

The Nature of Relationships Between Young Children and Their Secondary Caregiver
In a Childcare Center Classroom

Chapter 1

Picture two toddlers around the age of 13 months entering the same daycare classroom for the first time. Both children show some signs of distress and apprehension at being in a new environment with many other children and several unfamiliar adults. Though they share many of the same child characteristics (e.g., age), responses to the caregivers and how each deals with stress take divergent paths over the next days and weeks. The first child, Aaron, seeks out one particular childcare teacher for comfort, assistance, and reassurance often and consistently. The second child Bethany, though having similar experiences as Aaron, for example getting hurt and crying, feeling tired and cranky, and missing mom, however does not go to any caregiver, but seems to 'recover' on her own. These examples (though composites) of actual children's relational styles to their non-primary caregiver as seen in childcare centers have obvious differences.

The purpose of my study was to understand and describe the varied and multiple relationships between children (approximate ages 12 to 24 months) and their childcare teacher in a center context. The negotiations involved in relationship formation can be as challenging for the young child as it is for adults. "Should I talk to her? Is this person approachable? What if he rejects me?" These internal self-messages begin in infancy at a neonate's first cry, and, not surprisingly, develop into a pattern of relating that manifests itself in a lifetime of relationship building and continuity. This relationship "dance" - is it simple? Complex? Paradoxically both? How do we learn the steps?

Traditional relational assessment would classify Aaron as being attached to a secondary caregiver in the absence of mom, while Bethany apparently has no relationship with a specific caregiver. However in classic attachment assessment she would be said to have an insecure-avoidant attachment relationship. Is this a true assessment? Are there other ways to look at, and therefore describe, the relational interactions and behaviors exhibited by children and their secondary caregivers? A closer, in-depth, and long look may reveal characteristics of these relationships between young children and their childcare provider in day-to-day interactions.

My research interests are based on Bowlby's and Ainsworth's Attachment Theory developed in the 1960s through their observations of children after a prolonged separation then reunification with their mothers. Bowlby (1980) believed in monotropism: that a child forms an attachment to only one caregiver, usually the mother. With the significant increase in using nonmaternal childcare for younger children (about 60%) (Fabes & Martin, 2000), more recent studies are documenting attachment with secondary, as well as primary, caregivers as attachment figures (Goossens, & van IJzendoorn, 1990; Howes, & Hamilton, 1993; Howes, & Smith, 1995a; Howes, 1999). These secondary attachment figures can be another family member or non-relative, as in a daycare provider, and play an important role in other contexts outside the home (Mardell, 1992). However one defines the members in a relationship or their context, most recent researchers agree on the identifying behaviors of attachment: proximity to caregiver is sought (particularly when an infant is in distress); caregiver provides a safe haven, and a secure base to explore from; a threat of separation from attachment figure

causes anxiety, fear, distress; and loss of caregiver causes grief and sorrow (Clinton & Sibcy, 2002).

With all the research on children's primary and secondary attachments in childcare, there are still questions about relational differences, assessment and classification, and the import of these variations on child outcomes. Bowlby himself proposed that "an attachment bond cannot be presumed to exist even though a relationship may contain an attachment component" (Cassidy, 1999, p. 13), which could explain children's apparent attachment to a childcare provider when the child exhibits some attachment behaviors in the absence of the parent. It is labeled secondary attachment, yet may not be; a child may be indiscriminately friendly with any available adult. What was previously labeled insecure-avoidant attachment between a child and his or her childcare teacher may instead be indicative of no relationship at all. The children could be said to be 'nonattached' (Howes & Hamilton, 1992b; Howes & Hamilton, 1993; Ahnert, Lamb, & Seltenheim, 2000). Pianta (1992) theorizes that the differences between mother-child attachments and teacher-child relationships may be one of intensity (level and strength of observable attachment behaviors).

Though van IJzendoorn, Sagi, and Lambermon (1992) concluded that children did become attached to their secondary caregiver, they reported this with some reservations. Their research gave more support for an integrated or network model of attachment: "the internal representation of a disrupted attachment relationship may have some *specific qualities and characteristics different* [italics added] from the representation developed through interactions with stable attachment figures such as parents" (p.17). Other researchers also conceded that children became attached to their childcare providers, yet

wondered if the flat affect witnessed in the avoidant child could be termed “disinterest” (Sagi, van IJzendoorn, Aviezer, Donnell, Koren-Karie, Joels, and Harel, 1995, p.88).

Howes (1999) raises the same questions about relationships in a childcare context being related to attachment. Maybe they are based more on a child’s perceived (intuitive?) feelings of safety in someone’s presence rather than the actual amount or quality of interactions exhibited by overt attachment behaviors. Even a decade ago, Howes (with Claire Hamilton) proposed that children’s attachment behaviors were qualitatively different in childcare relationships than with their mothers (Hamilton & Howes, 1992). Again in 1993, these same two researchers conducted another relational inquiry in childcare and observed, “very occasionally, the child did not appear to relate to any teachers” (p. 18). Howes continued to invite the same question in a later study asking if avoidant “children [could be] best characterized as independent” (Howes & Smith, 1995a, p.46). Socially competent children could possibly be misinterpreted as avoidant. Is there room in the attachment paradigm for non-attachments? If yes, how would one differentiate that from insecure-avoidant?

Much of the attachment research has been interested in the consequences to the relationships of children with their mothers while being cared for by someone else for a significant part of each day. Beginning with Jay Belsky (1988) and others, studies attempted to show the arguably deleterious effects of childcare on the very young child because of a significantly higher incidence of the mother-child insecure-avoidant category (Lamb, Sternberg, & Prodromids, 1992). Yet another study found the opposite, a lower incidence of insecurely attached infants enrolled in childcare (Burchinal, Bryant, Lee, & Ramey, 1992). In another 1988 study, Howes, Rodning, Galluzzo, and Myers,

found that some infants had an insecure attachment to their mothers, yet appeared to be socially competent in a childcare setting.

Research in the last few decades by the National Institute of Child Health and Human Development and others has concentrated on how children's relationships with non-maternal caregivers compares to the primary attachment paradigm, and how it may impact a child's behavior or outcome. Few researchers assessing infant attachment or relationships with secondary caregivers have used a qualitative approach. It may be that the full range of variation in early childhood relationships, including attachment, has not been identified. Jackson (1993) feels that there is justification for not applying Bowlby's monotropism to African-American infants, as they are typically in a multiple-caregiving milieu. This may be true for other children from different cultures, races, or ethnic groups that may not have been included in the originating attachment studies. She also encourages a more emic viewpoint within ethnographic studies, stating, "a culture-specific assessment procedure is clearly needed to fully characterize African-American infant attachment" (Jackson, 1993, p.98). This premise could be applied to children from other family backgrounds as well. Pianta (1992) also suggests the need for ethnographic research to broaden perspectives on relationships in childcare and school settings, especially as it relates to theory and policy.

Moreover, in attachment research, investigators have primarily used instruments designed to assess the mother-child relationship (primary), not secondary attachments, which may compromise an instrument's validity. Modifications to the Strange Situation have been suggested that would allow for greater latitude in assessing different relational dyads such as subtle differences between child-mother and child-caregiver (Sagi, van

IJzendoorn, Aviezer, Donnell, Koren-Karie, Joels, & Harel, 1995). Because children form relationships and attachments with multiple caregivers, “more complex means for studying children’s representational models of attachment are needed” (Pianta, 1992, p. 125).

Attachment literature consistently states that a child’s relationship to his or her childcare provider is paramount for socio-emotional well-being as well as maximizing cognitive development, yet most childcare centers employ a policy of disrupting these relationships on a regular basis by moving walking babies to the toddler room, and a year later, toddlers to the young preschool room. Further research, especially of a qualitative nature, may help to clarify the importance of children’s relationships informing childcare policy as it relates to room placements, transitions, and continuity of care for infants and toddlers. If infants and toddlers only become securely attached to those who respond to their bid for comfort and meet their physical and socio-emotional needs, and have formed their primary attachments already, what place do secondary attachments for infants and toddlers in full-time childcare have for their well-being?

Research on children’s relationship classification and its identifying factors has been based on the attachment theorists’ premise that attachment equals specific, observable, sequential behavior. Researchers have then made the converse assumption: that these same behaviors are equated with a true attachment. This has resulted in circular reasoning that may be based on a false assumption. Attachment theory and assessments were formulated on mother-child relationships. As attachment research grew and society changed with an increase in childcare, researchers expanded the attachment ‘box’ to include other relationships. The addition of the classification D should be a signal that

there may be other definers of adult-child relationships. Consideration should be given to drawing a new 'box' - possibly overlapping, but at least parallel with the current one, by looking at child-teacher relationships without resolutely employing the attachment lens.

The purpose of my study was to understand and describe the varied and multiple relationships between children (approximate ages 12 to 24 months) and their childcare teacher in a center context. Therefore, my research question is: What is the nature of observable relationships between children and their childcare teacher in their day-to-day interactions? Using an ethnographic approach, I hope to add to our knowledge base about child and caregiver relationships, and their parameters and identifying behaviors within the childcare setting.

Chapter 2

Literature and Research

Bowlby surmised from his research that children form mental paradigms, or internal working models, from care received. Through these they develop expectations about relationships with others, now and for the future (Fabes & Martin, 2000). Changes in internal working models are possible in other relational contexts, but they are constrained by prior adaptation, which is reciprocal. Conversely, internal working models do not cause later differences in relationship paradigms, but are almost certainly related to later outcomes. Outcome is the product of earlier history plus current circumstances (Weinfield, Sroufe, Egeland, & Carlson, 1999).

In Western cultures babies usually form a primary attachment (a reciprocal relationship where a baby's needs are being met) to their mother by the end of the first year, preferring their presence and care over all others, even though they also usually form multiple attachments to significant caregivers between birth and six months. Unlike the U.S., most cultures outside the West routinely have on-going multiple caregivers for a community's children (Field, 1996). The cross-cultural data from Mardell (1992) states, "in both industrialized and non-industrialized cultures, shared care is prevalent" (p. 206). Of 186 non-industrialized cultures, only five indicated exclusive infant care by mothers. Though children in American studies appear to show a form of hierarchy in their attachment relationships (primary, secondary, etc.) "additional attachment relationships do not replace or weaken previous attachments" (Mardell, 1992, p. 208). According to Marvin and Britner (1999), children display cautious or fearful behavior towards unfamiliar adults whether they are raised in a culture of single or multiple caregivers.

More recent attachment research has looked at the young child's different relationships outside the exclusive mother-child dyad. Because of this change in contextual dynamics it has been suggested, "more complex models [are needed to] include infants' interactions with several important adult figures (Fox & Bar-Haim, 2001, p. 298). van IJzendoorn, Sagi, and Lambermon (1992) suggested an expansion to four different attachment models to accommodate these different relations from a wider network of significant caregivers. The first two models, monotropy (attachment to one adult), and a hierarchical format where a child exhibits attachment behaviors with several adult caregivers but still prefers a primary one overall, are from Bowlby's theoretical framework. The third and fourth models are the result of more recent work: a child may be similarly attached to several caregivers (without a hierarchy) where each attachment paradigm operates singly in a specific context; or a child integrates all of his or her "attachment relationships into one functional working model...[where] a child would optimally function in a network of secure attachments and would be most compromised if the attachment network were totally composed of insecure attachments" (Fox & Bar-Haim, 2001, p.297).

Howes and Hamilton (1992a) contended that infants in childcare form first relationships with their mothers and childcare providers. Yet they state that relatively little is known about the relationship with the caregiver at daycare (secondary attachment figures), asking if they are the same as with the parent. The results of this study and one by Goosens and van IJzendoorn (1990) revealed that children exhibited the same attachment behaviors with caregivers as with mothers: proximity seeking and maintaining, and social referencing. Camras and Sachs (1991) found social referencing

of infants within a childcare setting to be selective. They hypothesized that “social referencing depends upon the perceived trustworthiness of the referencing target” (Camras & Sachs, 1991, p. 28), with facial expressions the most salient cue.

Ainslie and Anderson (1984) reported the same patterns of mother-child attachment in childcare settings between children and their teachers, and in similar distribution patterns. Globally they are approximately 21% Insecure-Avoidant/A, 65% Secure/B, and 14% Insecure-Resistant/C (Goossens & van IJzendoorn, 1990). Many studies have found a higher incidence of insecure-avoidant behavior in young children with substantial and early childcare experience (Clarke-Stewart, 1989; Howes, Phillips, & Whitebook, 1992). However, it has been suggested that these children may be reflecting a greater skill in facing the challenges of a strange situation (Thompson, 1998). Patterns of insecure attachment may be seen as adaptive, or a child’s appropriate response to a caregiver’s unresponsiveness. Both secure and insecure attachment can be considered adaptive since both result in proximity to caregiver (Weinfield, et al., 1999); they just differ in their subsequent behavior towards their caregiver (eg. resistant infant’s inability to be comforted).

Clarke-Stewart’s meta-analysis (1989) found that the increase in insecure infant-mother attachments for children in childcare was small, and believes it is not the only measure of child behavior or social competence. Another study that analyzed and replicated previous research that had found a higher incidence of insecurely attached children did not find a significant increase in insecurity for children in daycare compared to children with maternal/home care (Roggman, Langlois, Hubbs-Tait, & Rieser-Danner, 1994).

Faran, Burchinal, Hutaff, and Ramey much earlier in 1984, on the other hand, concluded attachment does not happen in daycare. They found that children did differentiate among caregivers and with different intensity based on the features 'proximity' and 'looking'. However, they also found that children did not typically prefer one caregiver to another, and were not stable in their preferences over time (6 to 12 months). "Although the behavioral patterns between infants and teachers seem to be very intense and even exclusive, the fact that they do not persist across time removes them from consideration as true attachment relationships, in our opinion."(p.155). Faran et al. (1984) also suggested that exclusive attachments at daycare may be maladaptive, and that a child who is happy to have his or her needs met by several caregivers is better adjusted, a line of reasoning followed in some centers where infants are not assigned to one or two consistent caregivers.

Howes and Smith (1995b) tested their hypothesis that children who were securely attached to their preschool teacher would engage in more cognitive activities. One of the predictors for secondary attachments is quality of childcare, which includes the factors of teacher sensitivity and positive interaction with the children. The researchers used the Early Childhood Environment Rating Scale (ECERS), developed by Harms and Clifford in 1980. It is one of the most commonly used measures for process (which includes teacher behaviors) rather than structural quality in a preschool classroom. A three-hour observation time in the childcare classroom is rated on a 1- 3- 5- 7 scale from inadequate to excellent (Bowman, Donovan, & Burns, 2001). This rating scale has often been used in childcare-attachment research, even though there are only three constructs for interactions

within the childcare center, and only one of these assesses the relationship between the child and the caregiver (Harms & Clifford, 1980).

The Infant/Toddler Environmental Rating Scale (ITERS) was developed by T. Harms, D. Cryer, and R. M. Clifford in 1990 to do the same thing as the ECERS except for the youngest children in childcare (up to 30 months). Process quality was assessed using both the ECERS and ITERS in the Howes, Phillips, and Whitebook attachment research in 1992. Authors claimed to have captured child-adult interactions and developmentally appropriate practice using these measures.

Some research supports daycare as being beneficial for attachment: Egeland and Hiester (1995) looked at the difference in effects of attachment with daycare and home-reared children, and found that daycare might have a positive effect on children who were classified as insecurely attached to their mothers. The quality of attachment relationships influences one another, as attachment qualities in one relationship predispose similar qualities in future relationships. Other cross-cultural studies, mainly the work of van IJzendoorn and colleagues, believe that multiple secure attachments for young children enhance their social and cognitive functioning (Sagi, van IJzendoorn, Aviezer, Donnell, Koren-Karie, Joels, & Harel, 1995).

In Raikes' 1993 study, positive outcomes for infants in daycare were associated with the quality of infant-teacher relationship. She believes that the length of time a high-ability teacher spends caring for an infant is an indicator of a quality relationship. Barnas and Cummings (1994) also found that distressed toddlers sought out a caregiver who had been with the child twice as long as other caregivers. The "presence of adequate alternative attachment figures in environments in which children are separated from their

primary attachment figures is expected to ameliorate the distress associated with such separations” (Barnas & Cummings, 1994, p.141).

Carolee Howes, one of the foremost attachment and childcare researchers, has found with co-researchers that children’s relationships with their childcare provider affected their attachment security and the children’s relationships with their peers (Howes, Galinsky, & Kontos, 1998). Subsequent caregiver training in sensitivity resulted in increased secure attachments (Howes, & Hamilton, 1993).

The largest and longest research project on childcare to date is now known as the *National Institute of Child Health and Human Development Study of Early Child Care*. Many articles have resulted, analyzing different factors of the data; included in this review are those specifically about relational aspects of childcare (NICHD Early Child Care Research Network, Summary, 1998).

For nearly a year in 1991, a team of over two dozen investigators across the United States collected extensive childcare data from 10 sites with multiple and varied demographics. Participants were recruited at birth, reducing sampling bias, using a conditional-random sampling plan from 31 hospitals in Little Rock, Arkansas; Orange County, California; Lawrence and Topeka, Kansas; Boston, Massachusetts; Philadelphia and Pittsburgh, Pennsylvania; Charlottesville, Virginia; Morganton and Hickory, North Carolina; Seattle, Washington; and Madison, Wisconsin. This longitudinal study has also followed most of the original 1,364 children since then (NICHD Study of Early Child Care, summary, 1998). Limitations for the whole NICHD study were lack of extreme samples of family dynamics, ill infants, and adolescent mothers.

The NICHD Child Care Study designed an instrument specifically for their use, the Observational Record of the Caregiving Environment, where children were observed at 6, 15, 24, and 36 months in their primary, nonmaternal child care settings in which the child spends at least 10 hours per week. The ORCE has three parts: Behavior Scales, Qualitative Ratings, and Structural Variables. Observers identified a caregiver and target child, and then recorded specific behavioral interactions between these two. Observations were recorded in four cycles of three 10-minute intervals with two minutes for writing during two visits to the childcare setting at each age.

The ORCE Behavior Scales included: communication, both negative and positive, asking questions, responding to the child's verbalizations; physical activities included restricting the child's activity, displays of affection, and regular care taking; responding to the child's negative emotions; and cognitive and social stimulation. Also recorded were the number of available adults, other children in the setting, child's positive and negative interactions with other children (specific interactions were noted at 24 and 36 months), and the activity the child was engaged in.

Part II, Qualitative Ratings, consisted of thirteen 4-point rating scales to attend to important qualities of the caregiving environment and the child's behavior in that environment. The environment was rated on caregiver's sensitivity or responsiveness to distress; sensitivity or responsiveness to nondistress, intrusiveness of caregiver on child's activities (control of child); caregiver's detachment or disengagement; stimulation of cognitive development; positive regard for the child; negative regard for the child; and flatness of caregiver's affect. The sensitivity, intrusiveness, detachment, and stimulation scales, developed to portray appropriate qualities of interaction with a 6 month old, were

adapted for toddlers and preschoolers.

The child's behavior in the caregiving environment addressed the qualitative rating scales of a six-month-old infant's positive or negative mood, activity level, sustained attention, and sociability (which described social initiations and responses to others in the caregiving environment). The scale was directed more at sociability towards peers at 15, 24, and 36 months.

Part III, Structural Variables, simply recorded the number of children of different ages and the number of caregivers at the beginning and end of each observation cycle.

The NICHD Child Care Study researchers created this instrument to assess evidence of caregiving and quality in both quantitative and qualitative ways, and to facilitate the recording process due to the demands of the study and the human limitations of the observers. It appeared there was no readily available instrument to collect this kind of data, as previous researchers had not faced the same challenge with the magnitude and scope of the NICHD study (www.NICHD.nih.gov/, p. 120).

This first NICHD study focused on caregiver behaviors (familial and non-familial), and childcare standards as they relate to positive care giving: child-adult ratios, group size, and staff education and training. Six-month-old infants were observed with their caregivers in their homes and in their daycare setting. Researchers asked: "What are the structural characteristics of infant child care settings? What are the characteristics and qualifications of infant caregivers? Are caregivers' behaviors related to these structural characteristics and caregiver qualifications? Do caregivers' behaviors vary in different types of settings?" (p. 275). Caregivers' characteristics were determined through

structured interviews resulting in ratings for these variables: formal education, training in child development or early education, experience in childcare, caregiver's own children present during the study, and beliefs about child rearing.

Correlations were significant between positive caregiving ratings and childcare settings with fewer children, lower child-adult ratios, more education for caregivers, and more nonauthoritarian child-rearing beliefs. Composite measures of positive nonmaternal caregiving were lowest for center-care, and highest for father-care.

One interesting result from this analysis indicates that caregivers' formal education and specialized training in child development did not significantly affect positive caregiving. Structural and caregivers' characteristics accounted for close to one-fourth of the variance in positive caregiving. Researchers found support for only two constructs in childcare standards: number of children in the group, as well as ratio to teachers; and a safe, clean, stimulating environment. As for differences in types of care, infants received more positive, sensitive care from relatives in their home compared to center-care, however, this variable is also related to small group size and child-caregiver ratio.

Overall, from this NICHD study, researchers found that 70%-80% of infants were receiving moderate to highly sensitive and positive care, much different (higher) results than previous studies on the quality of childcare. Differences in sampling, for example the inclusion of fathers and grandparents, and exclusion of adolescent mothers, the use and/or ratings of assessment tools, and definitions of terms, for example 'good', are possible explanations for the discrepancies (NICHD Early Child Care Research Network, 1996a).

Researchers then looked at several different features of childcare and the effects, if any, on a child's attachment classification with his or her mother. One thousand, one hundred and fifty-three infants in different types of care, including mother care, were part of the NICHD study. Research questions addressed the distribution of attachment classifications, whether similar for children in daycare or those cared for by their mothers; differences in attachment security based on childcare variables of quality, amount, age of entry, stability, and/or type; different combinations of these variables, plus mother-child factors, that indicate a change in attachment rates of security; and early childcare's specific relationship to the insecure-avoidant category.

Home visits were conducted when infants were 1, 6, and 15 months old. At different times throughout the study, mothers completed the Neuroticism Extraversion Openness (NEO) Personality Inventory, a modified Infant Temperament Questionnaire, and the Center for Epidemiologic Studies Depression Scale. Mother and infant dyads were videotaped at the two later home visits with the Infant/Toddler HOME scale completed by the home visitor. Children were observed in their daycare context at 6 and 15 months old with behavior recorded in the Observational Record of the Caregiving Environment, specifically developed for this project. ORCE variables Positive Behavior, Responsivity, and Stimulation scores were combined for a composite variable Positive Caregiving Frequency. Finally, the Strange Situation in a laboratory playroom was conducted with their mothers when infants were 15 months old.

Results did not show a significant difference in attachment classification

distributions between children in childcare and those at home in the care of their mothers. The authors concluded that the Strange Situation is a valid instrument for assessing attachment in both populations. Two mother/child variables were significant predictors of secure attachment: Psychological Adjustment, and Sensitivity, both from measures of the HOME assessment instrument. Type of care: mother, father, other relative, in-home non-relative, child-care home, or child-care center was not significantly related to attachment categorization, particularly Insecure/Avoidant (fourth research question). Nor was attachment classification related to childcare enrollment. There were six (of 25) interactive variables that significantly affected attachment rates, of which five included insensitive caregiving from the mother. Dual risks, or a combination of factors, resulted in higher incidences of insecure attachment.

The research also indicated better secure attachment probabilities for children from these home environments but who were receiving low amounts of high-quality nonmaternal childcare (compensatory effect). Overall, conclusions drawn from this study indicate that nonmaternal childcare does not significantly affect the mother-child attachment relationship. (NICHD Early Child Care Research Network, 1996b).

Descriptive statistics from this study revealed that more than 80% of infants were in full-time childcare during their first year of life with the average age of entry before they were four months old. Data was collected for this part of the study by home interviews with the mothers, and their filling out a basic demographics questionnaire, with telephone interviews in four subsequent months. The five aspects of childcare history considered were age of entry, amount of care, type, childcare

starts and stops, and multiplicity and stability of care. Average hours of childcare for first-time infants were 29 per week, slightly more hours per week for those in full-time daycare (more than 30 weekly hours).

