as their parents are?

A parent, particularly one who is away from their child all day, may respond to this separation by being super vigilant and responsive when they are home with their child. Every utterance is responded to quickly and with physical contact. A caregiver who is with a child all day has other responsibilities and is *guilt free* in her interactions with the same child. She will have a more moderate response to the same child.

Caregivers, particularly in group settings, encourage independent, self-care behavior among children. Parents may not follow through with this independent behavior at home, because of the time it takes, or because they prefer to think of their children as young and dependent. I can remember a three year old named Zack who was in the child care program at Pacific Oaks. His mother worked close by and would join him for lunch at least once a week. When she joined him, Zack would sit at the table while his mother took his lunch box out of his cubby, opened his lunch items, and prompted him to eat. He did these things on his own, like all the other children, when his mother was absent. His mother, Bea, was honest about her behavior, "He's my baby; I don't want to see him so grown up yet."

Who responds to me and how? Whose cues do I need to learn? Whom can I count on? And am I safe and secure? Is it okay to relax? These are essential issues for a child because there is a strong connection between attachment and security in caregiving situations and brain development. Put simply, when a child is in a state of agitation, the learning centers of the brain are fully involved in that state and unable to focus on anything else.

This is one reason why a child who is crying cannot be distracted with a puzzle. Aside from being poor practice because it does not respect how the child is feeling, a crying child cannot concentrate on a puzzle! They cannot focus on any learning tasks or situation as long as their agitation persists and the cortisol levels in their brains are elevated. Crying we can see. Simply coping we may not be able to see, especially if this is the typical behavior that a child has learned to exhibit in a care giving environment (Shore, 1997).

Importance of Collaboration

Consistency, rhythmicity. Are these values or attributes of a quality child care environment? Are all the involved adults on the *same page* when it comes to what is expected in the care of a young child? Are these and other issues under discussion or are the parents reluctant to admit just how much of their child's care and socialization others are doing.

Many parents believe that magically, all the important events and actions in their child's life happen during the time they are together. Some centers and child care providers collude with this by not telling parents if their child has achieved a milestone of some kind during the day, in

order that they may experience it for the first time. While this is a strategy that I understand, I believe it is not useful in getting parents to recognize the collaboration that must exist between themselves and their children's caregivers for the good of all concerned.

It is my belief that we need consistent standards of care for children who are in center-based or other non-parental care. We need to be able to communicate with parents about what staff will do with their children. How will they be fed? How quickly can they expect to be comforted when they cry? What is separation anxiety and what is our strategy for working through it? How do we feed the children in our care? What are our beliefs on self feeding and *family style* eating (including the nonjudgmental sharing of cultural differences).

And we need to learn about how children's needs are met at home. Understanding how meal times occur at home, understanding how much mess is allowable in some families, may not change center policies. These discussions do, however, add layers of understanding between parents and caregivers. Understanding parental values is often a window on the family's history. Enhanced understanding may lead to cooperative behavior and conversations as children get older.

Part of the care we expect children to receive is affection. We want our children to be held and hugged during the time they are apart from us. We all need affection, and even in this unfortunate era of heightened concern about inappropriate physical contact, it is very important to discuss the type of physical contact that a child is used to receiving at home. Professional boundaries as they relate to children should be discussed in an open and honest manner.

If there are male caregivers in a center, it is important to discuss their presence and their importance in the child care environment. Such conversations may allow parents to express their concerns about men in a child care environment. There are cultures where men who are involved in child care or a nurturing profession would be *suspect*. It is better to put such concerns out in the open, than to allow suspicions to fester which could lead to career ending charges being directed at a child care provider.

We need to discuss our beliefs when it comes to gender differences. Do you believe that boys and girls should be treated the same when it comes to being comforted and held? Social and physical aggression may be the result of prodding a young child to be tough or independent without regard to their actual feelings. In a diverse country such as the United States, where child care providers frequently do not come from the same culture as the families of the children they work with, the potential for differing values around gender role socialization is great. Centers must have a clear philosophy and receive *buy in* from all staff. It is not appropriate for each staff member to use his or her own cultural interpretation of gender related issues. The same pertains to conflict resolution, which frequently has gender defined expectations.

Shared Socialization

Understanding the shared socialization aspect of child care means dissecting these issues as a staff and presenting the information to parents as they are thinking about enrolling their children. Most parents will not have given a great deal of consideration to the issue of shared socialization, and many who do will opt for *kith and kin* care because of consistent values and confidence in the quality of care. Parents need to work with child care centers and providers so that consistency can be provided for their children.

The socialization model for children in group care situations is not the same as socialization within the context and culture of family, but it is not inherently of less quality. Difference is not necessarily a deficit. Recognizing the differences and actively discussing them is an important step to addressing the issues in a positive and proactive manner.

The current expectations that child care workers should subsidize the families of the children they care for must stop. In my home state of California the average salary of a child care worker is $17,420 a year. That may sound good, until you discover that the self-sufficiency income for a family of four is $44,739, more than twice what an average child care worker makes (The California Child Care Portfolio for 2001). Part of the socialization that parents are willing to share with caregivers is that they care, truly care, for their children. Dedicated child care professionals pay a great cost to do so. Their salaries are low, and frequently they must take second jobs, which deprives them of time with their own families. Parents cannot pay child care providers to love their children. Love cannot be purchased; it is not a commodity. Parents and society can and should reward financially the women and men who choose to do this important work. A shared vision of America's children as belonging to all of us, with a nation standing to benefit from their socialization and care, is one we should all be willing to support.

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