Mother's work status and schedule determined type of childcare that first year. Although the majority of infant care was by fathers or other relatives, this changed to center-care after child's first birthday. Only 38% of infants in nonparental childcare remained in the same arrangement their first year. By 12 months of age, over a third of the children had been in three different childcare arrangements. However, the vast majority of infants were in only one childcare arrangement at any given time. Interestingly, once enrolled in childcare, few infants went back to maternal care, and more than a third of these mothers were not working or in school (NICHD Early Child Care Research Network, 1997a).

This investigation endeavored to determine the validity for the use of the Strange Situation in classifying children's attachment to their mothers when children had been in full-time daycare during their first year. Further inquiry was made into the effects of different childcare experiences on attachment, including interaction effects or different combinations of factors. The researchers' goal was to determine characteristics of the mother and child that influenced increased or decreased rates of insecure-avoidant attachment classification.

One of the distinctions of high quality childcare is the characteristic of the teacher and her nurturing responsiveness to children in her care. In other words, relationships between children and their childcare providers are paramount in providing good care. The NICHD study identified these factors in positive caregiving

behavior: positive affect, positive physical contact, response to distress, response to vocalization, positive talk, asking questions, other talk, stimulation of cognitive or social development, and facilitating infant's behavior. Their study showed daycare with a quality teacher had a positive and compensatory effect on infants who were insecurely attached to their mothers. Children with less responsive/sensitive mothers and were insecurely attached did worse in poor quality daycare, as they would have much less of a chance to form a secure attachment with a secondary caregiver.

Results of an ANOVA provided support for the Strange Situation as a valid attachment assessment instrument for children with extensive childcare. Children's distress ratings during mother's absence were no different for the two groups of infants (in childcare or not). The effects of different childcare variables on attachment security analyzed through logistic regression showed none of the five childcare variables (quality - positive caregiving ratings and frequency, amount of care, age of entry, frequency of starts/changes in childcare) were significant in predicting attachment security. As stated in an earlier NICHD study (1996b), there were six (of 25) interactive variables that significantly affected attachment rates; five of these included insensitive caregiving from the mother. The group with the lowest rates of secure attachment had the dual-risk factors of low maternal sensitivity and more than one childcare start. The sixth significant interactive variable was child's sex times amount of care. Type of care was not significantly associated to attachment classification.

Quality of care was another significant factor in determining attachment: children with less responsive/sensitive mothers and in low-quality daycare were more

likely to be insecurely attached to their mothers. However the NICHD findings did not support greater incidence of insecure/avoidant attachment for children in childcare (NICHD Early Child Care Research Network, 1997b).

This next article from the NICHD study reported on pre-existing family characteristics, economics, and psychosocial factors that may influence a child's use, age of entry, type, and quality of childcare. Researchers wanted to know how family demographics, a family's economic situation, and mother's beliefs about her work and child rearing relates to or affects the four previously stated factors of childcare use.

Family characteristics evaluated were ethnicity, sex of child, number of children in the family, maternal education, and presence or absence of partner. Economic factors recorded were mother's income, hours worked for pay, nonmaternal income, and income-to-needs ratio (total family income divided by the poverty threshold for each family size, based on U.S. 1992 Census).

Five psychosocial characteristics were measured: maternal well-being and personality (Center for Epidemiological Studies Depression Scale, and NEO Personality Inventory), social support and stress (The Relationships with Other People Scale, and Abiding Parenting Stress Index), maternal attitudes toward separation and working (Separation Anxiety Scale, and Attitudes Toward Maternal Employment Questionnaire), child health and temperament (4-point scale on health, and Early Infant Temperament Questionnaire), and quality of child's home environment (Home Observation for Measurement of the Environment Scale).

Childcare variables were recorded from parent/caregivers' reports, the

Observational Record of the Caregiving Environment, and an abbreviated form of the Assessment Profile for Early Childhood Programs.

Multivariate analysis revealed that family economics were the salient factors in determining the amount and kind of nonmaternal care for infants; however, mother's attitudes and beliefs also contribute to the amount of childcare. The type of care was also influenced by other factors: family size, maternal education, number of children in family, income, and mother's beliefs about the affects of her employment on her children.

Quality of care is related to many features of care as well as family demographics. Results indicated that children from families with the highest and lowest income levels received the higher quality of care. Nonlinear effects were found to exist for age of entry; the main difference was due to type of care (NICHD Early Child Care Research Network, 1997c).

This piece of the NICHD study investigated the consequences of parenting, early temperament, and childcare during the first three years of life as it relates to the child's self-control, compliance, and problem behavior. Prior research has mixed results: indications of less self-control and compliance, and greater problem behaviors in children with more childcare hours, as well as no difference has been found. One factor not included in previous studies that has been added to the NICHD study is quality of care and how it affects outcomes. Multiple aspects of childcare quality that are rated high are hypothesized to engender fewer behavior problems and more cooperation from children in full-time childcare. "The current investigation examines which, if any, childcare experiences in the first years of life (eg. quantity, quality, stability) predict self-control, compliance, and problem behavior at 24 and 36 months

of age and where child and family factors moderate these effects” (p.1148).

Childcare selection can be affected by many different factors. Family income (income-to-needs ratio), and mothers’ psychological adjustment were the two chosen as selection-effect covariates. Family and child characteristics that may interact with childcare variables: child gender, temperament, mother’s positive behavior, and mother-child attachment, were predictors entered into the analysis. Mothers and researchers/observers using the ORCE recorded different aspects of childcare: age of entry into care, quantity, stability of care, and whether child was in group-care (based on other studies, a salient factor in problem behavior). Measures for child’s compliance, self-control, and problem behavior were assessed at 24 and 36 months using the Child Behavior Checklist; the Adaptive Social Behavior Inventory; The Cleanup Task, Resistance to Temptation, and The Three Boxes Interaction Procedure (all set-up and videotaped in the laboratory); and compliance with the Bayley Test examiner.

Outcomes for the first assessment analysis at 24 months indicated that a child with more hours in childcare, and in lower-quality care exhibited less social competence and more problem behaviors, as reported by mother and childcare provider. At 36 months, quality of childcare was also significant for three factors as children in group-care rated positively in three categories: cooperation with mothers, less negative interactions with mothers, and fewer behavior problems at childcare. Among all the childcare variables, quality was the most reliable predictor for child outcomes at both tested ages. Children were typically in better quality childcare when mothers were psychologically healthier and families had higher income, which may

be due to sampling, those included and excluded by choice and design.

However, this study concluded that overall, family factors rather than childcare were stronger predictors of child outcomes. "...what transpires in the family appears to be more important in explaining children's early social and emotional development than whether children are cared for by someone other than their mothers on a routine basis or the quality, quantity, stability and type of care, or age of entry into such care" (NICHD Early Child Care Research Network, 1998a, p. 1168).

This study looked at family factors to determine if early child care experience made a difference in predicting cognitive and social-emotional outcomes for children when two and three years old. The two groups were children enrolled (as infants) in non-familial childcare for more than 30 hours per week, and those who averaged less than 10 hours per week. Researchers hypothesized that the second group, children cared for primarily by their parents, would more strongly predict tested outcomes.

Predictor or family variables included were income-to-needs ratio, marital status, NEO Personality Inventory, Center for Epidemiological Studies Depression Scale, Attitude Toward Employment Questionnaire, Child-rearing attitudes and values questionnaire (these last four assessments are filled out by/on the mother), and infant-mother attachment classified by the Strange Situation.

Child outcomes were determined by administering the Bayley Scales of Infant Development (Mental Development Index) to the child at two years of age, the Bracken Basic Concept Scale (school readiness), and the Reynell Developmental Language Scales (expressive vocabulary) at three years of age. Three measures were used to determine child's social competence and problem behaviors: a questionnaire

filled out by mother, the Child Behavior Checklist, and the Adaptive Social Behavior Inventory. All were completed on each child at two and three years of age. Through factor analysis they yielded three composite factors: Express (sociability and empathy), Comply (prosocial engagement and cooperation), and Disrupt (resistant and antagonistic behavior).

Multivariate analysis revealed no differential associations between family factors and child outcomes based on childcare attendance. Therefore, their hypothesis was not supported; for both groups of children predictor-outcome correlations were mostly what would generally be expected. Children benefited from positive characteristics within the family (eg. maternal attitudes, income) whether they were in childcare or not. Results of this investigation indicate that overall, effects of family factors on child outcomes do not appear to be influenced by early, full-time child care (NICHD Early Child Care Research Network, 1998b).

Associations between the amount, quality, and stability of childcare and mother-child interaction were explored in this part of the NICHD study. As stated earlier (1997b) the researchers did not find that daycare had a significant effect on attachment security between 15-month-old children and their mothers. These researchers asked if there are predictors (positively or negatively) in the amount, instability, or quality of childcare of the quality of the mother-child interactions during the child's first three years.

Mother-child interactions were videotaped at each of the four ages (6 and 15 months at home, 24 and 36 months in the laboratory). Data was coded and rated on a composite of maternal sensitivity (positive, responsive, nonintrusive, and supportive

care). A child positive engagement composite (child engagement and positive mood) was recorded at 15 and 24 months. Data on childcare and maternal employment were collected via telephone every three months, and data for quality of childcare was taken from the ORCE.

Researchers “tested the extent to which mother and child interaction qualities varied as a function of selected demographic, child, family, and childcare factors and whether those patterns of association changed over time” (p. 1404), using a repeated measures regression model. Child variables included their temperament (mother reported), and gender. Family factors were marital status, maternal depression, and maternal separation anxiety.

Results indicated a small but significant relationship between more childcare hours and slightly less sensitivity from mothers and child engagement. Higher quality care was also somewhat associated with more positive and sensitive maternal interactions, which did not alter over the time periods tested. Childcare did not affect (either way) 15-month-old children’s secure attachment to their mothers (NICHD Early Child Care Research Network, 1999a).

In past research, childcare standards have shown to be important in young children’s optimal development across many domains. Another study outlined this issue based on the data from the NICHD childcare study. Does higher quality childcare relate to improved cognitive, language, and social-emotional proficiencies? The American Public Health Association and the American Academy of Pediatrics formulated national childcare standards in 1992. Three of these recommendations were used in this correlations study: staff-child ratio, group size, staff training and

education. Possible covariates were family factors of income-to-needs ratio, maternal education, marital status, child gender, and maternal sensitivity. Child outcomes were measured using the Bayley II Mental Development Index, the Bracken Basic Concept Scales, The Reynell Developmental Language Scales, the Child Behavior Checklist, and the Adaptive Social Behavior Inventory.

Results of the multivariate analysis supported their hypothesis: overall outcomes for children were better at both tested ages (24 and 36 months) as more standards were met for childcare centers. Highest scores were obtained for 24 month-olds for met staff-child ratio recommendations. At 36 months, caregiver training and education was the most salient factor. However, the more standards that were met, the better all of the tested outcomes. For family variables, only two (income-to-needs ratio and maternal education) were associated with met standards at 24 months, and at 36 months, only maternal sensitivity was related. A post hoc analysis did not reveal any age threshold for standard effects.

Authors noted the study revealed overall poorer care for infants and toddlers as compared to preschoolers, recommending more stringent requirements that childcare standards be met as a minimum of care for all ages of children (NICHD Early Child Care Research Network, 1999b).

In a previous NICHD article (1996a), researchers observed and measured infants' care at 6 months; this study analyzed the same variables when participants were 15, 24, and 36 months old (the last of the four age-groups tested to date). The purpose of this investigation was to determine any correlates between childcare structures and caregiver characteristics, and the quality of care. These factors are ratio and group size, the physical

environment, type of care, caregiver education and specialized training, caregiver beliefs about childrearing, and caregiver experience. The childcare site was appraised at all three ages of the children using the ORCE, and the Assessment Profile for Early Childhood Programs.

Results showed higher positive caregiving correlated with lower child-adult ratios, smaller group sizes, higher levels of caregiver education, and caregivers with child-centered beliefs. As expected, types of care with the lowest child-adult ratios and group size (father, grandparent, and in-home care) had best predictive values for positive caregiving, as did centers with the smallest ratios and class sizes. Disturbing findings relate that all types of care had the most common category of ‘somewhat uncharacteristic’ for positive caregiving ratings, around 50% for all three ages. Of all types of care, childcare centers rated the lowest levels of positive caregiving, in spite of having the most highly educated and trained staff with more experience and child-centered beliefs than other caregivers. This was true only for the youngest ages (6 to 24 months), with little differences found at 36 months.

Researchers found in this extended analysis that measures were comparable at the older ages as they were for the 6-month-olds in all three areas examined: correlations between childcare and caregiver characteristics and their effects on positive caregiving, differences in caregiving based on type of care, and overall childcare quality.

Another question this study attempted to answer was to estimate the quality of childcare nation-wide by extrapolating their existing data, employing an analysis procedure to impute missing data (childcare not observed). Childcare enrollment data

was estimated from the National Household Education Survey's 1998 records. This analysis indicated that overall caregiving for young children in the United States was very similar to the results of this study with data from nine states: 60% (US) compared to 61% (NICHD) for the lower two ratings of positive caregiving- 'somewhat uncharacteristic' and 'not at all characteristic'.

The authors also found (surprisingly) that caregivers' specialized training in child development did not correlate to positive caregiving. Possibly childcare workers' innate personal characteristics might play a more significant role in behavior towards and care of young children than is currently perceived. They concluded, "the strongest and most consistent predictor of observed positive caregiving was the child-adult ratio" (p.131), which is a policy issue that needs to be addressed nationally (NICHD Early Child Care Research Network, 2000).

Research questions for this part of the NICHD study focused on childcare factors that might influence a three-year-old's attachment to his or her mother after controlling for maternal, family, and child variables. Stability of attachment classification between 15 and 36 months was also looked at as it relates to childcare. The Strange Situation was the measurement for attachment at 15 months. A modified Strange Situation by Cassidy et al. in 1992, the MacArthur Working Group on Attachment system, was used to code attachment at 36 months. Demographic variables for mother, family, and the child: income-to-needs ratio, maternal education, marital status, maternal psychological functioning (Center for Epidemiologic Studies Depression Scale), parenting behavior and attitudes (HOME), maternal sensitivity, child positive engagement of mother, child compliance, mother-

reported behavior problems (Child Behavior Checklist), and child's social competence (Adaptive Social Behavior Inventory). Again, the childcare factors included in the study were age of entry, amount of care, number of arrangements, type of care (at 36 months), and quality of care.

Multiple regression analysis revealed that income, maternal sensitivity, and child gender were significant predictors of attachment, while at the same time results indicated that childcare variables were not associated with attachment at 36 months. Interaction effects were significant for only one pair of variables: maternal sensitivity and hours per week. For children with sensitive mothers and who had more hours in care, this usually led to secure attachments (B). Children with less sensitive parenting had higher incidents of insecure-resistant/ambivalent attachments or C.

The proportions of children in each attachment category were the same for each age tested (15 and 36 months). "Overall stability between the two ages was significant but modest" (p. 856). Factors that influenced attachment changes from secure to insecure were higher income-to-needs ratio, mothers with less education and sensitivity, girls more than boys; and starting daycare at least 10 hours per week after 15 months.

Interaction childcare variables were not significant for a change in attachment security/insecurity in either direction, nor were there main effects of childcare on the 36-month attachment classification. As has been reported previously, more hours in care per week combined with less sensitive mothering led to higher rates of insecure attachment.

Authors claim some validity of the MacArthur attachment coding system for

preschoolers. NICHD researchers believe that family factors have more influence than child care factors on mother-child relationship, but full-time daycare may stress already strained (insecure) relationships between children and their mothers (NICHD Early Child Care Research Network, 2001).

A summary of the NICHD childcare study revealed these results: More than 80% of infants were in full-time childcare during their first year of life with the average age of entry before they were four months. By 12 months, over a third of the children had been in three different childcare arrangements. Caregiving for young children in the United States was very similar to the results of this study with data from nine states: 60% (US) compared to 61% (NICHD) for the lower two ratings of positive caregiving- 'somewhat uncharacteristic' and 'not at all characteristic'. Overall poorer care was found for infants and toddlers as compared to preschoolers.

Childcare centers rated the lowest levels of positive caregiving, in spite of having the most highly educated and trained staff with more experience and child-centered beliefs than other caregivers. This was true only for the youngest ages (6 to 24 months), with little differences found at 36months. Characteristics of the teacher and her nurturing responsiveness to children in her care correlated with high quality childcare, and quality teachers had a positive and compensatory effect on infants who were insecurely attached to their mothers.

As for childcare influences on children's attachments, there was no significant difference in attachment classification distributions between children in childcare and those at home in the care of their mothers. None of the five childcare variables (quality - positive caregiving ratings and frequency, amount of care, age of entry, frequency of

starts/changes in childcare) were significant in predicting attachment security. However, the group with lowest rates of secure attachment had the dual-risk factors of low maternal sensitivity and more than one childcare start. No support was found for previously reported greater incidence of insecure/avoidant attachment for children in childcare, except for children with the dual risk of less responsive/sensitive mothers and in low-quality daycare.

Results of the NICHD child care study concluded that nonmaternal childcare in and of itself does not significantly affect or change a child's primary attachment (NICHD Early Child Care Research Network, 1996b). Interestingly enough, the child-secondary caregiver (childcare) relationship was given only a cursory glance, and that only comparatively with the mother-child relationship, or some other childcare factor such as type of care. "These findings strengthen the argument [and lend support for the integrative model] that attachment relationships are constructed through ongoing interactions between children and their attachment figures" (Howes, 1999, p.684).

Theoretical/Conceptual Framework

For a fuller understanding of previous studies, a thorough review of dominant theories in child development, as well as assessment instruments used in the attachment/relational research follows. The most commonly used attachment assessment instruments have been the Strange Situation and the Attachment Q-Set/Sort. "The study of patterns of reunion behavior following brief laboratory separations through the use of Ainsworth's Strange Situation has played a central role in the study of infant social-emotional development" (Cassidy, 1990, p.94). In more

recent research other attachment/relational assessment tools have been designed, or existing ones modified. Information on these somewhat lesser known models have been included in the following descriptions.

The foremost theorist in childhood relationship formations is John Bowlby (1907-1990); a graduate of Cambridge University, he received training in medicine and psychoanalysis (Crain, 2000). Bowlby developed the theory that all children become emotionally attached to their primary caregiver, regardless of the treatment they receive (Fabes & Martin, 2000). A strong relationship between infants and their caregiver(s) is seen in the child's attempts to attract their attention, and to remain close to the person who is most likely to meet their emotional and physical needs; "...many of the most intense of all human emotions arise during the formation, the maintenance, the disruption, and the renewal of affectional bonds" (Bowlby, 1979, p. 69).

With development comes mobility and increased interest in their world- securely attached infants feel safe to move away from caregivers to explore their environment, a basic component of early learning. Two types of attachment behaviors were observed: signaling or calling to the mother, or caregiver to child, and child behaviors of crying, babbling, and smiling; and approaching- child goes to mother and /or tries to stay close by following, crawling, reaching, and clinging (Bowlby, 1980). Ethologists propose that infants have evolved physical and behavioral traits that activate a parent's caregiving system, such as a round head, large eyes, random arm movements, and crying (Cassidy, 1999).

The four distinct phases for the development of attachment behavior are:

- Orientation and signals without discrimination: birth to 2 months
- Orientation and signals directed towards caretaker(s): 2-6 months

Proximity to caretaker; locomotion and/or signals: 6 months to 3rd year
Goal-directed partnership: 3+ years (Bowlby, 1980, p. 267).

Separation and detachment behaviors first came to Bowlby's attention in England when observing juveniles who were institutionalized for theft. Especially revealing was the discovery of the common denominator that the majority of these boys had a significant (if not permanent) period of separation from their mothers or families earlier in their lives. Later, during WWII, he observed much younger children separated for weeks or months at a time from their mothers or any other familiar caretaker, and also placed in an institution, hospital or nursery (Bowlby, 1980). Bowlby documented three phases of separation behavior or loss of parent: protest, despair, and detachment (first labeled denial) (Bowlby, 1979). He also concluded that children are usually able to feel more secure with unfamiliar, alternative caregivers by their third birthday (Marvin & Britner, 1999).

A study conducted in Italy in the early 1990s examined infants' daycare adjustment after three and six months in center care as compared to stay-at-home children. Based on Bowlby's research on despair and detachment in institutionalized children, researchers found that after about four months in childcare children who showed signs of distress at the beginning of care were crying less, smiling more, and had more positive interaction. They felt the children had adjusted and "showed little of the despair or detachment found in infants who experience prolonged separation from their mothers" (Fein, Gariboldi, & Boni, 1993, p.12). Another analysis of this same study by Fein (1995) suggested that length of children's time in childcare affects the outcome of behavioral assessments. Though she believes that there were evidences of despair and detachment (although in lesser degrees than Bowlby's subjects), Fein thought that

infants' temperament and caregivers' warm responsiveness were mediating factors. More detached or quiet children received less attention from caregivers, as self-soothing infants can be easily and understandably overlooked. Another study found similar results through a comparative analysis: infants/toddlers had adjusted to childcare transitions after a month. Children who were moved to a new room with a close friend did better than their 'friend-less' counterparts (Field, Vega-Lahr, & Jagadish, 1984).

Bowlby's "control theory of attachment behavior" (Bowlby, 1980, p.180) has its background in psychoanalysis and ethological theory as well as having an evolutionary perspective. Bowlby considered signaling behaviors (crying, smiling, and babbling) in infants to be innate, and a result of evolutionary development with the purpose for primates and humans to be protected from predators. He proposed four principles of development that predisposes infants towards humans that are necessary for attachment to a specific human in later months: bias for looking at patterns and objects that move, ability to distinguish the familiar from the strange through exposure, to approach the familiar and withdraw from the strange, and to remember and utilize the feedback from results of these interactions (Miller, 1993).

Though "psychoanalysts have from the first conceived of social relations in man as being mediated by instincts which stem from biological roots and impel the individual to action" (Bowlby, 1979, p.25), Bowlby, researching and working in England as a psychoanalyst, was the first to bring attention to the work of ethologists (Miller, 1993). He believed that the disciplines of ethology and psychoanalysis overlapped. "...[the] work of ethologists...[a] body of biologists studying the behavior of wild animals who were not only using concepts, such as instinct, conflict, and defense mechanisms,

extraordinarily like those which are used in one's day-to-day clinical work, but who made beautifully detailed descriptions of behavior and have devised an experimental technique to subject their hypotheses to test...ethology, I believe, is studying the relevant phenomenon in a scientific way" (Bowlby, 1979, p. 27). Lorenze's work with animals (for example, monkeys and ducks) resulted in the discovery of species-specific reflexes and fixed action patterns that led to baby staying close to mother and vice versa. He also learned that attachment to a primate's mother was not dependent on nutrition or physical comfort (lack of food or physical abuse does not negate attachment) (Miller, 1993).

A major difference between ethology and social learning is the latter theorists believe that behavior needs to be reinforced, while the former do not. Though Bowlby believed that ethology, based on instinct, and learning theory were not totally incompatible or mutually exclusive in explaining infant behavior, as components of each are complimentary (Bowlby, 1979).

Bowlby looked beyond purely physical actions and reactions, as Freudians, ethologists, and evolutionists had concentrated on, and demonstrated that attachment relationships are dynamic, on going, and reciprocal. Behaviors and characteristics of both child and caregiver are essential (Miller, 1993; Cassidy, 1999; Howes, 1999). "Main (1990) proposed that the biologically based human tendency to become attached is paralleled by a biologically based ability to be flexible to the range of likely caregiving environments" (Cassidy, 1999, p. 7), which has led to research on secondary and multiple attachments.

Mary Ainsworth (1903- present) came from Canada to work with Bowlby at the Tavistock Clinic in the early 1950s. From there she went to Uganda and conducted a

naturalistic study of infants and mothers in their homes. As in London, the same attachment behaviors were seen, as they were later in her studies in the U.S. with mother-child dyads in white, middle-class homes in Baltimore (Bowlby, 1980).

Ainsworth, with colleagues Blehar, Waters, and Wall (1978) developed the Strange Situation to assess and classify the child's attachment relationship to his or her mother. It was designed to activate the child's attachment behavioral system due to stress at the presence of a stranger in mother's absence. It is the only validated instrument for 12-20 month-olds (Weinfield, 1999). The two main attachment behavior domains are proximity seeking and social referencing. Proximity seeking is employed when a mobile infant is in distress, fearful, tired, ill, and/or in need of assistance. Social referencing refers to the child using their attachment figure as a secure base for exploration and play when the environment appears safe or the child feels assured that their primary caregiver would be available if needed.

The toddler (15 months old in the NICHD study) and his or her mother are videotaped from a playroom during a specific, guided routine of three-minute episodes where the child is eventually left in a strange room with toys and a person he or she does not know. The revealing performance of the child at the reentry of his or her mother is the key element in the classification of the child's attachment paradigm. Four child behaviors are rated by a trained coder in each of the reunions: proximity and contact seeking, contact maintaining, resistance, and avoidance.

Ainsworth later categorized these attachment behaviors into three patterns: A: secure/avoidant, B: secure, and C: insecure/resistant or ambivalent (Bowlby, 1979), with subcategories (A1, A2; B1, B2, B3, B4; C1, C2) that delineated more specific behaviors

(Ainsworth, Blehar, Waters, & Wall, 1978).

Secure infants use the mother as a secure base for exploration, and turn to her for comfort. They also display a desire to interact or communicate with her. Avoidant infants show obvious avoidance of their mother at reunions, even ignoring bids by her to play or come to her. They are generally not distressed by her absence. Resistant infants are visibly upset by the separation and seek contact with their mother yet at the same time push her away, often angrily (www.NICHHD.nih.gov/, p.185).

Ainsworth also developed a 9-point scale of the most salient qualities of mothering associated with the secure attachment classification: mother's sensitivity to baby's signals and cues, and to interpret correctly and respond promptly to meet her child's needs (Bowlby, 1979). From this came the Ainsworth "rating scales for caregiver qualities: Sensitivity to Signals, Cooperation-Interference, Acceptance-Rejection, Availability-Unavailability" (Weinfield, et al., 1999, p. 71).

Her four-phase model for the development of an attachment is similar to Bowlby's:

Preattachment: 0-2 months: Nondiscriminate responses to caregivers;
reflexive rather than voluntary behaviors;
positive response to both social and nonsocial stimuli.

Attachment-in-the-making: 2-6 months: Clear preference for social stimuli;
positive response to familiar caregivers but not to
unfamiliar ones; no single attachment preference observable.

Clear-cut attachment: 7-12 months: Clear preference for a single attachment
figure; evidence of stranger and separation anxiety.

Goal-corrected partnership: 48 months: Recognition that caregivers have feelings
or goals that may be different from the child's;
attempts to change caregiver's plans and goals and become
a partner in planning how the relationship proceeds.

(Fabes & Martin, 2000, p.196).

Ainsworth was attentive to the role of the attached parent as the secure base from which a mobile infant would periodically and briefly depart to explore the environment, only to return for reassurance if frightened or unsure of something they had encountered (Miller, 1993). Secure infants that are confident of their attachment figure's sensitive and responsive care and availability become confident in their own interactions with the world (Weinfield, et al., 1999).

In 1990 Main and Solomon added the disorganized or D classification due to an increase in behaviors that were difficult or impossible to classify. For this category, infants usually do not have a coherent strategy for dealing with separations and reunions from caregivers, acting inconsistent, perplexed, and/or disoriented. Behaviors displayed that seem to be without a pattern or rationale could be contradictory, stereotypes and anomalous postures, freezing and stilling, or fear of the parent. A primary D classification is assigned when a child's disorganization is rated 6 or above on a 9-point scale, followed by a secondary ABC classification if the infant's behavior is classifiable in the traditional system; if it is not, a secondary classification of U/unclassifiable is given (www.NICHHD.nih.gov/, p.185). A significant number of abused children have been classified D (Fabes & Martin, 2000).

Based on the MacArthur Working Group's research on attachment classification led by Cassidy and Marvin, a modified Strange Situation procedure (the MacArthur System), was used to assess attachment security for three year olds. This procedure was designed to be only moderately stressful for the child. After three minutes in a room with toys and adult- and child-size chairs, the mother leaves for 3 minutes (unless the child was distressed, in which case the mother returned to the room early). After a 3-minute

reunion, the mother leaves again, this time for 5 minutes. The assessment was ended 3 minutes into the second reunion. Research assistants were trained and certified to conduct this modified Strange Situation.

Preschooler's assessments were classified according to the same coding system as Ainsworth's secure (B) or insecure (A, C, and D), but with slightly different descriptors for the constructs based on more developmentally-appropriate behavior due to their older age than the typical Strange Situation child of 15 months. Coders also rated child's overall security on a 9-point scale with 1 being very insecure and 9 very secure. (www.NICHHD.nih.gov/, p.185).

Validity evaluations of attachment instruments include correlations to the most recognized antecedent of attachment security: maternal sensitivity. Ainsworth's data from her Baltimore study showed a .78 correlation (Clarke-Stewart, Allhusen, & Goosens, 2001). The NICHD study found evidence of stability for the traditional ABC Strange Situation classifications from 12 to 18 months, at least for infants from low-risk families (www.NICHHD.nih.gov/, p.185).

The California Attachment Procedure (CAP) was designed specifically by Clarke-Stewart, Allhusen, and Goosens (2001) to address the issue of possible miscoded attachment assessments using Ainsworth's Strange Situation for children who were in childcare regularly. The assumption is that children in daycare may react differently to a stranger than children who are cared for at home by their parents, that is less fearful, therefore not activating attachment behaviors as vigorously. CAP is still a laboratory set-up but with other stimuli to evoke proximity-seeking behavior in toddlers. Besides unusual-looking or sounding toys/objects, the stranger introduced is

unlike a typical childcare provider, someone that would be unfamiliar to all children and therefore have a greater possibility of eliciting a fear response. Also for this laboratory situation the child's mother does not leave the room, unlike the Strange Situation. However, the same attachment classifications are used to code the CAP (Clarke-Stewart, Allhusen, & Goosens, 2001).

The Cassidy-Marvin System (1987), and Crittenden's Preschool Assessment of Attachment (PAA, 1992), developed similar classifications for preschool-aged children using an in-laboratory, modified Strange Situation. As described earlier the Cassidy-Marvin's system was the result of work from the MacArthur Group; Main-Cassidy (1988) tested 6 year olds (Solomon & George, 1999).

Labels and constructs for all three instruments are the same or similar:

	<u>Cassidy-Marvin</u>	<u>PAA</u>	<u>Main-Cassidy</u>
B:	Secure	Secure/balanced	Secure
A:	Avoidant	Defended	Avoidant
C:	Ambivalent	Coercive	Ambivalent
D:	Controlling/disorganized		Controlling
A/C:		Defended/coercive	
AD:		Anxious/depressed	
IO or U:	Insecure/other	Insecure/other	Unclassifiable

(Solomon & George, 1999).

Concerns of Strange Situation validity have been raised by researchers looking at attachment within groups having different demographics other than white, middle-class children/families. In African American cultures, according to Jackson (1993), multiple

caregivers is more the norm than not. She contended that Ainsworth's observations and conclusions of Ugandan mother-child relationships were more similar to typical white American dyads than to African-American ones.

Unlike the Strange Situation, the goal of Waters and Deane (1985) and Vaughn and Waters (1990) with the Attachment Q-Sort was to create a valid method for assessing degrees of security in children who are 12 to 36 months old, expanding the age of assessment from 20 months (Colin, 1996). They also wanted to take the assessment out of the laboratory and into a naturalistic setting for the child. In the NICHD study, security ratings from the Q-Sort show a modest convergent validity with the Strange Situation, predicting child social outcomes from observations of maternal sensitivity (www.NICHD.nih.gov/, p.9).

Although the Q-Sort was designed to assess mother-child attachment styles, it has been used (sometimes modified) extensively in research appraisals of childcare teacher-child relationships. Kontos speculated in a 1992 study that using the "mother-child attachment as our standard for comparison, teacher-child attachment might be characterized as 'barely there'. The research of Howes and colleagues suggests that, regarding children's attachments to mothers versus teachers, there is a situation that might be characterized as both continuous (attachment patterns) and discontinuous (attachment intensity and concordance)" (p.111).

For the NICHD study, children were observed in their homes between the ages of 18-24 months for 2 hours (regular test visits are 3 hours). One trained researcher (or two for reliability visits) observed the normal, everyday routine of just the mother and the target child, making notes of the child's naturally-occurring behavior or that was in

response to semi-structured situations introduced by the observer.

(www.NICHD.nih.gov/, p.9).

The Attachment Q-Set has 90 cards that describe a child's attachment behaviors that observers sort into piles from most characteristic (piles 9, 8, and 7) to least characteristic (piles 1, 2, and 3). Items that were not observed in the visit, or are neither characteristic nor uncharacteristic of the child are placed in the center piles (4, 5, and 6). The most characteristic items receive scores of nine, and the items most unlike the child receive the scores of one. The final sort conforms to a symmetrical, unimodal distribution with a specified number of cards in each pile. The profile, resulting in a Q-security score for the subject, was then correlated with the profile of a prototypically secure child (www.NICHD.nih.gov/, p.9). Scores ranged from a low of -1.0 to 1.0 indicating high security (Howes & Smith, 1995).

Forty-three Ph.D. psychologists around the country determined the profile of a prototypically secure child. These criterion sorts were the averaged sorts of these experts in the field who had been asked to provide a description of the "hypothetically most secure child" and the "hypothetically most dependent child". This process yielded attachment construct scores for security, dependency, and sociability, as well as a social desirability score for control purposes. (www.NICHD.nih.gov/, p.9).

Waters and Deane (1985) believe the advantages of using the Q-Sort are numerous. Observers are unaware of the constructs that will be scored, and do not need to know the norms for each item. Items are sorted into a fixed distribution, reducing response biases, with the significance of a behavior clearly distinguished from the frequency with which it occurs. Each item is also scored in the context of a

well-defined set of items.

Data from different samples can be compared directly because sample norms do not enter into the scoring. “In addition, description of subjects in terms of an array of scores on items with highly specific content affords a wide range of analytic possibilities that are not available when rating procedures are employed to summarize a wide range of information in a single score” (Waters & Deane, 1985, p. 53).

It is also believed that the Q-sort methodology holds considerable promise for assessing attachment relationships from an ethological/control systems perspective. “The Attachment Q-set and the data analytic procedures available for use with Q-sort data seem well suited to the task of examining relationships among affect, cognition, and behavior in the attachment domain” (Bretherton & Waters, 1985, p.61).

In a 1992 Hamilton and Howes’ study, the Q-Sort was used to assess children’s attachment security with their mothers and then was modified for childcare teachers: 10 items that were not seen in childcare settings were eliminated. These same researchers used this instrument again in another assessment of children and their childcare teachers (Howes and Hamilton, 1992b), as well as in another 1992 study with Howes and co-researchers Phillips and Whitebook. In a 1993 study Howes and Hamilton had modified the Q-Set further with only 60 items to sort. For a later research project, Howes and Smith (1995a) modified the classifications of the Q-Sort through an analysis of the five attachment behavior subscales, resulting in three behavioral profiles: difficult, avoiding, and secure.

Margaret Mahler (1897-1985), a psychoanalyst, child psychiatrist, and pediatrician developed another but little-known theory on attachment titled Separation and

Individuation. She worked with children who had severe emotional disorders, and first used the term “symbiotic psychosis...to describe children who had formed a relationship with caretakers but [were] afraid to move out into the world” (Crain, 2000, p. 299). This relationship between child and primary caretaker (typically the mother) had normal beginnings but developed abnormally when the child suffered unduly from separations. Mahler did base her theory, though, on extensive and naturalistic observations throughout most of the 1960s of normal relationships between infants and their mothers, summarized in *The Psychological Birth of the Human Infant*, coauthored by F. Pine and A. Bergman in 1975 (Crain, 2000).

Mahler’s Phases

AGE	PHASE	HIGHLIGHTS
Birth to 1 month	Normal Autism	Baby focuses on inner psychological state
1 to 5 months	Normal Symbiosis	Baby responds more to outer stimuli but is under the illusion that she and mother are one
5 to 9 months	Separation/Individuation Differentiation	On mother’s lap, pulls back to study her and world- has “hatched” look
9 to 12 months	Early Practicing	Uses mother as base to explore
12 to 15 months	Practicing	Explores world with bold exhilaration
15 to 24 months	Rapprochement	Realizes she needs mother after all- but still seeks independence
24 to 30 months	Beginnings of Object Constancy and Consolidation of Individuality	Creates an internal image of mother and can function apart from her (Crain, 2000, p. 299)

Mahler describes much the same developmental/relational concepts and phases as attachment theory, even using the same or similar descriptives (eg. base to explore, internal image). The sixth stage (Rapprochement) also echoes the stranger anxiety

construct. Mahler employs two constructs from other theorists: Piaget's object permanence (for people also), and Erikson's first stage of basic trust in the child's final phase of successful separation from mother and personal independence. Mahler also consistently used the phrase 'emotional availability' in referring to a characteristic desirable in the mother for the child to initially sense comfort and safety, then continue to build on that in moving out into the world increasingly separating from mother and becoming his or her own person. Mahler's ideas have been criticized, particularly her description of an infant's first phase. Recent research has shed light on just how much and how well infants (even newborns) are in-tune with stimulus in their outer world, though for only brief periods of wakefulness (Crain, 2000).

Attachment has its roots in social learning as theorists learned that a child becomes attached to the person who responds to their bids to have physical needs met. But social learning theory could not explain all attachment relationships. Some children become attached to peers or adult caretakers who do not meet their physical needs (or are even abusive); there appears to be more than just food and warmth involved in eliciting attachment behaviors (Miller, 1993; Cassidy, 1999). Social learning theory involves the application of operant conditioning that is rewarding behavior in a child's social activities. Albert Bandura (1925-) moved from the exclusively biologically based operant conditioning of Skinner to a more cognitive and socially oriented imitative learning.

Though there are many constructs pertaining to social learning theory, only two will be presented here that are germane to relationship construction: reciprocal determinism and self-efficacy. Reciprocal determinism can be seen when children act on their

environment and may change that environment in the process. Behavior in experiences can change the way a child thinks, which in turn affects behavior. The influence of a child's environment is cognitively internalized that then facilitates the child's acquired set of expectations. This, in a sense, is similar to how a child creates an internal working model of relationships as defined by Bowlby. The reciprocal relationship between children and their childcare providers are paramount in providing good care, and provide the base for attachments to form. "The behavior of parents, and of anyone else in a care-giving role, is complementary to attachment behavior. The roles of caregiver are first to be available and responsive as and when wanted, and, second, to intervene judiciously should the child be heading for trouble" (Bowlby, 1979, p.13).

Bandura also developed the concept of self-efficacy in his theory on social cognition or learning. Self-efficacy is knowledge of self gained through behavior in circumstances that leads to feelings of accomplishment, or perceptions of control of their environment (Hughes & Noppe, 1991; Fabes & Martin, 2000). Applying this to children's relationships with caregivers, infants learn that bids for their physical and emotional needs are either met consistently or not, leading to different paradigms of attachment (secure or insecure).

Erik Erikson (1902-1994), a neo-Freudian, came out of the psychoanalytic tradition with Anna Freud as his first teacher. Erikson's shift in interest from psychosexual to psychosocial development - relating more to the cultural and yet universal influences of an individual's development- began with his interest in anthropology and his subsequent studies of the Sioux and Yurok tribes. The social and psychological issues surrounding Hitler and WWII also influenced his thinking, reflected in his work. Erikson's theory

differed from Freud's in form not content, "redefin[ing] psychoanalytic theory in a culturally relevant manner...within a particular sociohistorical context..." (Goldhaber, 2000, p.276). However, Erikson thought his first six psychosocial stages correlated with Freud's psychosexual stages (Erikson, 1963).

Erikson's psychosocial theory is a stage theory in which there are qualitatively different behavior patterns at each of eight stages that extends throughout a person's life span, describe general characteristics, and have stages that are at a specific time, in a specific order (even though Erikson believed all stages are present in some form, though less emphasized, throughout life). They are universal and apply to all cultures in spite of sometimes vast differences, because all deal with the same issues in the stages he outlined. (Crain, 2000).

The first stage of Erikson's theory of development, Trust versus Mistrust is from birth to one year when children first learn about his or her world through their initial environment and interaction with caretakers, i.e., their home and their parents. "What is most important in these interactions is that babies come to find some consistency, predictability, and reliability in their caretakers' actions" (Crain, 2000, p. 274). This is how a sense of trust is developed: infants are fed when hungry, changed when wet, held when needing warmth and comfort. It is after young children develop this trust believing that their parents or other caretakers will be available for them when needed, that children learn to tolerate their parents brief absence from child's visual presence (Crain, 2000).

According to Erikson, at each stage an individual acquires an internal trait. For the first stage of Trust vs. Mistrust, if an infant learns to trust his world and those in it, that trait or virtue is Hope. "Unsuccessful resolutions reflect the extremes...[therefore] a

failure to establish a degree of predictability or mutuality between infant and parent...withdrawal is seen” (Goldhaber, 2000, p.283). Erikson’s first stage of his developmental theory is the most similar to attachment theory as they both involve trust and reciprocal action between a young child and his or her primary caregiver.

Contextualists appreciate the sociocultural context of human development, and the complex interplay of social, biological, cultural, and historical forces. As such, Bronfenbrenner (1917-) in his ecological theory advocated doing research in the field, observing and/or documenting natural experiments in a child’s usual environment (Hughes & Noppe, 1991).

Bronfenbrenner conceptualized his theory by using four concentric circles to depict a child’s immediate and intermediate environments, each a system of its own. The first circle is the microsystem, representing the child, and the people and objects of influence (such as toys and television) that he or she interacts with on a daily basis. Examples of microsystems are the child’s home and family, childcare, and peers. The second circle is the mesosystem representing the connections between microsystems such as peers and childcare. Exosystem refers to the settings or contexts that interconnect, one of which the child is not directly involved in yet it impacts his or her life. Examples of this would be a parent’s job, as stress there may transfer to behavior or incidents at home. The exosystems are also composed of the media, local government, and other institutions in society. The last circle or system is the macrosystem. This encompasses the broader aspects of a culture, which includes a society’s beliefs, values, knowledge, and shared social tools such as language, that guide everyday interactions and the transferring of culture to children (Hughes & Noppe, 1991).

Bronfenbrenner emphasized children's active role in their development as they interact with their environment. He believed children shape their world as much as their world shaping them. As such, he recognized four ways in which a child's character participates in the formation of his or her social context: personal attributes encourage or discourage reactions from other people (similar to Bandura's reciprocal determinism); individual differences in a tendency to approach or avoid particular aspects of their social and physical world; differences in creativity and the need for change, and to engage in increasingly complex activities; differences in conceptions of power and control over one's own actions or goals (similar to Bandura's self-efficacy) (Miller, 1993).

Howes and Matheson (1992) proposed that attachment relationships are rooted in the settings and activities where a certain relationship takes place. They drew on an ecological and cultural perspective in comparing children's attachment classification with their mothers and childcare teachers. They used the Strange Situation and Q-Sort to assess children's relationships with their mothers, and only the Q-Sort with childcare teachers. Constructs for contextual interactions were: people present, cultural values and beliefs, motives and emotions directing an action, activities, and perceptions of appropriate behavior. Their prediction that the degree of continuity between settings or contexts would have an affect on comparability held, as the more stable the home and childcare environment the more secure children were with their childcare teachers.

Kontos (1992) proposed including this ecological-cultural model to attachment theory in her article *The Role of Continuity and Context in Children's Relationships with Nonparental Adults*.

Piaget's (1896-1980) structuralist approach called an infant's cognitive

formations schemas: an organized pattern of behavior when interacting with his or her environment. According to his constructivist or cognitive-stage theory, development or acquisition of knowledge is a stage process based on biological models of an organism's acclimatization to its environment employing assimilation (incorporation) and accommodation (adaptation) (Miller, 1993; Goldhaber, 2000).

In the first of the four developmental stages Sensorimotor (birth to 2 years), Piaget illustrated separate stages detailed here with correlations to attachment theory:

Stage 1: Modification of Reflexes - Birth to 1 month

Sucking, crying, and grasping are the significant and innate reflexive behavior that infants display as neonates.
(Piaget & Inhelder, 1969).

Crying is one of the three behaviors that Bowlby identifies as signaling behaviors (crying, smiling, and babbling).

Stage 2: Primary Circular Reactions - 1 to 4 months

A chance behavior involving the infant's body is discovered, such as thumb sucking, and then is repeated through increasingly successful attempts until it becomes a habit.

Stage 3: Secondary Circular Reactions - 4 to 8 months

Behaviors are now becoming more oriented to the child's external world (or outside his or her own body). Discovering that movement or action on their part has consequences on other objects (a mobile or ball) results in repeating this activity. This is the beginning of goal-directed behavior.
(Piaget & Inhelder, 1969).

Attachment behaviors are also learned behaviors that are repeated due to consequences of a child's actions on an 'object' in his or her environment: child cries when hungry, caretaker (nurturing adult) feeds the child.

Stage 4: Coordination of Secondary Schemes - 8 to 12 months

Goal-directed behavior or intentionality emerges with conservation of an object's shape and size (object permanence). Infant shows clear differentiation between self and others.

(Piaget & Inhelder, 1969).

This is the same age period in attachment theory when children demonstrate a preference for a specific adult caretaker (usually their mother), and may show distress at separation from her. Children are becoming mobile at this age and employ following behaviors (crawling), as well as calling behaviors, to keep attachment figure close.

Stage 5: Tertiary Circular Reactions - 12 to 18 months

Infants in this stage are actively exploring their environment seeking new means to different ends in varying their actions, rather than just repeating an activity.

Stage 6: Invention of New Means Through Mental Combinations - 18 to 24 months

The last stage in the earliest period is when a toddler forms mental representations of objects and events. This is a major shift in development; a young child in this stage will now think about his/her possible consequences of certain and different actions upon an object (eg. Jack-in-the-box) without trial-and-error behavior.

(Piaget & Inhelder, 1969).

This corresponds to the internal working models or mental images a child creates of a relationship with a caretaker after months of interaction through initiation of attachment behaviors and the adult's subsequent responses. The different attachment paradigms (secure or insecure) are the result of these variant responses.

Lev Vygotsky, 'rediscovered' in the West in the 1960s when his work was

translated into English, essentially theorized that an individual child's development is best understood through understanding first a species' developmental history or evolution in the context of that child's history of cultural development (Vygotsky, 1978). Key constructs in his social contextualist or cultural-historical theory of child development of interest to relational aspects are child-in-context, co-construction, and intersubjectivity. Studying a child in context is significant for the goal of researching secondary relationships in that most research on attachment has either been in the mother-child context (usually the home) or in the childcare setting, but then either concentrating still on the mother-child relationship or assessing the childcare caregiver and child relationship using instruments designed to evaluate the primary relationship. Hence, there is the need to study "...a child-in-activity-in-context" (Miller, 1993, p.420).

Co-construction is the child constructing knowledge of his world through interaction with others (therefore a social context), and intersubjectivity is the shared understanding between the child and a significant adult within this social experience. This is comparable to the process in secure attachment when caretaker and child are learning about each other: the caretaker learns her child's cues and how to respond to meet the child's needs, and the child is learning that another person can be dependable and available (Miller, 1993, & Goldhaber, 2000). Though Vygotsky's theoretical constructs focused on cognitive or psychological learning, especially through the social tool of language and the socially-constructed meaning of words, his ideas of learning in social context correspond with other theories that are important to understanding attachment theory.

These theoretical constructs underlie the relational and attachment research of the

last four decades. The predominate theoretical framework that lays the foundation for my research is Bowlby's and Ainsworth's attachment theory, though similar constructs from other theorists add support also. Two main themes emerge from these theories (with significant contributions to both themes from Piaget, Bronfenbrenner, and Bandura): specific behaviors and/or defining characteristics of individuals or relationships, and the interactional nature of relationship construction.

Bowlby and Ainsworth described relationships as dynamic, on going, and reciprocal, a process where caretaker and child are learning about each other. Mahler's theory, and Erikson's first stage, Trust versus Mistrust (Erikson, 1963), also involves interaction with caretakers, and are the most similar to attachment theory as they both involve trust and reciprocal action between a young child and his or her primary caregiver. Vygotsky's concept of co-construction is also based on the child constructing knowledge of his world through interaction with others (Vygotsky, 1978). My study is based on the observable relationship formation during interactive and reciprocal behavior between a toddler and his/her childcare teacher in the context of the childcare center classroom.

Where previous research on attachment/relationships has been predominantly quantitative in nature, I conducted a qualitative study spending considerably more hours than the current assessments require. The important difference, however, is that past researchers have invariably looked at children's childcare relationships primarily through the attachment paradigm lens, constraining them to classify all behaviors within the existing attachment framework. Behaviors that do not fit in the A, B, C, categories are currently relegated to D- Disorganized, that also includes 'unclassifiable'. My

observational research of relationships outside the confines of the attachment model points to the possibility of other relationship paradigms.

Much is known about observable behaviors during stress-inducing separations and reunions between young children and their caregivers (usually their mother). Yet questions remain about all the complexities and parameters of different relationships between infants and toddlers and their caregivers in different contexts, specifically in a childcare center. My research study, undertaken to describe the varied and multiple relationships that form between children (approximate ages 12 to 24 months) and their childcare teacher in a center context, may have brought us a step nearer in understanding these relationships.

Chapter 3

Methodology

I used an ethnographic approach to observe and describe children's relationships with their childcare teachers. My aim was to develop a clearer understanding of these different relationships, and thereby, contribute to the extant literature on secondary relationships. I examined the question: What is the nature of observable relationships between children and their childcare teacher in their day-to-day interactions?

Participants

The particular toddler classroom I chose has a licensed capacity of 14. During the weeks I observed there were a total of 17 children, 9 males and 8 females. These children were between the ages of 13 and 23 months (except for one child age 10 and ½ months who began transitioning to the toddler room near the end of my time there). Twelve of the children were white, non-Latinos. The other five children are from the following ethnic/racial heritage: one half Black and half White, one half Asian and half White, one Asian, one Latino, and one child with a parent from Eastern Europe (these last three children were bilingual). Total number of staff observed was 14: three major teachers, six part-time teachers, three visiting teachers from other classrooms, and two persons from administration. All caregivers in this classroom were white females, except for three black females, one of whom was a major teacher. All children and all staff were observed in their interactions with each other within this classroom. During my data collection I was able to observe four children who were transitioning to the toddler room from the infant room in this same center, as well as four new placements from outside the center,

therefore initiating research observations of these children and teachers at the onset of their full-time placement in the classroom. I also included in my notes observations of one toddler who transitioned to the two's classroom which was next to the toddler room and connected by a half door.

Setting

For my research I chose the culture of a childcare center classroom over other types of childcare (e.g., relative, non-relative in child's home, and home daycare) due to the center's institutional/educational model. In a center, a large contingent of same-age children offers wider possibilities of relational dyads to observe. This particular classroom has a potential of 14 children and 3-6 staff on a daily basis. The design and size of this classroom influenced my choice presenting a larger number of available children and staff to observe than in other centers, as did the location of the center that easily allowed for daily visits.

Access to my study site had been in progress over the past two years as I had introduced myself to this daycare center (and others) by meeting the director and some of the teachers and visiting the classroom. The director, assistant director, and two of the full-time toddler teachers that I met previously were still at this center at the beginning of and throughout my data collection. My extensive experience in childcare has previously gained me access to observe and interact with young children by their allowing my presence indicated by positive actions and reactions (implied consent), which was the case here also. The director and staff were welcoming and receptive to my presence in the classroom. Written consent was obtained from the parents of the children in my chosen classroom, as well as from the childcare teachers (see Appendix).

Data Collection

Though childcare-attachment research has typically employed quantitative designs, observation has been an essential methodological component of nearly every study, used formally in a laboratory set-up with the Strange Situation, as well as in the home or childcare setting with the Q-Sort. However, observation has not been fully employed to look at the process of childcare relationship formation and most observations were no longer than three hours in duration, within an average of two separate sessions.

According to Weinfield, et al. (1999) patterns of interaction are what reveal the character of a relationship. This implies that categorizing children's attachment based on 2-3 hours of observation (Q- Sort), or a 20-minute laboratory set-up (Strange Situation) may not give a true picture of a child's definitions and parameters of his or her relationships. Two qualities of an ethnographic approach- spending numerous hours over the long term, and in the child's natural environment- can only add weight to the existing data, and possibly clarify some issues.

As a passive participant observer, my data collection was in the field using naturalistic observations as I recorded relevant behaviors relating to the relationships between a child and his or her childcare teacher. I videotaped several sessions (eight times with approximately six hours of usable tape) to augment my observational notes. Field notes were written using behavior or event sampling of relational interactions between all the children and their caregivers in this toddler classroom- positive or negative, and any identified attachment behaviors witnessed in the children. The first

week of observation and note taking was all-inclusive to get a general feel for the classroom dynamics and participants' behaviors. The second and third week I chose to concentrate on one child at a time for a half-hour session each to be more confident I was not missing anything about a particular child's behaviors towards and interactions with caregivers, particularly since initial data tended to reveal first and foremost children who exhibited a need for attention and received it.

Tried something different/new today- decided to spend a half hour solely observing and writing on one child- any interactions with adults in that timeframe. Chose to observe Elena and then Julian today. I saw things- minor- that have been missing before. Kids who I typically wrote about are the ones who have been most vocal or needy or obvious in their interaction with teachers. So many of the children in this room are not in this category, so... will continue to do this all this week for the rest of the children (from researcher's journal 1/12/04).

During week four I then turned my attention to focus on the three main caregivers and several part-time caregivers, allowing a full two-hour observational session for each. These separate and concentrated observations yielded data for the different categories: which children appeared to have a close relationship with a specific caregiver, which children did not, and even more interesting, what happened when a child became distressed and did not go to any caregiver.

Videotaping in the classroom (and most interviews) took place during week five through the last, eighth week of data collection. I had planned to videotape once a week from the beginning but did not mainly due to technological difficulties.

Doesn't seem like I'm learning anything new that I didn't learn last year observing.

Again, very few actual attachment behaviors exhibited. What more can I do? What am I missing? Will start videotaping next week, maybe that will reveal something new...? (from researcher's journal 1/14/04).

When I arrived for the first videotaping, I left the camera bag in Cammie's office to be less conspicuous and get it out of the way. Then I had to figure out where to position the camera. I know research sources tell you to do this ahead of time, but this data collection is whatever I get, not for a specific time/activity/event. I put the DVD on top of three large stacked toy bins near the music shelf... This is the best spot for it, even though will not be able to record any action on the tile floor or behind the staircase (garden center, under the loft). Most of the classroom activity is on the carpet, which the camera does capture. It is interesting with Cammie in the room as staff today. I think she is over-acting for my (and camera's) benefit. Julia is not happy with the camera. She made a comment when I first set it up- 'I'm going home.' She was okay though, acted pretty much the same, as did Candace. No Terry or any other familiar staff today (from researcher's journal 1/20/04).

In employing an ethnographic approach, I spent between two and four hours, four days per week (Monday through Thursday) for eight weeks in this one daycare classroom, for a total of 71 hours. I had first planned to only observe in the morning hours but realized within the first week that the best times to observe child-teacher interactions were between 9 and 11 a.m. (and sometimes that was cut short due to outside play- observations/note-taking was not possible then), and then again after 3 p.m. The other times of their 10-hour day involved meals and naps when little or no opportunity presented itself for interaction between children and caregivers. Therefore, I returned in

the afternoons many days to add observational time, as well as take advantage of the optimal time to informally interview parents during pick-up of their child. I believe data saturation was reached within the first four to five weeks. The longer time did allow me to witness the inclusion of new children, as well as, infants transitioning to this toddler room for individual portraits of relationship formation. More than eight weeks in the field probably would not have added new data, but could have enabled a fine-tuning of observational data collection, as well as further testing of newly encountered hypotheses.

I seemed to get a lot of good notes (interactions) in that one hour- more than usual with two hours. Spending hours (all day yesterday!) going over data and arranging it in staff files, I think has cued me into what to look for and write on. I am still anxious to get into analyzing data more- to see what themes I find in the staff-child relationships. I still think a major factor is going to be accessibility (teachers on the floor at kids' level), even more than personalities or mood of teachers (from researcher's journal 1/27/04).

My data included informal interviews with the three main toddler teachers to gain insight into their perceptions and feelings of their relationships with the children in their care, as well as several parents' comments about their children's relationships with their childcare teacher (see Appendix for interview questions).

Along with my main goal of describing these relationships, as suggested by Pellegrini (1996), I also watched for any behaviors evidenced from toddlers to feel safe, secure, and comfortable at their childcare center without their primary attachment figure. Questions asked supported by attachment theory and previous research are: Did the children in the classroom seek out a particular teacher when in need (distressed, injured,

tired, etc.)? If yes, under what circumstances? Did any of the children respond either negatively or positively in an overt way to a childcare teacher upon entering their classroom, with or without an observable 'need'? What are the observable characteristics of that teacher, the child, and their relationship?

They are going on a field trip tomorrow morning to Burger King, to play, buy lunch and bring it back to eat in their room. I am going to join them, try and observe only Valerie (as she is working as fourth staff), but also to see if there is any new dynamics to relationships in a different environment: look for more clinging, certain children with specific staff? More possibilities for a child getting hurt or needing attention? [This did not happen, except for Joseph's behavior during process of loading everyone in the van and being outside!] (from researcher's journal 2/17/04).

Though language is the primary tool in socio-communication, body position, hand gestures, and facial expressions are key traits also (Rossman & Rallis, 2003). Because this population of children is primarily pre-verbal, or at least limited in vocal communication, I had to rely heavily on documenting movements and other non-verbal signals that toddlers demonstrated to indicate a need for attention from caregivers. Attachment behaviors are mostly sounds and actions (crying, reaching, crawling, searching), with secure attachments dependent on accurate and timely responses to these cues for attention or protection, the child's correctly elicited cues and a caregiver's interpretation of the same are imperative for the relational process. Did secondary caregivers understand children's bids for attention? What behaviors then ensued from caregivers? Were some children's behaviors misunderstood, or ignored, therefore discouraging secure relationships? Research documentation also included incidents of

distress, and other behaviors of children that did not result in interaction with a teacher.

Role of Researcher

As a passive participant observer in the childcare classroom, field notes were annotated with my on-going reflections of impressions, emerging questions, and interpretive possibilities. Personal notes added to field notes in the research process that made inferences, judgments, or interpretations were clearly distinguished from the behaviors recorded of the children and their caregivers. As a corollary research tool, I also kept a reflective journal of and during the research process with my thoughts or questions about my assumptions, purpose, and methods of data collection, as well as personal feelings evoked from returning to the childcare setting. Quotes from my journal (italicized) are incorporated throughout my results, as well as a few in this chapter and the discussion chapter.

My personal stance, which may bias my perceptions, is based on more than four decades of childcare experience, seven of those years as a professional childcare provider (three years directing a group-home daycare, and four years as a nanny for three different families), and raising three children of my own (who had never been in daycare). However, my long-standing involvement with hundreds of children in the past added credibility to this current endeavor to understand and interpret the observations from my study (Naughton, Rolfe, & Siraj-Blatchford, 2001).

Ethics and Limitations

One of the built-in limitations of the study design was my required presence in the classroom that I anticipated may affect and possibly alter the children's on-going

relationships with the childcare center's staff. However my presence was also a strength, as it offered me an insider's perspective in my attempts to understand and describe relationship behavior as they occurred naturally without any artificial constraints or controls. Since I did limit my participation in interacting with the children and their play and care, only allowing myself eye contact and smiling at them, my presence did not impact the children's relationships with classroom teachers. Even though it was a challenge for me to maintain a distant and hands-off stance, the children learned fairly quickly that I was not there to play with them or pay attention to their needs. Because of this inherent dynamic and its consequences, I included these interactions with reflective notes in the results section as suggested by Patton (2002).

Ethical considerations also included the possibility of close relationships developing between the children I observed and myself. This was not the case however, as I remained uninvolved with the children's daily activities and kept any interaction with them to a minimum. Even so, caregivers leaving are already a normal part of the children's daycare experience. Therefore, my short, unobtrusive presence and subsequent absence would not pose an undue risk for the children. The closure of our tenuous relationship and any resultant emotions has most likely affected only myself.

Analysis

Transcriptions of observational data employed thick description, writing that is rich in detail presenting context and emotions as well as behaviors and words (Patton, 2002). Typically, I transcribed my notes immediately after an observational session, which necessitated a first reading. I then re-read and coded the transcribed and printed

notes after each week.

Am copying and pasting data on computer from transcribed notes into separate files for each major teacher: Candace, Julia, Terry, and several minor ones: Kristen, Lori, Morgan, Tamara, plus Cammie and myself. Process: after typing observation notes and printing them, I use highlighter and colored pencils to mark interactions with children for each teacher. Then I go back through pages and write involved children's initials in right-hand margin by those marked notes. My plan is to then get some idea overall and individually, which child has what kind of relationship with which teacher (close, avoidant/negative, non-existent, or casual) (from researcher's journal 1/25/04).

A third reading occurred as I cut and organized by staff and category each week's data that entailed more coding. Another whole reading was undertaken at the end of data collection, making notes and initiating analysis as I read. This was then followed by final readings of selected data as analysis continued and writing began.

Saturday's coding and copy/paste procedure went much easier and smoother this time, as I am getting better at writing and transcribing in needed format. I do need to cut out writing unnecessary comments like which toy is out. Need to keep up with and do better at writing time- not sure if that will be important later or not. Also to keep noting staff positions periodically as they may point to availability as factor in children approaching one staff or another (from researcher's journal 2/2/04).

I used analytic induction (Patton, 2002), which begins with a theory-derived hypothesis, specifically, that there are other types of relationships above and beyond attachment that form within the childcare context. Unlike grounded theory, analytic

induction is first deductive, “examining data in terms of theory-derived sensitizing concepts or applying a theoretical framework developed by someone else” (Patton, 2002, p. 454). In this case, I employed Bowlby’s attachment theory and Ainsworth’s assessment behaviors. Analytic induction is then inductive, meaning that the researcher analyzes data for undiscovered patterns, which in my study were any relationship behaviors and interactions outside the attachment paradigm.

This holistic strategy focuses more on thick description instead of coding for categories and themes (Rossman & Rallis, 2003). I organized observed behaviors by previously formalized categories, as well as added categories for children who do not display the standard, or possibly any attachment behaviors. The broad concepts that identify attachment behaviors are: proximity to caregiver is sought (particularly when an infant is in distress), caregiver provides a safe haven and a secure base to explore from, a threat of separation from attachment figure causes infant anxiety, fear, distress, and loss of caregiver causes grief and sorrow (Bowlby, 1979; Ainsworth, et al., 1978; Clinton & Sibcy, 2002).

Additional categories I used in coding data were S or C: Staff or Child initiates an interaction; P or N: Positive or Negative interaction; NI: No Interaction, but relevant behavior noted, usually of the child, NI-K indicates children’s attempts at interaction with me; D: Distress of a child; F- C/O: Facts about Children or Others not involving interactions (see Appendix for complete coding key).

Began some analysis...Need to make separate documents for each staff, then one for each child and transfer the interactions for each to their own file. Want to know: interaction or not? Child initiated or staff initiated? Positive or negative

interaction? Staff who do not have any recorded interactions with certain children: need to discover if that child not there that day? In taking notes from now on: need to date each typed page; list all children in room that day at top of first page, as well as all staff (from researcher's journal 1/17/04).

My study design incorporated an emic perspective, as such, as a passive participant observer I gained an insider's view of events as relationship formation progressed. However, analysis has been more etic in perspective, as labels I used are imposed by previous research and not mainly by participants or those being observed. Emic analysis or in vivo coding draws exclusively on terms from participants themselves (Patton, 2002).

Sensitizing concepts- categories that I brought to the data- originated from attachment theory. Behaviors such as child looking for caregiver, following caregiver, or calling to a particular teacher gives the study a point of reference. These concepts were not used to force the analysis but aided in describing scenes of relevant interactional behaviors. Patton (2002) gives a word of caution in using sensitizing concepts: they can lose much of their original meaning if part of the popular culture, as with the word attachment. Attachment theory, with its corresponding attachment behaviors, is specific and empirically tested to delineate the relationship between a young child and his or her mother (or primary caregiver). Attachment (with a small 'a') typically has colloquial meanings: an affectionate or close, emotional bond to a person, thing (such as a blanket), or place (such as a university or hometown). To avoid confusion, I did not use the word attachment in my observation notes, and in the Results and Discussion chapters I differentiated between the two meanings of

attachment when staff or a parent used that word in their interviews.

Relying on others' viewpoints besides my own (i.e. previous research literature, and interviews of the children's childcare teachers and parents) in my research helped bolster the interpretations and meanings I have inferred from my observations. Triangulation of these data lent credibility and dependability towards this particular study, although caution is necessary in transferring or "probabilistic generalizing" (Rossman & Rallis, 2003, p. 68) these documented experiences to other children in childcare, even though demographics and contexts may be similar.

However, due to my previous and extensive experience within various childcare settings, and the commonalities found among children, staff, and their relationships, I believe my findings could be applied to relationships between young children and their childcare providers in most childcare centers in the United States with some level of confidence.

Chapter 4

Results

In my descriptive study to understand and describe the varied and multiple relationships between children (ages 12 to 24 months) and their childcare teachers in a center context I explored what the data do and do not support. Continuing the process of reflection of what I had observed, I attempt to explain the meaning I found in the relationships documented and to describe the nature of observable relationships between children and their childcare teachers in their day-to-day interactions. What do these observations and resultant field notes tell us about the nature of child and secondary caregiver relationships? Do all relationships fit in the attachment paradigm as stated in the research? If not, what other types are there to define?

As stated in my introduction (p. 3), Bowlby himself proposed, “an attachment bond cannot be presumed to exist even though a relationship may contain an attachment component” (Cassidy, 1999, p. 13). This may help to explain children’s apparent attachment to a childcare provider when the child exhibits some attachment behaviors in the absence of the parent.

Previous researchers have questioned the use of the attachment label to describe the relationship between a young child and their secondary caregiver when it may not be attachment at all. A child may be indiscriminately friendly with any available adult. What was previously labeled insecure-avoidant attachment between a child and his or her childcare teacher may instead be indicative of no relationship at all, or one could say they are ‘nonattached’ (Howes & Hamilton, 1992b; Howes & Hamilton, 1993; Ahnert, Lamb, & Seltenheim, 2000). Howes, in one of her many studies, asks if avoidant “children

[could be] best characterized as independent” (Howes & Smith, 1995a, p.46). Socially competent children could possibly be misinterpreted as avoidant. Other researchers have also wondered if the flat affect of a child previously categorized as avoidant might simply be a case of “disinterest” on the part of the child (Sagi, van IJzendoorn, Aviezer, Donnell, Koren-Karie, Joels, and Harel, 1995, p.88).

The data I collected over an eight-week period observing 17 children and 14 caregivers for a total of 71 hours provided evidence to support all of the above categories. Overall (one child was the exception), the nature of these children’s interactions with their childcare teachers presented warm, nurturing relationships without the characteristic attachment behaviors prevailing. My interpretations and inferences offer explanations and draw conclusions, though they are tentative, including alternative interpretations of what I have observed. My observations were supported with six hours of videotaped sessions, and interviews with the three major caregivers and several parents. Interpretation, however, is secondary to the descriptive nature of this qualitative inquiry. Therefore, my results take the shape of brief story narratives using thick, rich description. The many and varied types of relationships evident among the children and their secondary caregivers are presented as descriptive portraits of these different classroom dyads.

As an introduction to this section, caregivers and children in the following narratives are listed here with their assigned pseudonyms. The three major caregivers are Candace (lead teacher), Julia, and Terry. Minor or part-time caregivers documented here are Lori, Tamara, Kristen, Cammie (administrator), Morgan, Carol, Valerie, and Susan (infant teacher). The children are Caitlyn, Wes, Stephen, Max, Mia, Reese, Brett, Kelly,

Sam, Adam, Ariel, Elena, Missy, Julian, Vanessa, Joseph, and Nancy.

Main Categories of Children's Relationships with Secondary Caregivers

Based on the previous literature, the researchers' suggestions for non-attachment classifications of relationships, and on the analysis of behaviors observed by me, most, if not all, of the children appeared to fit into the following categories: indiscriminately friendly, singular close relationships, multiple close relationships, attachment, and disinterested/unattached/independent.

Indiscriminately Friendly: This child approaches most people who enter the classroom, and will most likely engage them in friendly interactions (e.g. sitting on their lap), or play. Three children seemed most obvious and numerous in their overtures to all caregivers, including strangers to the classroom: Mia, Julian, and Brett.

Mia: Observations of Mia revealed the most attention from and interactions with Terry, though considerable interactions occurred with Julia and Candace. Mia also frequently had positive contacts with most of the minor staff such as Lori, Tamara, Kristen, and Cammie. I did not ever see Mia upset, cry, or hurt. Nor did I ever see her unkind to any other child in that room. She often demonstrated sharing, helpful, and loving actions towards the children and staff.

Julian: During a half hour observation on 1/12/04, Julian had about equal interactions with Valerie and Terry. Candace was not there that day. Overall observations, however, showed him having the most contact with Terry, though he had significant quality interactions with both Candace and Julia. Julian also interacted positively with Lori, Kristen, and Tamara on the days they were toddler caregivers.

Brett: Julia and Terry rated nearly equally with Brett, though Candace was not far

behind. Brett was a little more difficult to categorize as his interactions with staff usually ranged mid-level compared to all the other children. He also did not ever go to Kristen for attention. However, he was highly engaging with Cammie's one day of caregiving, and often approached strangers, including me.

Some children, like Wes were friendly and yet appeared emotionally needy, seeking attention from nearly everyone. While others, like Mia, are also friendly but more selective. The following are examples of welcoming overtures from several children to visitors (including a stranger), and infrequent caregivers in the toddler room.

9:36 Carol arrives to allow Candace to leave for a planning meeting, and immediately sits down on the floor. Kelly approaches and plays around Carol at first then sits on her lap for a brief time. Another child joins her on Carol's lap, and Kelly starts to cry and stands up next to Carol. Julia says she just wants Carol. Kelly cries for several minutes, but Carol does not let Kelly sit back on her lap. Carol then moves with Kelly following her and fussing for several more minutes. Eventually Kelly stops crying and begins to play. Julia is available this whole time also, but Kelly does not go to her. Caitlyn is crying by the music shelf about not getting a toy she wanted. Caitlyn starts walking across the room towards Julia who is sitting against the wall. She looks at Carol, and Carol who is sitting near the play kitchen center looks at her. Caitlyn turns and walks to Carol instead of Julia. Carol tells her not to come to her [for sympathy- not going to get any?]. Caitlyn stops in front of Carol a few seconds just looking at her, then turns and continues walking towards Julia, but by this time she is no longer crying. Caitlyn does not get any response from Julia.

At 10:07 it appears that the majority of children are around Carol vying for attention. [Note: Carol worked in this daycare last summer, but not in the Fall, then started again two weeks ago at the end of January. She took care of Kelly in the infant room last summer. I wonder if Kelly remembers her, or is Kelly trying out a 'new' caregiver for the possibility of sympathetic attention?] Now the children are fairly evenly distributed around the room with all four staff sitting on the floor. Kelly is playing with Carol, Caitlyn is playing with Julia, Brett loves on Valerie, and Missy and Julian are sitting on Terry's lap. After Terry gets up and leaves the room Mia goes to Carol.

[Candace, Julia, Terry, Valerie are present] At 10:25 this morning Cammie brings a young woman in to visit who is interviewing for a caregiver position. Cammie leaves after introducing her. This woman barely gets inside the room when Brett, Elena, Mia, Caitlyn, Joseph, and Reese are right there. She squats down at first by the door, and then sits down with Brett on her lap. Max talks to her from a short distance away. Brett gets up and Elena sits on her lap, then Caitlyn takes a turn. After a minute Elena, Brett, Caitlyn are all on her where she is sitting on the floor against the wall close to the door. Terry is also sitting near by, Julia is sitting further down the floor at the half door, Carol is in the middle of the carpet nearer the laundry bin, and Valerie is leaning against the toy shelf. Now Elena is on her lap facing out and playing with a toy. Mia comes over and checks her out. At 10:27 none of the other children are near her now (just Elena). Mia and Max return to play with Elena's toy, too. This stranger engages in play with the toy and Mia, Max, and Elena, who is still

on her lap. Then Mia joins Elena on her lap. At 10:35 this woman has not moved. Brett is on her lap but the others have left her side. Elena comes back, and Max starts running back and forth to the stranger from across the room, which starts Elena running, too. No one stops them from this play. Neither of the children goes quite all the way to the woman still sitting on the floor. Adam, Missy, Sam, Kelly and Julian are also present but do not ever approach this person. (2/11/04).

While Elena and Max were not included in the indiscriminately friendly category, they did display this behavior occasionally with newcomers. All the children's interactions cannot be detailed here, but overall patterns from the data indicate that Mia, Brett, and Julian most likely fit the category of indiscriminately friendly. Yet, discrepancies occur as seen in this one example above with Julian not joining the other children in engaging or approaching the stranger.

Singular Close Relationships: This characterizes children who typically interacted with one specific secondary caregiver. This category looks the most like secure attachment with many loving exchanges, yet does not consist of pertinent attachment behaviors such as the child's distress at caregiver's absence, or persistent proximity seeking.

Several children demonstrated a preference for only one caregiver in the toddler classroom, though none of them avoided the others. Wes and Elena typically interacted with Terry and not Candace or Julia. Ariel, Reese, and Caitlyn mainly went to Julia for attention. I have only presented Caitlyn and Ariel here as examples of close relationships, with Ariel as a transitioning infant to the toddler room at this time.

Caitlyn with Julia

Terry and Julia are standing at the changing table where Caitlyn's mom goes to talk to them after entering the room to take her daughter home for the day. Caitlyn is at the door with a few other children. From across the room, Julia calls to Caitlyn 'do we get a hug?' Caitlyn walks across to Julia who squats down with her arms open. Caitlyn gives Julia a big hug. Then Terry squats down with arms out saying 'my turn'. Caitlyn starts to turn and run away smiling [teasing?], but Terry grabs her, picks her up and gives her a hug, which is returned by Caitlyn. Terry kisses Caitlyn and then sets her down (1/28/04 p.m.).

Even with children demonstrating clear preferences for certain staff, they sometimes behaved out-of-character, such as the next example. Caitlyn almost always sought Julia for attention and/or comfort when distressed, but this time bypasses her for Kristen.

Caitlyn and Brett are in the play garden center when Caitlyn gets hurt. She starts to cry- hard- but does not move. She cries several minutes, then finally comes out of the garden center. Julia is calling to Caitlyn to come to her, but she just wanders around still fussing. Then Kristen calls her to come with her arms out. Caitlyn goes to her, stops crying and sits on her lap facing out (1/8/04).

Ariel with Julia

Susan, an infant teacher, brings Ariel to the toddler room at 9:00 and stays a while with her (her first transitioning day). As soon as Susan sits down on the floor with Ariel she starts crying that lasts about a minute. Ariel looks at the few toddlers around her playing with foam blocks. Kristen walks over and says 'Hi, Ariel' twice. Ariel just looks at her; she does not move neither does she start crying again. A

minute later Ariel is crying even though she is still sitting on Susan's lap. Now Brett is crying (who is Susan's son in the toddler room). Susan sets Ariel on the floor as she is crying no matter if Susan holds her or not. As Ariel tries to crawl on Susan's lap, Susan picks her up but Ariel does not stop crying. Ariel finally stops crying around 7 minutes after coming in. She is on Susan's lap facing out. [She looks at me once. No change in expression - not smiling, not crying.] Susan remains with Ariel sitting quietly on the floor by her with a toy. Susan moves slightly changing her position on the floor. Ariel notices but does not cry, though she does move closer to her. Terry, who is sitting close by Susan and Ariel, starts playing with Ariel (saying boo into her face). Terry kisses her cheek. Ariel just looks at her, then moves closer to Susan. Terry does it again with Ariel, but she is smiling this time. Brett, who is standing nearby, pats Terry on her head and hair and fingers her mouth. Susan finally leaves Ariel sitting next to Terry. Ariel starts crying, without even looking around to see that Susan is gone [does she sense it?], nor does Ariel look at Terry. Instead Ariel crawls across the room to Kristen who is sitting on the stairs. She picks her up and hugs her while Ariel stands next to her. Max and Mia come over to show them a toy phone, and Ariel stops crying.

Later, Ariel sees Julia across the room, starts to crawl towards her through many children and toys on the carpet. She gets halfway, stops, sits up, and stops crying. Candace who is sitting near by shows her a toy that seems to catch Ariel's interest. A few seconds later, Ariel is sitting only a few feet from where she has been but nearer Candace, and is playing with a toy phone for a half minute. Then she continues crawling to Julia who has Kelly on her lap: 'Hi, Ariel, whatcha doin'?

Ariel stops, on her knees two feet from Julia, then crawls away from her saying “Ma-ma-ma-ma”. Ariel sits up and watches me write for a minute. Then Kristen comes, sits down near her and engages her with a toy phone (1/7/04).

Staff does not seem to be very supportive of children’s distress- they have a mostly hands-off policy. They have talked about the one infant who is crying a lot- seems she does this even in her former room (the nursery)- to the point of throwing up. Sam seemed to settle down fairly quickly- we’d see how he is on subsequent mornings. All but the three new children (two transitioning infants) seem to be fine all the time- even the newest boy of several weeks (from the researcher’s journal 1/6/04).

9:00 Kristen leaves the toddler room to run an errand and when she returns she brings Ariel from the nursery. Kristen tells the staff that Ariel cried when she brought her out of her room, then stopped on the way to the toddler room that is at the other end of the building. Ariel started crying again as soon as Kristen entered the room. Kristen sits on the floor with Ariel on her lap. Minutes later Kristen sets Ariel on the floor by her and asks Wes to bring her a toy. He does, and Sam brings her one, too. Ariel stops crying briefly and her cry is not hard this time and almost sounds forced but with lots of tears. Kristen sits with her arm around Ariel. 9:03 Ariel is not crying, just sitting and watching the other children play with the toys. She is showing some interest in the toys that are out. Ariel plays with Kristen who is still sitting by her. 9:07 Ariel engages Kristen in her play.

Approximately a half hour later, Susan comes to the half door between the two rooms (the bottom half is closed) to talk to the staff. Ariel sees her, stands up and starts crying again. Susan tries to move so Ariel cannot see her, but it is too late. At the same time Julia goes out the other door and Ariel crawls after her crying. Kristen tries to pick her up with Ariel struggling against her [because she does not want her to?]. When Julia comes back, Ariel follows her with her eyes only still sitting and crying (1/8/04).

What I really would like to know is what the toddlers themselves are thinking and feeling. Sam seemed to adjust fairly quickly, as does Kelly; Ariel is coming along much slower- but her crying is less now. Adam didn't have any problem at all. What about the children who do not seem attached to anyone? Or the children who go to any staff when needed? (from the researcher's journal 1/14/04).

Ariel is crying as I enter the classroom. Candace says her parents dropped her off in this room and she has been crying for an hour and a half. Janell (an infant teacher) comes into the toddler room to collect the laundry. Ariel sees her from the garden center and starts crying harder, crawling fast to Janell as she walks out of the room. Ariel cries at the door for 10 seconds, then crawls to Julia who is moving around the room and getting a child cleaned up after breakfast. Ariel stops to sit and cry on the tile floor by the table where Julia is still cleaning up. Julia finally picks Ariel up and sets her way over on the carpet. Ariel sits there 15 seconds, starts to crawl after Julia but goes to the stairs instead where Max is sitting. Ariel is still crying and Max is telling her something, saying her name [to stop crying?]. A few minutes later, Julia

comes, takes Ariel by the hand and walks her to the middle of the carpet. She stays there 5 seconds, and then crawls back to the tile where Julia returned. Ariel's shoe has come off (which it does frequently). After Julia finishes clean up she sits down on the stairs. Ariel is near her on the carpet and crying. Kelly comes over to stand between Julia's knees. Ariel crawls to Julia, starts to stand holding onto Julia's knee, but sits down instead. Julia then picks her up and sets her on her lap. Susan comes to the half door from the two's room to check on Ariel (Ariel does not see or hear her). The staff tells her she has cried for the last two hours, though Ariel is quiet now because she is on Julia's lap. Ariel cries again as soon as Julia puts her down (1/15/04).

I also think the transitioning infants are too young for this. They are having a hard time. Both just want to be close to an adult caregiver: Julia and/or Kristen. They do not seem to pay any attention to the other children, and very little attention to the toys (from the researcher's journal 1/17/04).

“Ariel is okay doing art and even afterwards when she is set down. [She seems a whole different child than the previous two weeks. She is in this room full-time now]”(1/19/04).

“Ariel is a different child today- no crying, and is playing and smiling- even at me”

(from the researcher's journal 1/19/04).

“I observe Ariel exclusively for a half hour today. She has very little interaction with any staff (Candace, Terry, Julia, and Morgan), and seems happy to be playing independently” (1/21/04).

I need to record this even though not noted in observation notes: Susan comes in the room and stays around 10 minutes, talking to staff about Brett, and transitioning

children (future). Ariel fell over and starts crying. She goes to Susan who picks her up and holds her a minute or two rubbing her back. Ariel lays her head on Susan's shoulder and keeps crying lightly 'milking it?' Susan finally realizes this, and sets Ariel down. Ariel stops crying. All the staff sort of comment on this. They (toddler staff) do not treat transitioning infants this way- they discourage crying and clinging, and usually do not attempt to comfort crying babies, nor encourage close relationships. Interesting. Is it the daycare's philosophy? This room's? Or just a consensus of opinion that children at this age are ready to grow up, be independent, and not so needy emotionally? Do the children then learn this too as they spend time in the toddler room? This has to be confusing, frustrating, and disappointing to those needing/wanting more attention and physical contact. On the other hand, Ariel adjusted very well, and very quickly- a very different child now than she was when she first started coming to the toddler room as she cried all the time. Now she smiles a lot, and plays independently- not needing or seeking a lot of staff attention- except for today with Susan! (from the researcher's journal 2/2/04).

Even though Ariel appeared to have the closest relationship with Julia, particularly during her transitioning time earlier in January, she eventually seemed to need less and less of Julia's attention as she adjusted to her new surroundings. Ariel was interactive with many caregivers as the following represents her level of comfort with other caregivers even with Julia present.

8:50 Ariel is crying sitting on the carpet. Tamara goes to her but does not pick her up. Ariel keeps crying. Then Terry goes to her and picks her up. Ariel stops crying. Terry lifts her up high to touch the pinecones hanging from the ceiling. Terry sets

Ariel down about four feet away and holds her arms out for Ariel to walk to her.

Ariel does, smiling. Terry picks her up again for a few seconds more then sets Ariel down again. Ariel is okay; she is standing there looking and smiling. She tries a few steps on her own, falls down, fusses a little, and then sits there looking at the staff that are talking in a group (1/28/04).

Ariel crawls to Julia sitting by the mirror and tries to get on Julia's lap. Julia sets her off because she wants Ariel to play. Ariel fusses a bit then crawls to Kristen sitting by the wall. Ariel smiling starts to get on Kristen's lap, then stands beside her instead and looks at the pictures on the wall behind and next to Kristen (1/28/04 p.m.).

The relationships these children have with their secondary caregivers changes over time, particularly for new children to the toddler classroom. I believe Ariel would probably be seen as more independent later in the year rather than having a singular close relationship, yet this is where she was at the beginning of my observations. Again, we are looking at overall patterns, and typical behaviors, even though most of the children exhibited uncharacteristic behavior at sometime during the eight weeks.

Multiple Close Relationships: This category is for children who have more than one caregiver they routinely engage within the childcare setting. They are distinguished from indiscriminately friendly by their selectivity. Typically the child was close to two caregivers and not a large or indefinite number of them.

Several children in this toddler classroom appeared to have an equally close relationship with more than one major caregiver. Max and Kelly (a transitioning infant) both interacted with Terry and Julia nearly equally, while Missy chose Terry and

Candace. Missy has the distinction of being the only child in this classroom who displayed attachment behaviors, and then only with Candace, not Terry. Examples of her interactions with caregivers, as well as Kelly's, are cited below.

Kelly with Julia and Terry

“Kelly walks over to Terry who is interacting with Brett, then back to Julia, ‘loving’ on her while sitting on her lap” (1/7/04).

Kelly goes to Terry with arms raised. Terry picks her up with a big hug and walks across the room with her, then sets her down. There are new toys out; Kelly is okay playing with them. Kelly goes back to Julia's side, and then sits on her lap with a Lego piece. After a minute, Julia sets Kelly on her feet so she can stand up and Kelly starts to cry. She then goes to Terry, sits on her lap and stops crying. A little later Kelly goes to Terry again who is sitting on the floor and gives her big hug, and plays with her nametag. Kelly sits on Terry's knee. As Terry gets up to get a tissue for Elena, Kelly starts crying. She gets up and goes to Kristen who is sitting a foot away and has Reese on her lap. Kelly stops, stands next to Kristen, and leans against her, then puts her head against Kristen's head. Kristen sets her down right next to her and Kelly starts crying, but only for about 10 seconds. Then starts again, getting up still crying and rubbing her eyes [tired? I wonder if Ariel and Kelly still need a morning nap]. She goes to Terry who is standing a few feet away. Terry sits down with Kelly on her lap facing out. Kelly is only crying briefly and intermittently (1/8/04).

10:07 Kelly stands up, walks to the mirror. Terry calls her and reaches for her, but

Kelly just looks at her, and then wanders to the toy sink behind where Terry is sitting. Then Kelly goes to Julia who is sitting by the wall, and plays at her side/shoulder for 10 seconds. Kelly walks off to play, then comes back near Julia but just looks at her talking to Terry and Candace. Kelly then goes to Terry, sits for a second, then stands up and watches Morgan as she returns to the room (1/21/04).

Though Kelly in most cases showed a definite preference for Julia and Terry, she also demonstrated her ability to relate to other caregivers.

When Cammie comes back in the room, Kelly gets off Julia's lap crying even harder and goes straight to Cammie. Cammie squats down and hugs Kelly. She still does not stop crying even when Cammie sits down with Kelly on her lap. Wes brings a toy instrument to show Cammie. Kelly finally stops crying for several minutes so Cammie sets her on her feet. Candace comes over and wipes Kelly's nose. She sits back down on Cammie's lap but Cammie stands her up again and Kelly starts to cry. Cammie sits her down beside her, but she keeps crying (1/20/04).

Clearly, Kelly was not being comforted by Cammie, and yet Kelly did not go back to Julia, her preferred caregiver during this time of newness to the toddler room. This may be another example of limited observations. Kelly may have included a third (or fourth) caregiver in her selection for attention and comfort as she became even more acclimated to the toddler classroom. However, she did not demonstrate the overall affection to generally everyone, as would an indiscriminately friendly child.

Missy with Candace and Terry

Missy goes to the changing table and looks up at Candace's back. Then Missy

walks over in front of Terry who is sitting with Elena on her lap. As Elena gets up, Missy moves into position (standing in front of Terry, facing out) as if she is going to back up and sit on Terry's lap, but does not. She starts fussing. Terry does not pull her into her lap. Missy just stands there a minute. Candace comes and gets Missy to change her diaper. When she finishes with the diaper change and Candace sets her down, Missy goes right back to Terry still sitting on the floor in the same place. Terry does set her on her lap this time as Missy moves to do so.

Missy is back on Terry's lap. As Terry gets up to pick up toys, Missy stands up but she is okay this time (at least not fussing). She just stands in the room with her fingers in her mouth watching others. Missy does not assist with the clean-up activity around her.

Terry is on the floor with Stephen next to her, Missy sits down somewhat near them, and then scoots on her bottom further away, stops, then does it again. Missy then gets up and walks back to the edge of the group of children who are near Terry, but only stays 10 seconds. Now she positions herself sitting with her back to the group, less than two feet away from Terry's side. Missy stands up and walks to the other side of the room where she finds a stack of duplos with wheels on the bottom. She begins to play with it, picking it up, and pushing it across the floor. Reese comes over and points to it. Missy just walks away, goes and sits down a foot away from Terry [I notice many times when other children take her toys she does not do anything about it. She just relinquishes the toy and/or walks away]. Now she watches Julian play with blocks on Terry's lap. Missy is crying for some reason.

Terry tells her to come to her. Missy does and stops crying. She lies across Terry's lap, hiding her eyes. Terry plays and hugs her, saying 'I love you. You're a sweet girl.' Missy lies there a long time [several minutes] (1/13/04).

Missy rarely went to Julia (or any of the part-time staff) for anything. However, this next related incident occurred when her two preferred caregivers were not available. Terry was not here this day, and Candace was occupied with diaper changes.

Missy whining goes to Julia who is standing. As Julia sits down she says to Missy, 'want me to sit?' Missy goes to her but continues to fuss. Julia asks, 'want to sit on my lap?' But Missy just stands in front of Julia (1/22/04 p.m.).

Missy's inability to connect with a known caregiver demonstrates further her exclusivity in relations with Candace and Terry. At the same time, this also illustrates the subtlety and complexity of toddlers and their relationships with many secondary caregivers, as does the following (near) interaction.

Missy goes up to Julia who is standing, touches her leg and says hi. Julia says hi back, and then Missy goes off to play with foam blocks. Later in the afternoon, Missy is fussing and walking around the room. She does not go to Candace, but to Terry who is standing and holding Wes, and looks up at her. Missy gets no response from Terry. Terry then sets Wes down and goes to the garden center to talk to the children playing there. Missy does not follow her (1/28/04).

Attachment Behaviors: The classic attachment behaviors that define this category are proximity seeking, distress at caregiver's absence, seeking to gain proximity when caregiver returns, returning to caregiver often during play to seek reassurance and using them as safe base from which to explore.

Missy with Candace

Missy is the one and only child that displayed attachment behaviors indicating a secure attachment to Candace. One incident is cited here with more extensive references included in Candace's caregiver summary.

4:32 Candace is getting her coat which Missy sees. She gets up and goes to Candace crying. Candace says bye and touches Missy's head then leaves. Missy cries harder. Kristen goes to her and picks her up, but Missy doesn't stop crying (though not as hard) as Kristen pats her back (1/28/040).

Disinterested/ Unattached/ Independent: These somewhat interrelated categories characterize children who seemed to function quite well on their own. They typically did not seek any caregiver, much less a specific caregiver, when distressed or needing assistance. These children usually did not approach an adult for affection, nor to engage them in play. As with all the categories and most of the children, there are no definitive and set boundaries. Pervasive and overarching patterns guided my analysis and categorization of relational behaviors.

The children who did not appear to have a close relationship with any caregiver were Joseph, Adam, Sam, and Vanessa. All four were new to this classroom during my time observing yet varied in relating to staff, therefore, all are represented below.

Adam

Of all 17 children observed, I believe Adam was the only child that exhibited insecure-avoidant behaviors with all caregivers in the classroom, even though he was not assessed with attachment instruments. I was able to observe several drop-off and pick-up times with him and his parents (both separately and together). Adam usually ignored his

parents at their return to the center, and when they said good-bye in the mornings. Only once did Adam cry, briefly, at a morning drop-off by his mother as recounted below. Adam's affect was typically flat during the day. However, as time progressed from his first day in this daycare at the beginning of my observations, he did continue to smile more. These examples are included in the following record of Adam's observed behaviors.

A new child, Adam, was here when I came back this afternoon. His mom signed [the Informed Consent form] right away. Staff says Adam did not fuss at all when mom left him this afternoon. He came here from another daycare (1/6/04 p.m.).

Candace, Julia, Terry, and Morgan are present as caregivers. Adam accidentally knocked over the children's chairs that are stacked underneath the loft at the end that opens onto the tile floor. They are starting to fall and he is valiantly trying to put them upright again, looking distressed and calling for help. No one sees or hears him (except me). Julia is at the diaper-changing table assisting Candace with Brett's diaper change, and Terry is on the other side of the room out of his vision. Adam finally just walks away. The chairs do not fall all the way to floor but remain leaning against the table. A short while later Adam is standing in the middle of the room watching the children play around Julia who is sitting with Kelly on her lap. He plays with the blocks by himself. 9:45 [I move to sit on the floor by the window] Adam is at the window, looking out. He walks behind me and lightly touches my back. Then he walks around in front and watches Stephen and Max talking to me and looking at my nametag. Adam walks away.

Adam goes under the loft, gets two large stuffed toys and puts them in the garden center. He is by himself.

9:48 Adam is playing with the lids of the laundry and trash bins, beating on the tops like a drum. He does this for about a minute, with no staff noticing or interrupting his play. Then he walks away, touches the pictures on the back of Morgan's shirt who is sitting about four feet away from the bins with her back to them. Morgan notices him, smiles and says something to Adam who just walks away. Later on, Adam's shoe comes off near the loft. He takes the shoe to Julia who is across the room, turns and sits on her lap so she could put it back on, then runs off.

9:50 Adam is on the floor by the stairs [I am sitting on them]. Then he goes back to the garden center by himself.

9:54 Adam is in the center of the room watching Terry and a few children dance to a music tape. Adam starts high-stepping (dancing?) and smiling, then on his tiptoes, too. At one point he looks at me (1/13/04).

Adam appears to be happy on his own. There is no interaction with any staff, except once with Julia when his shoe comes off and he goes to her for help with it. Adam has very few, if any, interactions with the staff (from the researcher's journal 1/13/04).

8:33 Adam arrives. Mom sets him down and takes his coat off. Julia puts his bib on him, offers her hand and says, 'want to go eat?' Adam ignores her and goes to the toys instead. Mom says good-bye and leaves. Adam does not respond or even look her way. Julia then picks him up, takes him to the table and sets him in his seat with no protest or change in expression from Adam (1/14/04).

9:45 Adam arrives with his mom. Wes walks up to them, talks to Adam's mom and touches Adam's face. Then Wes runs back to Lori with arms up, but Lori does not pick Wes up. Adam starts to cry and cling to his mother. Candace takes him from mom. Adam starts to cry again. Mom is still there standing next to Candace.

Candace rubs Adam back as Adam cuddles into Candace by laying his head on her shoulder. He stops crying, but his face looks sad. Adam's mom leaves and Candace sits down with Adam on her lap trying to engage him with a pull toy. Adam is not interested. Candace gets up, sets him on his feet and takes Adam by the hand to the window where she squats down and talks to all the children there: Adam, Caitlyn, Missy, Wes, Mia, Julian, Reese, and Elena. A few minutes later as Candace stands up and starts to walk away from the children at the window, Wes gives Adam a big hug. Wes is smiling; Adam is not. Candace then takes Adam's hands and dances with him a few seconds. Adam just stands there afterwards looking around with sober expression. [Have I ever seen this boy smile? This is first time I have seen him cry or show any distress- staff mentioned this too]. Lori goes to Adam who is still standing in the place where Candace left him. Lori squats down to talk to Adam, touching him lightly. Adam just stares straight ahead with the same, unreadable facial expression; Adam does not engage with Lori. A little later this morning, Terry is dancing and walking around room with Missy, Mia and Brett following her. They are all smiling with Brett even laughing out loud. Terry goes to Adam and picks him up, talks to and kisses him. Adam's face does not register any change in emotions, and his body posture is stiff (not molding into Terry). Terry holds him for five

seconds, and then starts to set him down. Adam pulls his legs up as if to indicate he does not want down. Terry holds him, dancing, for five more seconds, and then sets Adam down. Adam is okay this time but still with no change in his expression (1/29/04).

This is a note/observation from yesterday (I checked with staff, as they are talking about it): Adam, Wes, and Joseph were recently all at the same poor-quality daycare together since they were infants (which means I probably saw them there last year when I visited). I have noticed that of all the children they are the least needy for attention. Adam and Joseph have a fairly flat affect, expression rarely changes. They aren't unhappy or distressed and yet I do not see them smile. Adam does not interact with staff very much; Joseph is new but appears to be more interactive. Wes is very interactive, friendly, talkative, and animated (I do see some emotions displayed). I'm wondering if there is some common thread here in the type of care they received? Is this possibly a learned behavior of posing a non-interactive stance with secondary caregivers? I wonder what will happen to Wes as he goes to yet another childcare situation (he will only be with this one a few weeks) (from the researcher's journal 2/5/04).

Adam did begin to show a more positive affect and be somewhat more engaged with those around him further into my observations. "Adam is smiling more at staff and me than when he first came" (2/17/04 p.m.). "Adam plays peek a boo with me around staircase for half minute; he is smiling a lot." (2/19/04). Yet, video footage (particularly on 2/11/04) revealed some of his isolation from others, which could be interpreted as independent, as well as avoidant behavior.

Adam is on the floor where his mother set him during drop-off as she engaged him with a toy before she leaves. Adam then sits in the same place playing with the same toy for a full 15 minutes before getting up to help pick up the toys that are out. When new toys are set out, Adam picks up one and carries it around the room for the next 20 minutes, after which he sits down and plays with a different toy. He never engages in any interaction with any caregivers this whole time of 35 minutes.

His parents also concurred on 2/23/04 during an interview that their son does not appear to have a close relationship with any specific caregiver, stating in a questioning voice: “Terry? Candace? Not pronounced.”

Sam, unlike Adam, does approach the staff and seeks comfort from them, but is often ignored by some, and/or is not comforted. His first day at the daycare was my first day of observing (1/5/04).

Sam is in his seat at the table finishing breakfast when I arrive. When he finishes and staff gets him down, he starts crying. Kristen who is sitting on the floor starts to play with him and he stops crying but only for a few minutes. As Kristen gets up to change Brett’s diaper, Sam starts walking away and crying. Terry picks him up immediately and he stops crying. Terry walks around the room talking to him and showing him the pictures on the half door of different children’s families. Then she sets him down. As Terry walks a few feet away towards the table, Sam starts crying again and following her, but then he stops. There is no further interaction between Sam and Terry right then.

A little later, Sam is crying again. He walks to the window behind the table (where children are usually not allowed to be) and stops crying on his own. Candace takes

his hand and walks him to the carpet, where Sam resumes crying off and on.

Candace takes his hand again and walks him to the other window saying: 'want to look out the window?' Candace names a few items for him they see outside before going back to her activities. Sam is okay for a short while, then begins crying off and on again. After a half minute of this, Sam walks to Kristen who is at the changing table. As he does not get an immediate response from her, Sam starts to walk away still crying. Kristen stops what she is doing to pick him up for a minute, but when she sets him down, he starts crying again.

Sam is crying off and on in barely 10-second cycles. In-between he finds something to catch his interest in the room such as a child-level poster on the wall of chicks.

Kristen, with her arms out to him, asks Sam if he wants a diaper change. He goes to her with his arms up and stops crying. He starts again before she even finishes and continues crying after Kristen sets him on the floor.

Soon after this Sam is walking around the room, crying and looking for someone (mom and dad?). He made his way over to Kristen, who picks him up right away but only for half a minute. Sam is crying for Kristen to pick him up again, but she is busy changing the other children's diapers. Sam walks away, then wanders back to Kristen (as she has walked by him and got his attention) who is still changing diapers.

Sam is crying a little, wanting to be picked up by Kristen (she does not). Candace is near by, calls his name, and then gently takes him by the hand. He doesn't want to leave Kristen at first, finally does and goes with Candace to the car tracks on the carpet and sits on her lap a minute. Candace gets him interested in the cars, then gets

up. Sam lasts about half a minute and is now crying again and going to Kristen.

Candace gets him interested in playing with the cars again. He is standing close to her. [I think he is okay as long as he is near a responsive adult]

9:20 Sam is playing with the cars and tracks. Five minutes later he sees Candace nearby but does not fuss or put his arms up to be picked up. Sam then sees me and comes over to look at my pen and paper. There are currently no signs of distress. He walks away, but comes right back and tries to take my pen. I tell him no, it is mine, and pull it to my chest in front of my notebook so that it is out of sight and reach. He only smiles slightly, then walks across the room to the open door where he starts to walk out. Kristen stops him, brings him back, and closes door. Sam is okay, with no crying.

Sam seems fine right now, even with teachers coming and going, and other children crying. He is playing with the toys seemingly unperturbed (1/6/04).

“No one is crying or fussing. Staff says Sam did not fuss at all when dad dropped him off a little while ago” (1/7/04).

Sam arrives at 8:17 with his mom. She puts him down to hang up his coat and he starts to cry. Sam stops crying, though, as Mom picks him up again right away. Mom talks to the staff while she continues to hold him. Candace shows him the pancakes they are having for breakfast, and then she tries to put a bib on Sam. He clings to mom who is squatting next to Sam as he stands on the floor by the toys that are out: bean bags and small wooden blocks. Mom takes her coat off as she sits down with Sam to play.

8:27 Mom puts Sam in his chair at the table without a fuss. Candace puts his bib on

him and Sam starts eating. Then he sees mom several feet away from the table and he starts to fuss again. Mom goes to him as he is crying for real now. She hesitates to leave but the staff reassures her that his crying lasts a very short time. Candace reassures Sam also who is still crying in his seat with food in his mouth. Mom does leave. Sam calms down, and resumes eating his breakfast as he pushes Candace's hands away (1/8/04).

After my half-hour observation exclusively of Sam on 1/14/04, I did not record any interactions with any staff, but he did look at them, twice at Candace and Terry, and once at Valerie. I did not notice him looking at Julia at all.

Sam goes to Julia who is standing near the music shelf and raises his arms to be picked up. Julia does not, walks away, and Sam starts crying, but only for few seconds. Julia goes and sits down on the carpet by the latest toys (garages and little cars). Sam follows Julia but stops at the toys and starts to play with them. He is not crying. [Note: Sam was not here most of this week. Is he not feeling well today? (nose is running), or is he having trouble readjusting to daycare?]

All 11 are children playing in a tight group with the toys. Morgan and Julia are sitting on the floor with them. Julia moves to lean against the toy shelf. Julian is looking, smiling, and talking to Julia, then plays near Julia's feet. Sam is the only child who does not stay with the group. Instead, he goes to the garden center and seems content to play by himself. Morgan calls to Sam 3-4 times to come with no response. Then Julia calls Sam twice; still no response. Sam does not even turn his head. [Does he not hear them? Or is he ignoring them?] (1/22/04).

Even though Sam cried some during his first few days, he settled in fairly quickly.

Sam, however, still did not appear to form a relationship with any caregiver, but seemed to be content playing on his own. It is not clear if he just gave up, or learned to self-comfort and/or be independent. He is one of the children I would like to observe again in a few months to determine any change in this status.

Joseph

This little guy was at the daycare only during the latter half of my observation time. He seemed the most happy-go-lucky of these children who appeared unattached to any toddler teacher. I would categorize Joseph as independent, based on the following examples of his behavior.

This is Joseph's first day at this daycare (coming from another childcare center). I asked Candace how Joseph was when his mom dropped him off this morning, and Candace said he was fine. I have not seen him cry or show any distress at all, and commented that he is like Adam and Wes. Candace agreed. (2/2/03).

Interesting that the new child today did not ever cry or show any signs of distress at drop-off or all the time I am there. A lot like Wes and Adam. I need to schedule time soon to observe only him (Joseph)" (from the researcher's journal 2/2/04).

[I observe Joseph exclusively for half hour] Joseph is touching the laundry bin. Terry who is sitting nearby next to the toy shelf tells him no. Joseph shakes his head no and walks to Terry as she opens her arms to him. Joseph sits on Terry's lap for 10 seconds. Terry kisses him. Joseph gets off Terry's lap and plays with toys a foot away from her.

Then for about 2 minutes, Joseph periodically goes back and forth to Terry, a few seconds each time either standing in front of her or squatting near her and playing.

Later Joseph plays with Caitlyn's toy a few seconds. Then he walks right up to Candace's face where she is sitting by the door with Julian, Max, Brett, Reese, and Mia. Candace says, 'Hi, how are you, Joseph?' Joseph points to the pictures on the door, but gets no response from Candace. Then he moves closer to stand in front of Candace's face to show her his toy. Candace finally responds to him when Joseph repeatedly says 'look'.

9:25 Julia comes and walks Joseph to the changing table to change his diaper.

Joseph goes willingly. Julia does not talk to him the whole time. After the diaper change and Julia sets Joseph down, he walks past Terry back to Candace who says hi again and smiles at him. Joseph then goes to play at the sink for a few seconds. He takes a toy to Candace again putting it right in her face. Candace responds to Joseph by naming it. Joseph continues to stand in front of Candace looking at the toy in his hand with Candace periodically looking at Joseph. Then Joseph goes to the sink and back again to Candace. This time Candace has a toy on her lap, so Joseph squats down to play with it.

9:32 Joseph puts a small toy in a shape box that Candace is holding. Joseph claps his hands [cheering himself?], and then takes box from her but stays standing in front of Candace (2/9/04).

This next related incident occurred on February 19th, halfway through Joseph's third week at the childcare center. Until now, he had never exhibited any signs of distress or unhappiness until the field trip the day before (2/18/04) which is why his behavior is surprising and puzzling.

Joseph cries the whole time he is outside (and I am there to observe). Morgan picks

him up at one point but he does not stop crying; he keeps trying to go back inside whenever anyone opens the door. [Very strange, he is the one who cried yesterday at being outside to get in the van for the field trip- doesn't like the outdoors? Afraid?]

At one point we hear the wind whistle through the trees, and both Morgan and I see and comment on the look of fear on Joseph's face. Then another curious interaction takes place between Joseph and another child's mother (from the two's room). She is outside too, and just picks Joseph up because he is crying. He does not go to her, but they are standing near each other. Joseph stops crying for a minute while she holds him. This mom does not know Joseph, as I asked her. [So what is this all about? Why does he not go to anyone he knows? What makes him fearful and tearful outside? Why does he let a stranger pick him up and stop crying for a while? Though Joseph does start crying again after a bit while she is still holding him. Maybe because he realizes she is not going to take him back inside?] (2/19/04).

Both of these incidents occurred outside of the classroom environment where Joseph appeared to be content and feel safe. Even so, when obviously distressed, he did not go to a familiar caregiver, nor was he able to be comforted by anyone- familiar or not. In the toddler classroom, however, Joseph was unperturbed by anything or anyone. He played well on his own as well as with other children, interacting with staff but not on a regular basis. He seemed quite bright and vocal, but usually did not display his knowledge or verbal abilities in the classroom. When his mother came to get him at the end of the day, he became very excited, going to each of the children, pointing and naming them for his mother. Joseph could have still been in a transition phase at the time of these initial observations. With further time in the classroom, he may display other

behaviors indicating multiple close relationships or possibly an indiscriminately friendly demeanor.

Vanessa

Then there is Vanessa, who transitioned from the infant room with very little crying or distressed behaviors. She did not go to any caregiver, nor seemed to need to. Her behaviors are in stark contrast to Ariel's transition period. Unfortunately, I was only able to observe her a few days, as she left the daycare almost immediately after transitioning from the infant room. Her first day was 1/19/04 for transitioning, with her first full day in the toddler room on 2/2/04. Vanessa's last day was 2/9/04.

10:17 Julia sets Vanessa down in the middle of the carpet. Vanessa does not cry, she just looks around at her new surroundings, even when Julia walks away.

Vanessa looks at Terry who says hi to her. Vanessa waves at Ariel and Kelly [does she remember them?]

10:22 Vanessa crawls across the tumbling mat. Kelly goes to Vanessa and sits down near her. Vanessa is watching the children play in the tent. Then Terry crawls over to Vanessa, talks to her and touches her hair. Vanessa looks at her a few seconds then climbs into Terry's lap.

Later Vanessa crawls to the tile floor, looks up at Julia, then at Candace working there, then crawls to the window back on the carpet, and looks outside.

Vanessa is just crawling around the room, not crying even once. She seems to be okay with all this change and new people. [This is such a difference from previous behavior of Ariel and Kelly]. Music is turned on. Lori is dancing, taking Sam's arms and trying to engage him in movement, but he is not willing. Vanessa sits

watching Lori and clapping her hands. After a little while, Lori sits down on the carpet. Vanessa moves to Lori's knees and looks at her. Lori says hello to Vanessa, but there is no further interaction just then.

A few minutes later, Vanessa crawls near Lori again. This time Lori talks to her. Then Vanessa crawls to me, stares at me several seconds first as I smile at her. She then pulls herself to a stand by holding onto me and stays half a minute, smiling a little (1/19/04).

The next and single recorded observation for Vanessa, as she was often absent, is on 1/28/04 in the afternoon (she arrived that morning). "Vanessa crawls to Kristen who has Reese on her lap." Two hours of observation on this day resulted in many pages of recordings of other children's interactions with the staff. This one comment is indicative of the relative inactivity between Vanessa and her toddler caregivers. Vanessa was also present on 2/3/04 when I observed Tamara exclusively but there was very little interaction between them as well.

Vanessa's last day at this daycare was 2/9/04 when I observed just her for a half hour; the following is what transpired.

Vanessa is sitting on the carpet by the door where her mother sets her. She looks at me sitting on the stairs, babbles and smiles. Mom squats down to hug Vanessa, who is now standing, goodbye. Vanessa is smiling and clapping, and then looks at Julia sitting by the sink engaged with toys and four other children. Vanessa's mom leaves. Candace talks to Vanessa across the room from her place sitting on the floor by the window. Vanessa gets down on her hands and knees to play; she is okay.
10:15 Vanessa is playing with the train tracks on the carpet She looks at Julia and

the other children. Vanessa crawls towards the garden center where she sits halfway and watches the others for a few minutes, then crawls the rest of the way to the garden center.

10:23 Vanessa crawls to me where I am sitting on the stairs (I had been sitting on the floor). She is looking at, talking to, and smiling at me for almost a full minute. Then Vanessa crawls further out on the carpet, kneels and chews on a toy. After the activity of picking up the current toys and getting out new ones, Vanessa is in the same spot on the carpet where the toy bin sets. She is on her knees, smiling and clapping occasionally.

As Kristen arrives at 10:39, Vanessa watches her put her coat in the closet. Vanessa is staring at Kristen and not smiling. Vanessa crawls back near the garden center, and then stops to chew on a toy, all the while watching the staff walking around and talking. She then moves on to the garden center.

10:46 Kristen comes near the garden center and she asks Vanessa what she is doing. Vanessa smiles at Kristen. Kristen says to Vanessa: 'Are you trying to walk?' Kristen sits down on the floor leaning against the closed half door, holds out her arms to Vanessa talking to her and encouraging her to walk. Vanessa takes a few steps then falls over but does not cry [she is okay]. Kristen, talking and smiling, helps Vanessa stand up and walk to her. Vanessa stays a few seconds, and then backs up a few feet still watching Kristen who now has Max, Julian, and Mia with her. Kristen tickles Vanessa's tummy and Vanessa smiles. She stays another half minute, and then crawls across the tile floor to the window where Joseph is looking out. Candace comes and lifts Vanessa to the carpet. Then Julia comes to Vanessa

and walks her further onto the carpet. Vanessa is happily jabbering as Julia walks away from her.

10:50 Vanessa crawls a short distance, then kneels and claps her hands. She moves on to the toy shelf past Terry who is sitting near it. Vanessa plays with the toys on the top shelf there.

Vanessa walks to the play sink behind Terry where she falls over and cries. Terry asks her what happened, then pulls Vanessa up and to her. Terry checks Vanessa's face, then sits her on her lap sideways facing out. Vanessa only cried for a few seconds. After a minute, Vanessa crawls back to the kitchen center to play. When Cammie walks in with lunch, Vanessa looks at her and smiles but Cammie does not look at her. Vanessa crawls back to toy shelf behind Terry, and looks at herself in the mirror on the wall there (2/9/04).

Even though observations of Vanessa were limited, I think that she would have remained independent or disinterested in forming a close relationship with any toddler teacher. She was a child that clearly demonstrated undisturbed acceptance of her new environment with unfamiliar caregivers. Vanessa did a lot of sitting and watching, but also played independently, and rarely showed distress or a need for close interactions with attending adults.

“What is it about some children who do not appear to need anybody- are happy playing wherever they are?” (from the researcher's journal 2/2/04). Many of these children often exhibited behaviors indicating independence or the lack of need for a teacher's attendance or assistance. Even children who demonstrated having close relationships with one or more toddler caregivers had moments of independence and self-

comforting, as the following illustrate.

Wes goes up to *Kristen* who is squatting down to wash the low windows and lays his head on her back. Then he crawls underneath the table for a few seconds. On coming out he bumps his head. He just rubs it himself; he does not cry or go to anyone (1/6/04).

Reese gets his fingers shut in the garden center mailbox by another child. He does not go to anyone, and is crying fairly hard. *Kristen*, who is right there, picks him up to comfort him. His crying did not last long. As *Kristen* sets him down after a minute he walks over to the closed classroom door and sits down with his back to it. *Reese* is not in distress. (Having a quiet moment?) (1/6/04).

Sam is fussing again because *Brett* has taken his toy. He starts to go to *Candace* but *Candace* wants to check *Sam*'s diaper so she turns his back to her to do this. *Sam* fusses the whole time. When *Candace* is finished, *Sam* goes across the room away from *Candace* crying even more. *Sam* goes to the play sink, stops crying, then goes to the mirror and plays peek-a-boo with his image (1/22/04).

Adam is sitting on the edge of the carpet watching the other children play. He crawls under the table and sits for a while. When he gets on his knees he bumps his head on the underside of the table. *Adam* does not do anything (cry, rub it, go to anyone). He sees me and smiles, then begins to play peek-a-boo under the table. *Adam* gets on his knees again and touches his head to the floor (1/13/04).

Reese bites *Vanessa*'s hand while they are playing in the garden center. All staff sees this, but *Terry* who is the closest in proximity, goes to her. *Vanessa* does not cry or move toward anyone, but she does raise her arms when *Terry* reaches down to pick

her up (1/28/04).

More often than not, caregivers promptly met these toddler's physical and emotional needs. Children in distress usually did not have time to choose a caregiver to go to, as one or more of the staff responded to them first and quickly. It is interesting to note, and pertinent to my research, that the children above were not ones who had a close relationship with one or more caregivers (or were indiscriminately friendly). The focus of my research was on relationships, but these incidences captured behaviors that indicated and supported the category of non-relationships between children and their secondary caregivers.

Caregivers' Synopsis:

Relationships are multi-dimensional, reciprocal, and by definition, involve more than one person. My observation notes and subsequent analysis detailed a multitude of exchanges between the various dyads possible. Presenting these in separate sections emphasizes one half of a relational pair at a time, as previously in the children's categorical examples. Though the following section focuses more on the teachers' role or perspective in their relationships with the toddlers in their care, one should keep in mind that the pictures presented are still substantively and essentially of the whole dyad.

Minor Caregivers: These are caregivers in the toddler room on an infrequent and/or half-day basis. All had other duties in this daycare either in different classrooms or as an administrator.

Valerie has very little noteworthy interactions. There is not enough data on her even though she is present five different days on 1/12/04,1/14/04, 2/11/04, 2/18/04, and

2/23/04. I observed her exclusively for only one hour on 2/18/04, shortened due to the field trip that morning. Valerie seems to be up doing chores and sitting on the carpet about an equal amount of time throughout her times in the toddler classroom. I did not observe any particular child going to her more than others, except for Elena on 1/12/04. On this day Elena goes to Valerie four times in half an hour, and three times to Terry, two times each to a substitute caregiver and Julia. Candace was not there.

Morgan, observed exclusively for a two-hour session on 2/19/04, was nearly always sitting down on the carpet during her times in the classroom. If she was not, she typically was changing diapers. Children present that day that went to her one time only were Caitlyn, Mia, Kelly, Joseph, Elena; with twice recorded for Brett and Julian. Sam and Adam only played near by, not interacting with Morgan. Ariel and Missy never even approached her. Only one of the interactions (with Reese) this day occurred when Morgan was standing up. There was one incident when Morgan called for Brett to come to her- which he does- for an affectionate interactive playtime on Morgan's lap.

Lori was present in the toddler room as a caregiver only twice during observation days on 1/19/04 and 1/29/04. Adam (only here one of Lori's two days) and Missy (present on both days) had no observable interactions with Lori. Joseph had not started yet. Sam, Caitlyn, and Kelly had only one interaction each with Lori observed on both days. Except for Julian, Wes had the most interaction with Lori (nearly twice that of Max, Brett, and Mia). Max received the most attention from Lori. Reese, Ariel, Elena, and Vanessa spent only a few times interacting with this caregiver (about half that of the previous three children). As with the other part-time staff Lori was almost always sitting down and available for the children (except when changing diapers). Lori was very vocal

and interactive with many of the children.

However, I noticed some unusual behavior between her and Julian. He had, by far, the most noted interactions with and/or approaches to Lori, yet Lori appeared to rebuff Julian's overtures. Julian, also, did not appear to enjoy the interactions they did have. I kept wondering why he would continue to go to her, wondering also what was the nature of their previous history together, if any. Therefore, the majority of the quoted examples below are about her and Julian.

Brett goes to Lori who is kneeling on the carpet. She picks him up and stands him on her knees dancing with him and singing. Now it is Wes's turn. Then Brett climbs back on Lori's lap for another turn, with Julian nearby watching and smiling. Brett gives Lori a kiss and hug.

9:34 Julian takes a toy to Lori again for a few seconds, as does Mia.

Brett needs help. He hollers and looks at Candace who is in his line of vision, but Lori is the one who assists him as Lori is sitting right next to him. After he receives assistance, Brett crawls off to play with other toys.

Julian goes to Lori, and Lori sings a song to him. Julian just watches her then looks elsewhere. Julian starts to crawl in Lori's lap. She does not assist or respond, and Julian stops. Lori, singing, lightly touches Julian shoulders in time to the music.

Julian tries again to climb in Lori's lap, but she does not respond. Julian crawls away from her.

Wes goes to Lori with a toy and engages her for a few seconds. Julian goes back to Lori's side with a toy also. Brett is at Lori's back with a hairnet (from the play doctor's kit). Lori moves away from Brett's activity. Smiling, Brett walks away.

Julian is standing in front of Lori again. Lori is clapping her hands to the music, then on Julian's tummy and chest. Julian just watches her actions. There are no smiles from either of them. Lori sits down on the floor and plays with Wes who is in front of her. Julian crawls to Lori, stands up and watches her play with Wes. Max grabs Lori by the neck from the back. Lori plays with him by rocking and leaning over. Julian walks away. [It seems that Julian is trying to get attention from Lori, and Lori is not responding hardly at all. Lori does not try to engage Julian.]

The music tape is still on with Lori 'dancing' (sitting down). She takes Sam's arms and tries to engage him in the movement, but he is not responsive. Vanessa is sitting nearby, clapping her hands and watching Lori. Julian leans on Lori's legs where she is sitting. Lori moves him off saying, 'I'm going to tie Wes's shoe', which she does. Julian gets up and walks away. Vanessa moves to Lori's knees and looks at her. Lori says hello to Vanessa, but there is no further interaction. Lori moves to the tumbling mat and kneels. Julian is sitting next to her but is looking around the room. Lori gets up to move Sam away from the cupboard (1/19/04).

It is possible that further observations of Lori and Julian would have revealed a different aspect of their relationship. I was most intrigued by Julian's continued attempts to relate to this caregiver. His behavior here appears to fit the profile of an indiscriminately friendly child, but I wonder how long he would have approached Lori before giving up. He did not even revert to another, more familiar teacher as a known source of engaging interactions. I also wondered why Lori seemed out-going and warmly interactive with the all other children except Julian.

Tamara was in the toddler room on 1/13/04 p.m., 1/22/04 p.m., 1/28/04, and on

2/3/04 p.m. when I observed her exclusively. True to form Mia and Julian had the most interactions with Tamara, with Kelly close behind. Brett, Max, Reese, and Elena were about equal in their medium level of exchanges with this caregiver, with Elena clearly receiving the most attention from Tamara. There was very little interaction with Sam, Caitlyn, or Wes, and they were almost all distress related (either children going to her or Tamara going to their aid). Ariel's relationship with Tamara was the most interesting as Ariel went to her once, with Tamara going to Ariel to try (usually unsuccessfully) to comfort her many times. Again, Adam, Missy, and Joseph had zero contact with this caregiver, though Joseph's first day was the only day that Tamara was observed with him. Vanessa did not approach Tamara, but Tamara went to her twice. Also typical for part-time staff, the majority of interactions with all the children occurred when Tamara was sitting down, except for Max. He had an almost equal number of interactions with Tamara when she was standing. The following are examples of interactions between Tamara and the most attentive children with her.

“Kelly goes to Tamara who is sitting on the stairs. Tamara picks her up, sets her on her lap, and then tosses her a little in the air. Then Mia and Kelly dance with Tamara, standing and holding hands” (1/13/04).

Kelly running, trips, falls and starts to fuss as Tamara set her down. She turns and goes back to Tamara who picks her up again and plays with her in her arms while standing. Tamara sets Kelly down again as she is okay (1/22/04).

Brett goes to Tamara with a block, turns and sits on her lap as Tamara holds out her arms to him even though she is talking to Terry. Later Tamara tries to take Brett

from Terry to change his diaper. She is talking gently to him, but Brett does not want to go to her as he is struggling and clinging to Terry. Brett is crying and reaching back for Terry so Tamara sets him down. Terry then offers to change his diaper as she picks Brett up. Brett is okay with this (1/28/04).

As Tamara sits down by the toy shelf, Julian brings a toy xylophone to Tamara. She plays with it as Julian stands there smiling. Sam comes over to watch Tamara and Julian together. Julian only stays a few seconds then walks off (1/28/04).

Caitlyn falls down and hollers once. Julia and Terry both ask Caitlyn if she is okay, but neither one go to her. Caitlyn crawls over to Tamara and into her lap. She stays there several minutes, with Tamara hugging her (1/28/04).

[Candace, Julia, Terry are here also] Tamara says Elena's name, then smiles and talks to her about the toys that are nearby. Tamara engages Elena with them. Max and Julian join them, but Max only stays a few seconds. Julian stays, and Tamara engages in play with him near the sink. Elena is still nearby playing on her own. Kelly joins Tamara and Julian, with Elena standing and watching. Julian sits next to Tamara. Tamara playfully grabs Elena, and lays her across her lap, saying 'where are you going?' Both are smiling.

Tamara pats Julian's back as he crawls across her legs. Kelly and Elena are playing with toys near Tamara's side. Mia goes to Tamara who is sitting in the middle of the carpet. Mia snuggles into Tamara as Tamara holds, pats, and kisses her. Tamara asks Mia if she hurt her eye. Mia gets off Tamara's lap after a half minute.

Tamara picks Mia up who is next to her, and shows her out the open door. Then Tamara carries Mia to the hanging flags and lets her touch them. She sets her down

after half a minute.

Julian comes back to Tamara and they talk for a few seconds. Tamara puts her arm around Julian's legs as he stands close to her. Tamara then picks Julian up and sets him on her lap. She pulls a toy closer to them. Julian stands up briefly, then sits again. Mia brings a toy and joins Tamara and Julian for 10 seconds.

Mia goes back to Tamara to play near her. Julian plays on Tamara's other side.

Sam runs to Tamara crying with his arms up. Tamara picks Sam up. He hides his face in her shoulder but he does not stop crying. Tamara takes Sam to the window and sits down with Sam to look out the window. Sam stops crying for a few seconds, then starts again. Elena, Missy, Brett, and Julian are there looking out the window also. Tamara is trying to distract Sam with nearby toys to keep him from crying.

Staff speculates that Sam is upset because parents are coming to take their children home, but his parents have not arrived yet. [He might sense that it is that time]

(2/3/04 p.m.).

Kristen was a caregiver in the toddler classroom my first week of observations on 1/5/04, 1/6/04, 1/7/04, 1/8/04, then again on 1/28/04 in the afternoon after a two-and-a-half-week absence. She was seen on different occasions working in the two's room next door, which allowed her limited access to children in the toddler room. Most of Kristen's interactions were with four children. Kristen was often sitting on the floor. Atypically for Reese, he had the most interactions with Kristen. He did not exhibit a close relationship with any other caregiver except Julia (included in her summary below). For other caregivers, major and part-time, he was always in the medium to low interaction range.

Also atypical for the friendliest children, Mia, Julian, and Brett had very little

interaction with Kristen (Brett actually had none). The other children with considerable interactions with Kristen were Ariel, Wes, and Max (again unusual for him as he usual placed mid-range). Ariel had the most contact with this caregiver with nearly equal initiations by her and Kristen. Since the week I observed Kristen was also Ariel's first week in the toddler room (transitioning) many of their interactions were distress related. Kelly, Sam, Elena, and Caitlyn had a medium amount of interactions, while Stephen, Vanessa, Missy, and Adam had one or none. Most of the children never received attention initiated by Kristen. The two children who did, Sam and Kelly, were distress related. The majority of their contacts with Kristen were in this category, with nearly an equal number of child and caregiver initiations.

Kristen would be a good choice for continued observation if she were assigned to the toddler room more often, as the majority of the children exhibited behavior uncharacteristic for them as seen with the other caregivers. Mainly, I would be interested to try and understand why Reese initiated frequent contact with her, and why Mia, Julian, and Brett did not. These anomalies in describing child and caregiver relationships prove the exception to the rule maxim.

Max is on Kristen's lap, smiling and watching the children play with the stacking rings. He sits there a long time. Kristen gets up and Max follows her around, pulling on her hand to have her sit on the floor with him (which she does). Reese is on Kristen's lap now; Max is okay with that. Stephen and Max are lying all over and around Kristen (1/5/04).

Reese walks over to Kristen with his arms open. Kristen who is sitting on the floor

opens her arms to him and he falls into them smiling. Mia did the same thing. Then Kristen takes them over to the back window to see a truck parked there. A large group of excited toddlers come over to see it. Kristen takes turns picking up one or two children at a time to see it better. All of them are trying to say the word truck (1/6/04).

Reese is crying a little with his finger in his mouth. He walks quickly to Kristen across the room. Kristen picks him up and comments on his teething. She gets his teething 'Popsicle' for him and secures it around his neck with a bandana. Reese comes smiling from halfway across the room with his arms out and falls into Kristen's arms, then sits on her lap facing in and talks to her (1/7/04).

Kristen leaves the room. Sam is fussing and going back and forth between the door and the garden center. She returns, but leaves again taking Reese with her.

No one is crying now. Ariel starts in again when Julia walks across room. Ariel stops crying and watches the other children. Kristen leaves the room again. Ariel watches her go but does not start crying.

Kristen puts Ariel in her seat at the table to do glue art. Ariel is fine (no crying), until Candace tries to help her with the project (1/8/04).

Kristen comes to the half door where she is working in the two's room today. She picks Max up from the toddler room through the open top of the half door, gives him a hug, and then sets him down again. Kristen repeats this with Max. Then Stephen

runs over to the door where Kristen picks him up and takes him into the other room for a few minutes (1/13/04 p.m.).

Max gets up and picks up a toy that Reese had (Reese doesn't seem to care that Max takes it). Reese walks over to Kristen and sits on her lap. Julian, Mia, and Wes are nearby. Reese is still on Kristen's lap; they are talking and he is playing with Kristen's necklace. Julian comes and stands near to touch it also.

Kristen is sitting by the wall and has Reese playing with a toy on her lap. Wes is at her shoulder with Max near by also. Reese is back on Kristen's lap while Max stands next to Kristen and checks out her hair.

Wes goes to Kristen and sits on her lap for a minute, then gets up. Ariel walks over to Kristen. Kristen hugs her, and Ariel sits on Kristen's lap several minutes.

Kelly who is at the sink starts to cry, Kristen looks at her and tells her she is okay.

Kelly stops crying (1/28/04).

Cammie, an administrator at the daycare, was in the toddler room on 1/20/04 as a caregiver, with brief non-caregiver entrances recorded on 1/15/04, 1/21/04, 1/28/04, and 1/29/04 as well. Kelly had the most contact with *Cammie*, with Wes a close second. Reese, Max, Mia, and Brett all had several interactions with this caregiver (but about half the amount of the top two children's). Caitlyn and Elena had a few, Ariel had one, and Missy and Vanessa had no contact with *Cammie*. Almost all of these interactions took place with *Cammie* sitting on the floor the day she is a caregiver in the toddler room, as quoted in the following examples. This particular day was also captured on videotape, as well as a few of the times she came into the classroom on business. This was the first

definitive rationale to begin to look more closely at other caregivers and the quantity and quality of interactions with the children based on the specific act of sitting down on the floor versus standing even though still present in the room.

Cammie comes in for 10 seconds. As she is leaving, Brett sees her, comes over and gives a big hug that is returned by Cammie. Then Kelly does the same thing, with Brett then initiating another hug. Finally Wes comes over to her but mainly to show her a toy (no hug). Cammie leaves and Wes leans against the closed door for a second with no signs of distress (1/15/04).

[Cammie as caregiver] Reese's shoe comes off. He picks it up, and walks to Cammie who is sitting in the middle of the carpet building a tall structure out of duplos blocks with Max and Wes. Cammie asks Reese, 'need your shoe on?', as she pulls him onto her lap to put his shoe back on. After she sets him on his feet he begins playing with the tower, too.

9:36 Mia joins them. Reese stands up, looks at Cammie, then climbs partially onto her lap giving and receiving a hug. He sits there another five seconds, and then resumes his play with the blocks. Cammie gets up and goes to the half door to talk to staff in the two's room. While she is standing there Wes comes up behind her and briefly grabs her legs [sort of a walk-by hug].

Wes shows Cammie his fingers [not sure if he has hurt them or not; no signs of distress]. There is no further interaction as Wes goes off to play.

Wes goes to Candace to show her his 'hat', which is an open tambourine. Then he walks across the carpet to show Cammie. Both caregivers make a comment about his play.

Wes comes back by Cammie's side with other musical instruments. Cammie is sitting on the floor with Kelly on her lap. Cammie sets Kelly off her lap and onto the floor. After 10 seconds Kelly stands up and goes off to play. Kelly returns for a half minute to Cammie who is still sitting in the same place on the floor. Max, smiling, walks over to show Cammie his musical shakers for a few seconds. Mia does the same thing. Caitlyn also comes with shakers and sits in front of Cammie. She stays for several minutes though with an occasional exchange with Cammie.

Reese and Kelly are by Cammie's side with shakers. Kelly tries to climb into Cammie's lap. Cammie gives her a hug then sets Kelly off her lap. Reese sits on Cammie's knee for 15 seconds.

Wes returns to Cammie's side with musical instruments, as does Mia, but they do not stay nor have any interaction with Cammie. 10:47 Caitlyn gets up from in front of Cammie.

Mia goes back to Cammie and gives the instruments she was playing with to her.

Wes sits down close behind Cammie. She reaches around and gives Wes a brief hug.

Elena brings a toy to Cammie, puts it in her lap then sits down in front of her. Kelly sits down on Cammie's knee for about 10 seconds, then gets up and walks away.

Elena is still playing in front of Cammie. Then Cammie stands up to answer the phone.

10:52 Cammie leaves the room without any child noticing (1/20/04).

“Cammie comes in to bring a bin of toys. There are no exchanges with any of the children”

(1/21/04).

10:51 As Cammie enters the toddler room Reese is crying hard [not sure why].

Cammie picks him up from where he is standing near the open door. Reese keeps on crying. Cammie says, 'did it scare you? You're okay.' Cammie holds and talks to Reese a few more seconds, and as he is calm, Cammie sets him down. Mia is also right there with her arms up to Cammie. Cammie picks her up and says hello, kisses her and sets her down. Cammie leaves after a minute of business with toddler staff. None of the children notice her departure (1/28/04).

Cammie comes in the room bringing their lunch. Ariel watches her walk back to go out the door and starts to get on her knees to follow Cammie. Cammie sees her but tells her in a friendly tone of voice not to come to her. Ariel stops and sits back down as Cammie completes her exit (1/29/04).

Nearly all of the observed interactions with part-time toddler caregivers (especially and including Cammie's non-administrative time in their classroom) took place when the caregiver was sitting on the floor. They typically did not have other classroom duties except for taking turns with diaper changes. There were no noticeable, major differences in the part-time caregiver's personalities or manner of care. This theme of availability in spite of caregiver variances continues with the major toddler teachers.

Major Caregivers: The three main teachers for the toddler classroom were Candace, Julia, and Terry. All three have been full-time caregivers in this childcare center for several years. They are the main focus for the caregiver section on these observed relationships.

Candace has been at this daycare for about four years, but in the toddler room as the lead teacher less than a year. During an interview with her on 2/25/04 Candace stated

she has a close relationship with Mia, Max, Julian, and Brett. “The older ones I have gotten to know longer. Can communicate; makes it easier to get attached to them.” She also spends time with Brett and his family outside of the center. Brett’s mother stated on 2/17/04 that she believes her son has a close relationship with both Candace and Terry.

As for my analysis of observations of Candace and her interactions with the children, Mia, Julian, and Brett (as well as Missy) revealed the most contact with Candace, usually when she was sitting down. Wes, Elena, and Kelly had only moderate association with Candace. Max, Reese, Ariel, Joseph, and Vanessa had minimal contact, while Adam, Caitlyn, Sam, and Stephen had none. This invites one to question Candace’s statement about Max, especially when you also consider the fact that his interactions with Terry and Julia were three times that with Candace. Nearly half of the children never went to Candace for comfort or assistance, and all of the others have only one recorded incident of this type of interaction. For all three times Candace goes to Ariel when she is distressed, Candace was not able to comfort her.

Because of Candace’s leadership role in the toddler classroom, her duties kept her off the floor and often out of the room entirely for brief times. This affected her availability to the children and the amount of engagement possible. It does not seem that she was any less appealing in her personality or manner of interacting with the children, but the children sensed that when she was not sitting or kneeling on the floor she was generally not to be approached or sought out for assistance, comfort, or play. I believe this affected her relationships with all the children except Missy.

It was interesting to note that Candace did not name Missy as a child she had a close relationship with, especially given the inordinate amount of interactions between

Missy and Candace combined with high incidents of this child simply watching or staying close to her. Even Missy's mother stated on 2/24/04 that she believes her daughter has the closest relationship with Candace, and if she is not there then Missy goes to Terry. During our interview on 2/25/04 I questioned Candace about their relationship, asking her to tell me what transpired between them when Missy first came to the toddler classroom. The staff here had previously informed me of her difficult transition to daycare when she was one year old. They said Missy cried all day, every day for three or four months. Her parents told the staff that they had never taken her anywhere before this, not even to the grocery store. She was cared for solely at home by her mother until her enrollment at this daycare.

Candace states: "I had to distance myself from her, so she could be comfortable with other staff. Missy started daycare in June. From June until September-October when I would leave at 4 -4:30 she would be screaming/fitting out until mom came. Missy literally clung to my leg, screaming and crying if I made her let go so I could do other things. Missy was always under foot. She was immediately attached to me from her first day. I think it's the way I look- small frame, short dark hair- similar to mom."

Later that afternoon after the interview and thinking about what Candace told me, I asked her who took Missy from her mom that very first day. I was wondering if that was the critical factor for Missy to cling to Candace. Candace thought about it a minute, then admitted that possibly her making the first contact could have been a factor too, as well as looking the most similar of all the toddler teachers to mom. "I did greet Missy and both parents her first day [as lead teacher in the classroom]; and was the first to pick

Missy up when stressing out over parents leaving.” Candace says Julia was not there that day, and the other staff did not go to Missy. “You tend to bond with those that need you more. I have not bonded with any of the others, maybe Reese more so, because he has an older brother” [that Candace took care of in her previous classroom].

There appears to be specific attachment behaviors exhibited by Missy in relation to Candace: proximity seeking, distress at caregiver’s absence, seeking to gain proximity when caregiver returns, returning to caregiver often during play to seek reassurance (safe base to explore). Missy did not always stick close to Candace, nor follow her about the room. She did not always cry or show signs of distress when Candace left the room, which during the course of the day was often, but she did so more often than not.

Candace’s attachment relationship with Missy is also evident by the sheer volume of interactions and proximity seeking, which was more than three times that of the next highest interactive child. Missy was habitually found near Candace even when she was standing and moving about the classroom. Missy could be seen watching Candace regularly without any interaction occurring. She appeared to be content just to be close by, even as much as two or three feet away from Candace. No other child approached this diligent and consistent watching and staying close to a caregiver, even though Missy also displayed clear affection and nearly equal interactions with Terry. Missy did not however show distress at Terry’s absences from the classroom. This places Missy uniquely in two categories: multiple close relationships and attachment with one secondary caregiver.

The following quotes from observations of Candace’s interactions with the children are separated into two main themes. Missy’s documented attachment behaviors are first followed by general interactions with all children when Candace was sitting

down rather than moving about the room.

When Candace returns to the room, Missy is at the door and follows her across the room.

Missy is watching and waiting by the door for Candace to return.

Missy is standing near Candace.

9:45 Candace is at the cupboard with Missy by her side.

Missy is following Candace again, staying near her and watching her prepare for a craft.

Missy is by the closed door, fussing and waiting for Candace to return. When she does, Missy watches her and starts following her (1/19/04).

Missy follows Candace to the closet and stands looking up at her. Then she sits near the closet with some toys from the music shelf (in this same corner).

Candace continues working in and from the open closet as some art supplies are stored there.

When Candace leaves the room, Missy goes to the open door and looks out. Candace is back in about a minute, with Missy running after her and smiling. She does not follow her back to closet though where Candace resumes her activities. Missy goes off to play for a while.

9:38 Missy brings a scarf to Candace who is kneeling on the carpet now. Candace puts it on Missy's head (1/21/04).

“Candace stands up with Missy moving right beside her. However, as Candace walks to the toy shelf; Missy goes to the middle of the carpet” (1/22/04).

“Candace is at the table getting a project ready for the children. Missy is by her side watching” (1/27/04).

Candace sits by wall and gets the respirator out for Brett who is there watching, as is Kelly. Many of the other children come over to watch also. Missy comes and sits down beside Candace. After several minutes, Missy finally leaves Candace and is playing.

Candace is standing at the half door showing Elena’s dress-up outfit to everyone in the two’s room. Missy and Mia are near Candace watching this. As soon as Candace puts Elena down, Mia has her arms up for Candace to her pick up, which she does for a few seconds and lets her look in the two’s room. Candace sets her down and walks to the other side of the room with Missy following her. [Missy did not raise her arms to Candace asking to be picked up.]

Vanessa comes and sits by Candace with Missy standing a few feet away.

10:19 Candace is at the changing table doing some paperwork. Missy is standing close by and watching her. A minute later Missy is standing watching Candace as she cleans up the table after an art project (1/28/04).

4:32 Candace is getting her coat out of the closet and putting it on. Missy sees this, gets up and goes to Candace crying. Candace says ‘bye’, gently touches Missy’s head and leaves. Missy cries harder. Kristen picks her up, but Missy does not stop crying for several more minutes (1/28/04 p.m.).

“Candace is at the table writing and doing administrative chores. Missy is close by watching her. Candace moves to the carpet and tries to engage Missy with the toys there”

(1/29/04).

Missy joins Candace for a second, and then Missy goes to the music shelf without her.

9:37 Missy comes back to the table for a few seconds to watch Candace working, then leaves her side again to go to the garden center.

9:40: Candace goes to get several children out from underneath the table, then when she goes back to the table Missy joins her there again (no exchange).

[Missy appears to be content to have Candace in sight with some, intermittent- but not necessarily- close proximity]. Missy walks up to Candace and says something to her (which I did not understand). Candace responds to her as they have several seconds of verbal exchange.

Missy goes back and forth from Candace then out into the room.

Missy continues this activity of checking out Candace's whereabouts, going off to play, coming back again, rarely with any exchange between the two.

Then at 10:13 Candace sits down on the carpet again to play with Missy, Elena, Julian, Mia, and Reese. [Candace is on the floor interacting with these children for seventeen minutes which is unusual for her to be able to stay engaged that long due to her other duties.]

Candace gets up and goes to the door with Missy following her. Missy is fussing as Candace opens the door and stands there talking to the other staff back in their room.

Missy starts crying as Candace says, 'I'll be right back' to her and leaves. Missy cries harder as she walks to Terry for comfort. Candace is back in five seconds.

Missy sees her and starts to the door but does not progress halfway across the carpet

before Candace leaves again. Missy is okay this time.

10:34 Candace returns and indicates it is time to clean up. Missy does not go to her.

[I rarely see Missy help pick up the toys. She may not like the closeness of other children crowded around the toy bin.] Candace is moving around the room picking up toys in order to put new ones out, after which she sits back on the floor (2/2/04).

This week I decided to observe and take notes on only one staff per morning session. Did Candace today, no surprises- just as I thought: most (all but Missy) do not pay any attention to her when she is in the room but not on the floor. I missed a few good interactions with other staff (from the researcher's journal 2/2/04).

Candace is sitting on the floor with Mia, Wes, Julian, and Max in front of her showing her their scarves (from the hair-dresser items put out for play). Candace ties one around Mia's shoulders as Missy joins them. Julian is standing and rubbing his back against Candace's arms (1/15/04).

Candace has left the room again. Missy watches her go then walks to play at the sink near the door. When Candace returns she sits on the carpet near the toy garages.

Missy, Kelly, Elena, Wes, Mia all form a close group around Candace (1/22/04).

Brett takes his animal to Candace who engages him and Missy with it. Wes and Mia join them, then Julian. Candace makes barking sounds for the toy dog for a half-minute play. The children are not sure if they like this or not, as their faces indicate both mild fear and enjoyment (1/29/04).

9:00 to 9:17 Candace is up and moving about the room taking care of business.

At 9:17 Candace kneels on the carpet where toys are set out. Elena and Julian go to

her, then Missy. Elena plays with a toy while sitting on Candace's lap. Candace says, 'oh, Missy, your nose' as she gets up to get a tissue and wipes Missy's nose.

Candace first walks to the sink to get Reese down from climbing on it, then goes right back to Elena on the carpet. 'Alright Elena, you building it?' Two seconds later Reese is at it again, this time Candace sits down with him and engages him with the blocks naming their colors. Candace says hi to Mia as she joins her and Reese.

9:20 Candace is still sitting on the carpet but Reese and Mia are engaged with each other and playing with the blocks. Candace talks to Terry and Julia.

Elena stays and plays with the blocks where Candace left her on the carpet.

Julian brings some blocks to Candace who says, 'Thank you. That's a green block. Is it stuck?' Candace helps Julian with the stuck blocks, and then he sits in front of Candace to play. Candace says 'oh, did you make a tower? Look at that' to Missy who continues to stay near her at the toy shelf. Julian stands up holding onto Candace's legs.

[There are several more pages of transcribed notes that are like these examples, with Candace sitting or kneeling on the carpet playing and engaged with the children.

Candace stands up to continue her other (administrative) work at 9:32, exactly 15 minutes on the carpet- a long session for her.] (2/2/04).

Susan brings Nancy in from the infant room for a time of transitioning. After a minute

of holding her, Candace takes Nancy and Susan leaves. Nancy starts crying but does not continue, as Candace walks around the room holding her. Nancy lays her head

briefly on Candace's chest two or three times. No smiles from Nancy, but no tears either (2/18/04 p.m.).

Ariel, Caitlyn, Kelly, Reese, Joseph are all on the carpet in the corner by the music shelf and closet door for a minute of play. Then Candace goes over and sits with them. Elena and Adam follow her there, as does Brett who immediately claims her lap. Candace and Brett engage in kissing play for half a minute. After another minute, all of the children except Adam and Brett leave Candace's side. Then Elena comes back, and Missy joins them playing nearby. Sam also goes over by Candace. Elena sits on Candace's lap and Missy moves to sit next to her. Caitlyn returns for a few seconds. All leave again except Adam and Joseph, with Elena still on Candace's lap. Reese comes back to Candace, then Candace gets up and Julian walks over to watch her feed the fish. Adam, Sam, Elena, Missy, and Julian are all playing near the music shelf. 9:39 Mia goes to Candace with her arms up as Candace stands there, but Candace does not pick her up.

[This is nearly a seven-minute session with Candace involving all 12 children present this morning. This is unusual, as she rarely has any interaction with many of these toddlers. Morgan was unavailable during this time as she was changing diapers, but Julia and Carol were on the carpet in the main part of the room.]

(2/19/04).

Julia was interviewed on 2/17/04. She has been at this daycare for four years, most of the time in the toddler room. When asked if she has a close relationship with any of the toddlers, she said, "Yes, I think so. Probably a couple...Max, Caitlyn, Reese. I was

in the nursery with Kelly, Reese, Max, and Ariel.” Her relationship with the other children is “probably about the same [less close, but equal among those not named above]. They’re not the ones who come up and love on you. Sometimes out of the blue some of them do.”

I mentioned to Julia that Kelly and Ariel, as transitioning infants, seemed to go to her more than any other caregiver in the toddler room. I thought this was interesting to note that Julia may not feel close to them in return as they are not on her list above. Julia stated, “Kelly and Ariel took to me because I was around them the most.” A parent interview on 2/24/04 with Kelly’s mother revealed that she believes her daughter has the closest relationship with Julia. “Julia is probably her favorite, but Julia was in the nursery with her before also. [There is] no one else in the toddler room. [There was an] infant teacher in the nursery.”

Kelly and Ariel both cried their first two weeks in the toddler room during transition when Julia left the room. Ariel also cried when other children were on Julia’s lap (interpreted as a sign of jealousy). Even though Kelly went often to Julia when unhappy, she was not comforted most of those times, yet kept going to her instead of to other staff. Ariel went to Julia the most for comfort and received the most attention from Julia when distressed. However Ariel was not often consoled.

Julia seemed to me to have the least amount of warmth of the three major toddler teachers, though she was still affectionate at times. Plus, she was more likely than the others to be involved in disciplinary actions with the children (sitting with them when they had been hitting, biting, etc.). She did not appear to have any kind of relationship with Elena, Sam, Adam, Joseph, Vanessa, or Stephen, and only once did Missy approach

her (and this behavior for Missy was strictly reserved for Candace and Terry). Julian and Wes had minimal contact, with Max, Brett, and Mia in the mid-range relating to Julia. Of non-transitioning children, Reese and Caitlyn had the closest relationships to Julia with high incidences of interacting, confirming Julia's own assessment of her relationships with these children.

This first section of interactions with Julia was during the transition period for Ariel and Kelly. This demonstrates the gradual progression both children showed in their adjustment in the toddler classroom, as well as a decrease in crying, clinging, and proximity seeking of Julia. There is more independent play with satisfied smiles, though they still checked in with Julia occasionally using her as their secure base from which to explore and play. However, neither girl establishes an attachment relationship with Julia (nor anyone else in the classroom). More observational time would be necessary to determine if they form close relationships and with whom in this classroom.

Week 1: 10:12 Julia is standing holding Kelly. When she puts her down, Kelly starts fussing and following Julia around the room. It only lasts a minute as she starts dancing to the music tape that is playing. A few minutes later she is back at Julia's legs fussing to be picked up. Julia does not pick her up, but walks to the music shelf to put another CD in, with Kelly following her (1/6/04).

Kelly sits down next to Julia, crying hard. She stops for a minute, and then starts up again. Julia is sitting on the floor with Ariel on her lap. Kelly is right beside them. [Does she not like sharing Julia?] Ariel crawls off Julia's lap. Kelly walks over to the

toy shelf where Julia is sitting leaning against it. Ariel is getting interested in the toys. Neither girl is crying right now. Ariel crawls back to Julia, pulls herself up on Julia to stand near her. Kelly goes back to Julia and starts crying [jealous of Ariel?] Reese goes over and sits on Julia's lap. Kelly walks away from Julia still crying. Kelly is staying near Candace, moving when she moves. Kelly is not crying nor raising her arms to be picked up. Then she goes back near Julia crying again. Ariel is calm for the moment, but staying close to Julia. Reese is on Julia's lap now. Terry who is five or six feet away is clapping her hands to the music at Ariel. Ariel is watching and smiling, but does not leave Julia's side. As Julia gets up to get a tissue for Kelly, Ariel starts to fuss but then stops. She keeps her eyes on Julia. Julia moves over to the table to help with lunch preparations. Ariel crawls to her fussing. Kelly and Ariel both are crying hard now while Julia fixes the children's lunch plates (1/7/04).

9:10 Ariel crawls away from Kristen towards Julia who is halfway across the room. Julia walks by her on her way out the door. Ariel watches her leave and starts crying as she sits in the middle of the room. Julia comes back, and Ariel follows her movements with her eyes. She is still crying but does not move.

9:14 Julia brings a toy over to Ariel trying to engage her in play. She does not stop crying, and shows no interest in the toy. 9:17 Julia comes over to Ariel and wipes her eyes with a tissue then picks her up, telling her 'all done' (crying). Ariel does not stop so Julia sets her down again, telling Ariel she will do this. Ariel cries a little harder and kicks her legs as Julia sets her down, but does not move from where Julia

sets her.

Kelly is back at Julia's side, then sits on her lap with a Lego piece. Julia sets her on her feet as Julia stands up and Kelly begins to cry. Kelly then walks to Terry, sits on her lap and stops crying. Caitlyn sits on Julia's lap, leans against her chest and smiles. Julia kisses her on the top of her head.

9:53 Ariel is accidentally sat on by Reese (she was right in the middle of a group of toddlers in and near the garden center). She fusses a little then crawls over to Julia who is sitting on the floor by the wall. Ariel just lies across her legs. She is okay. Kelly goes over to Julia still sitting on the floor and crawls onto her lap. Ariel notices this, fusses a little and goes over to Julia, too. She stands next to her holding on to her jacket, but she is not crying. Then Ariel crawls onto Julia as Kelly moves off. Ariel looks at me and gives me big smile (1/8/04).

Week 2: 9:29 Ariel stops crying, as she sits by herself looking at the children and the staff's activities. Julia is sitting on the floor. Kelly finds her and sits on her lap.

Julia gets up, gently pushes Kelly off her lap and tells her to go play. Kelly makes a face as if to cry, but does not, following Julia from a distance as she walks across the room. Then Kelly stands by her when Julia sits down in the middle of the room to write for half a minute. Julia gets up again with Kelly watching.

Ariel is on her knees facing the other side of the room. Julia says hi to her as she walks by. Ariel looks up at Julia, but she does not cry or go to her when Julia sits down again. Ariel is playing with the foam blocks.

9:40 Kelly brings a pop-up toy to Julia's lap. Then Julia gets up and leaves the room. Kelly makes a face as if to cry but does not. Ariel does (1/12/04).

9:32 Julia gets up to help pick up the toys, setting Ariel on the floor as she does. Ariel is crying hard.

9:34 Morgan goes to Ariel, sits down and sets Ariel on her lap. Ariel does not stop crying. Morgan pats her back as Ariel tries to get off Morgan's lap. A minute later, Julia comes and picks Ariel up from Morgan's lap. Ariel cries five seconds more. Julia walks to where the newest toys are (shape boxes) in the middle of the carpet. Ariel starts to cry as Julia moves to sit down [because Ariel thinks Julia is going to leave her?]. Julia says, 'Want to play? I'm not going to stand with you.' Ariel stops crying when Julia sits down with Ariel on her lap by the toys. Julia tries to engage Ariel with a box, but Mia and Elena come play with it and Julia instead (1/15/04).

Week 3: Kelly looks up from her play on the carpet and watches Julia coming to guide children off the tile floor and back onto the carpet.

Kelly goes to Julia who is sitting by the wall and plays at her side for 10 seconds. She walks off to play, then comes back near Julia and stands watching her talk to Terry.

Later, Kelly walks to Julia and bumps her head on the wall where Julia is sitting leaning against it [she does not appear to be hurt]. Julia blows air at her bangs.

Kelly looks at me and smiles. Julia talks to Kelly for a while as Ariel joins them. Kelly chases a dropped and rolling shape, passes by me, and then goes back near

Julia for two seconds.

10:24 Julia picks up Ariel and stands her at the table. She shows her a box and tells her what to do for this tactile activity. Ariel puts her hand in that box as Julia brings other boxes to her. Ariel is cooperating with a small smile on her face. At one point she looks up at Julia who is standing over and behind her, and smiles.

10:26 After they are finished with the boxes and their contents, Julia sets her down with a shape box on the floor. Ariel fusses at first, but then plays happily by herself.

10:28 Ariel is still playing with the shapes, but also looks up briefly at all the teachers as they are involved with other children's activities (1/21/04).

Week 4: Tamara walks over and picks up Ariel who is near the door. She holds and talks to her for about 10 seconds, then sets her standing up on the carpet. Ariel turns and walks to Julia who is sitting about three feet away, both are smiling. Julia: 'you're doing so good, Ariel, so good' [walking], then Julia sets Ariel in her lap (1/28/04).

Elena gets up off Julia's lap. Ariel is right there, and sits on her lap. Julia engages in play with her there. Several minutes later, Ariel crawls off Julia's legs and continues playing with a toy phone near Julia's feet. Brett crawls onto Julia's lap. Just as they become engaged in play, Ariel starts to fuss and climb back on Julia's legs. Then as Brett gets off Julia's lap, Ariel gets on. However, Julia needs to get up in order to wipe Ariel's nose. Ariel is walking and smiling as she follows Julia (1/29/04).

Week 5: Ariel, smiling, walks to Julia from the area under the loft. Julia is also

smiling sitting with her arms open to Ariel. They hug briefly with Ariel standing. Then Julia gets up to take something from Maggie at the half door. Ariel is okay with this and walks off.

Kelly is next to Julia's shoulder with a toy. Julia smiles at Kelly and says hi, but Kelly does not stay.

Kelly goes to Julia again and purposefully falls onto her. Julia kisses Kelly, and they talk together as Kelly sits on Julia's lap facing in and partially sideways. They play with each other's hands for 10 seconds.

9:49 Kelly is at the play sink now. Julia turns from where she is sitting to talk to Kelly for a second. Kelly walks off, and then comes back to the sink a second time. This time there is no interaction.

9:55 Kelly wanders back to Julia from the stairs, hands Julia a stuffed animal, then continues on to play at the sink. There is no interaction with Julia who is talking to Terry (2/5/04).

“Ariel bumps her head and cries for a few seconds. Julia does not respond, and Ariel seems okay in a short time” (2/5/04).

Both Kelly and Ariel seemed to adjust fairly quickly to their new childcare setting. It probably helped them to have a familiar face present in the person of Julia (as a previous infant caregiver). Kelly, more than Ariel, displayed affection and preference for other toddler caregivers which is why she most likely would still be categorized as having multiple close relationships. Ariel, on the other hand, may have shown to be more independent as time progressed and she acclimated even more to the toddler room, rather

than having an exclusive relationship with Julia.

The following are a few examples of other children's relational exchanges with Julia (with another reference to Ariel).

Julia is standing near the tile floor and talking to Sam's dad. Reese goes to Julia with his arms raised. Julia: 'you want me to pick you up?' Reese puts his hands out to his side as if to say 'I don't know'. She does not pick him up. As Julia finishes her conversation with Sam's dad, she walks around the room with Reese following and fussing off and on. 4:25 Julia sits down by the toy shelf and Reese sits on her lap (1/22/04).

Caitlyn comes and sits in Julia's lap, but only stays five seconds. Mia comes over to Julia's side. Caitlyn goes to get a ball, comes back and starts to holler at Mia who has sat down in Julia's lap. Julia told Caitlyn no [not to bother Mia].

Caitlyn is back on Julia's lap, with Julian playing near by. Caitlyn gets up off Julia's lap. She walks away to pick up a ball again. Then goes back to Julia at the same time Mia comes and sits down on Julia's lap. Caitlyn sits down anyway, nearly on top of Mia. A minute later when Mia gets up on her own, Julia moves Caitlyn to the floor where she cries in protest for five seconds (1/27/04).

9:24 Ariel walks over to Julia, where she sits in the middle of the carpet, turns and sits on her lap facing out. Julia adjusts her body and jiggles her. Both are smiling. Reese comes and sits on Julia's legs in front of Ariel for a half minute. Ariel and Reese are hugging each other, with Julia talking encouragement to both children.

Ariel and Reese go off to play with toys.

9:26 Ariel moves a large toy close to Julia. There is no interaction as Julia talks to Candace. Ariel continues to move past Julia pushing that toy.

Julia tells Reese who is in the garden center to put his feet down, but he does not.

Julia gets up from the middle of the carpet, walks over and helps Reese to come out of the garden center. As he does this, Reese falls over Ariel who starts to cry. Julia gets a tissue and wipes Ariel's nose but does not pick her up. Ariel continues to cry a few seconds more, then stops and crawls under the loft to play. Reese goes back in the garden center, and Julia sits back down in the middle of the carpet. Brett walks to Julia where she is sitting and falls into her. Julia takes him and sets him on her lap facing out.

9:52 Julia is talking to Terry as Brett just sits on Julia's lap. Then Brett turns to look at Julia for a second. There is no exchange, but Brett smiles. Two minutes later Brett gets up and wanders off.

9:56 Caitlyn arrives with her mom. As Julia talks to her she holds out her arms to Caitlyn calling her name. Caitlyn goes to Julia smiling. Julia kisses her and says 'hi sweetie.' Ariel is on Julia's lap, too. Julia holds Caitlyn to one side of her lap with her arm around her.

Ariel leans back into Caitlyn. Julia tickles Caitlyn's legs while holding her. Ariel loves on Caitlyn a few seconds more then she gets up and walks off. Caitlyn's mom kisses her good bye as she sits on Julia's lap.

9:59 Brett walks over to Julia and Caitlyn. He touches Caitlyn's nose and cheeks.

Julia touches Brett's tummy. Then Terry crawls to Julia and Caitlyn, kisses Caitlyn

and talks to her a few seconds. Brett is still there standing by Julia and touching Caitlyn. Julia says to Brett, 'Give her a hug'. Brett leans over and kisses Caitlyn. 10:02 Julia stands Caitlyn on her feet tickling and jiggling her a little. Brett is still standing next to Julia. Julia talks to both of them (2/5/04).

Reese leans on Julia's shoulder talking to her. Max is at Julia's other shoulder playing with toys on the shelf that Julia is leaning against where she sits on the carpet.

Julia says 'hi baby' to Reese and kisses him. Reese goes and plays with the toys on the shelf opposite Max.

9:08 Only Joseph is near Julia sitting on her lap. Then Max returns to engage Julia in play and conversation. Ariel comes up and hugs Joseph who is still on Julia's lap. Julia comments to Ariel about her loving action. Reese comes back to Julia and lays his head on her shoulder. Julia and Reese have a brief loving interaction. Julia to Reese: 'oh, you're so sweet.' Max is near Julia's shoulder playing with toys on the shelf (2/7/04).

Julia was often sitting on the floor, and had many affectionate exchanges with several children but most often with Reese, Caitlyn, Kelly, and Ariel.

Terry was the first toddler teacher to be interviewed on 1/21/04. She has been a caregiver in this daycare classroom several years, with some time spent in the infant room also. Terry appeared at first glance to have an exceptionally close (and exclusive) relationship with Mia. However, later analysis showed that Mia is affectionate with most of her secondary caregivers. Both Terry and Mia's mother (interviewed on 2/25/04)

believe that Mia has the closest relationship with Terry.

Terry also commented during her interview about having a close relationship with Caitlyn, Julian, and Brett as well. “I see Mia outside of work, to baby-sit and [I am] friends with the family. And Julian, for the same reason [baby-sit outside of work]. If he’s fussy, I’m the one he wants to come to. Brett is real clingy to me sometimes. He will only go to me when his mom comes and leaves [him]. Anyone else takes him, he screams and cries.” Brett’s mother confirmed this during her interview on 2/17/04, but also included Candace in her son’s close relationships. When asked if Terry had anyone else she felt close to, she replied: “Caitlyn, definitely Caitlyn”. Terry said she spent a lot of time with her in the nursery when she was there. Caitlyn started in the infant room when she was about 6 weeks old, and Terry also knows her older brother at this daycare. Although Terry claims a close relationship with Caitlyn, this is questionable due to their extremely low amount of interactions compared to Terry’s with Mia, Julian, Wes, Missy, Elena, Kelly, Max, and Brett, as well as Caitlyn’s close relationship with Julia.

Terry could probably be characterized as the most affectionate with all the children, and unlike any other caregiver she has significantly more children (half the class) with which she has consistent, frequent and positive interactions. Terry is also distinguished from the other caregivers for being about equally divided between sitting down and moving about in the room, with a major difference from the others in remaining actively engaged with children while she is standing (unless changing diapers). I think Terry was the most animated and interactive with the children, at least more consistently than any other staff. It is part of her personality. She ‘moves’ with and without children, whether sitting down or standing up, with the children following her as

she danced or skipped around the room.

Terry seemed different today- more friendly and animated with the children. Did she not feel well last week? Or is it because Candace is not here? Am curious as to why newer kids seem to be closest to Julia. She is the least warm of the four regulars [at this writing it was Candace, Julia, Terry, and Kristen] (from the researcher's journal 1/12/04).

It is interesting to note that Terry did not include Missy in her acknowledgment of close relationships with the children. I actually did not see this connection either until several weeks into my observations. This is the child that appears attached to Candace, but also demonstrated a clear preference for Terry (and never or rarely interacting with all other staff). Missy's mother confirmed this on 2/24/04 when she said that her daughter has the closest relationship with Candace, and if she is not there then Missy goes to Terry. Close observations again revealed that this was not the case either. Missy often went to Terry for hugs and play, even with Candace in the room. However, it is significant to the availability factor that at these times Candace was usually not sitting down or actively engaged with children. Though Missy would appear to have an equally close connection to Candace and Terry, she did not typically display the attachment behavior of distress at Terry's absence. Also, though Missy was observed going to Terry for comfort several times, only once was Missy actually comforted and stopped crying.

Also significant is the fact that there weren't any children that did not ever interact with Terry, as is the case with other staff, even if those times are minimal for the other half of the children: Reese, Vanessa, Ariel, Joseph, Stephen, Sam, and Adam. Several times Terry did approach Ariel to try and comfort her, but was unsuccessful half

of the time. Terry herself felt she was least connected to Ariel. "...because she is transitioning. Ariel does not want to go to me. Same with Elena when she first came to the toddler room. So independent, didn't want to be cuddled. Now, she is a different child- likes to be cuddled, wants attention. [It is] okay with Ariel now to sit by her and ruffle her hair" (from interview 1/21/04). Almost all other incidents with children in distress Terry was able to comfort them, regardless if they sought her out or she went to them. The following observations demonstrate Terry's relationships with many of the toddlers.

Kristen gets up to change Brett's diaper, and when she does, Sam walks away and starts crying. Terry picks him up immediately and he stops crying. She walks around the room talking to him and showing him pictures on the door of the other children's families, and then sets him down. When Terry walks away a few feet to the table, Sam starts crying again and follows her. There is no interaction between Sam and Terry this time, nevertheless Sam stops crying on his own (1/6/04).

10:11 Terry is sitting down when Max goes and sits on her lap, as does Kelly. Terry: 'are we going to do art?' Max shakes his head affirmatively and says yes. Terry: 'are we going to make pretty pictures?' Max repeats the affirmative gesture and word. Julia then tells the children to find their picture (taped to the back of the seats and chairs around the two tables) in order to do an art project. Max goes to the tall table with attached infant seats in it first. Terry says, 'No, Max, you go to the big table' (which is the round, lower one with individual child-size chairs) (1/13/04).

10:07 Mia walks over to Terry and lets her put a costume [Terry's choice?] on her while Mia sits on Terry's lap. It is a black mouse costume with a tail and a separate hat with pink ears. Terry put the hat on her also, but that lasted five seconds. Mia wants to take the costume off right away, too. Terry helps her again while Mia sits on her lap. Then she stays and bounces on Terry's knee for a few seconds. As Mia runs off, she trips and falls but is not hurt. She gets up and picks up a scarf to drape over herself.

Mia goes back to Terry who is trying to put the mouse hat on Ariel. Mia stays to watch Terry dress Julian. Then Mia spends a few seconds putting a clip-on tie on the front of Terry's shirt. When Terry gets up to get a tissue, Mia just stands there and watches her at first then goes to the toy sink and tries to sit on the open door. Terry comes back to sit on the carpet and calls to her: 'want this on?' Mia goes to Terry and lets Terry put another dress-up shirt on her. Mia walks over to Julia to show her (1/14/04).

Vanessa sits on the floor where staff has set her after bringing her from the infant room. She looks at Terry who says hello to her. Vanessa waves a tiny hand at Ariel and Kelly playing near by [does she remember them from their time together in the infant room?]. Terry moves over by Vanessa, talks to her and touches her hair.

Vanessa looks at Terry for a bit then crawls into Terry's lap. Terry gives her hugs and kisses for about 10 seconds. Then Terry needs to go back to the tunnel to supervise the children playing there. Vanessa does not fuss when Terry sets her down.

Terry gets up from the floor holding Kelly who has been sitting on Terry's lap. Terry hugs and kisses her as she sets her down.

Terry picks up Sam, takes him to look at the pictures taped on the wall above the play kitchen. She talks to him about the children in it for 15 seconds, then sets him down. Sam goes off to play again.

Afterward, Terry picks Missy up, gives her hugs and kisses as she walks to the mirror with her. They look in the mirror, talking about their images for a few seconds.

Missy is dancing near Terry who is dancing, too. Brett runs up to her and hugs her legs. Terry marches around the room with Brett following and laughing. Then Mia follows Terry. Terry squats down and Mia runs to her open arms, as does Brett (1/19/04).

Kelly is sitting on Terry's lap when she rolls back on the floor taking Kelly with her. Then she does it again. Elena comes and sits on Terry's legs where she sits on the floor half way between the toy shelf and the music shelf with her back to the window. Kelly, while on Terry's lap, leans way over to play with a pop-up toy on the floor (1/21/04).

Terry sits both Max and Kelly down for discipline for about five seconds, then Terry pulls Max onto her lap and tells him no hitting of friends. Terry asks Max to give her kisses. Max kisses Terry on the cheek, then stands on her lap looking out the side window at a truck. Terry stands up with Max, puts him on her shoulder and walks to

the tile floor to bring Missy and Elena back on the carpet. Afterward, Terry walks Max through the flags hanging from the ceiling. Next she flips Max over and off her shoulder setting him on the floor. Terry walks away with Max next to her. Then she picks Caitlyn up, talking to and kissing her, and walks Caitlyn through the flags, too. Missy is right there and wants a turn, also. Terry picks Missy up and does it for her. Caitlyn then comes back to Terry touching her legs [wants another turn?]. Terry does not respond to her.

Wes comes and sits on Terry's lap while Elena is sitting near Terry's leg looking at her boot. Max brings a stethoscope to Terry who puts it on him. Wes gets up and Kelly comes and sits in Terry's lap.

Terry is sitting on the carpet (the only staff that is) with Max, Kelly, Elena, and Mia on her somewhere. Missy and Caitlyn are nearby. This is over half the children present (and two of the others are in their seats at the table doing a craft) (1/27/04).

Terry was very affectionate today, kissing on all the kids she picked up or that came to her. Candace didn't feel well again, Julia was her usual self. And Candace and Julia did not spend very much of that hour on the floor with kids- busy doing other things (from the researcher's journal 1/27/04).

Missy is fussing and walking around the room. She does not go to Candace, but to Terry and looks up at her. No response from Terry as she sets Wes down and walks to the garden center to talk to the children playing there.

Wes and Missy are hanging onto Terry's legs where she is standing. Terry lifts Wes by his arms, kisses him, and sets him down. Terry ignores Missy as she follows Terry to the changing table and watches her wipe Wes's nose.

4:24 Terry sits down with Missy by her, then Wes and Mia also.

Wes lies across Terry's lap and Missy sits closer beside Terry. Terry puts her arm around Missy and gently rubs her head and hair.

4:35 Missy is crying in Kristen's arms as she sees Terry walking towards them holding out her arms to Missy. Missy leans and reaches for Terry. She stops crying as soon as Terry takes her. Terry sits on floor with Missy and puts lotion on her hands (1/28/04 p.m.).

Julian goes to Terry where she is sitting by the window. Terry kisses Julian, and then he sits beside her. Terry pretends to wash Julian's hair playing with an empty shampoo bottle. Mia joins them. She puts 'shampoo' on Terry's hair as Julian tries to comb Terry's hair.

9:31 Mia leaves Terry's side. Julian is playing on Terry's back while she talks to him. Then he stands by her side and Terry pulls Julian onto her lap and talks to him face-to-face. Terry rocks Julian in her arms for a few seconds, then sets him on the floor. Julian stands up, but after a few seconds sits again in Terry's lap.

Missy plays on Terry's back, then Terry talks to Missy trying to get her to repeat some words and count. Terry gives Missy her full attention for over a minute, as they are closely face-to-face. Vanessa is sitting on Terry's lap as well. Julian comes by Terry for a few seconds. Joseph goes to them also, stands and watches them count. Joseph tries to get in the activity and get Terry's attention [I see his actions, wiggling his fingers as if counting, too. Terry does not even glance at him for many seconds]. Finally Terry looks at Joseph and includes him in play: 'do you know how

to count?’ Joseph moves his fingers holding them up as Terry counts with him for about 10 seconds. Terry returns her attention to Missy who is still standing there, talking to Missy and asking her to repeat certain words. Missy stands close in front of Terry while they look at each other. Joseph remains close trying again to gain Terry’s attention. Joseph points to his shoe when Terry asks Missy to say that word. Terry gives Joseph praise for saying the word shoe. [This is one, long, continuous interaction - over five minutes] (2/4/04).

With all the differences in personalities, degrees of warmth, education, responsibilities and styles of caregiving the only common thread I could see among these thousands of daily interactions was the physical availability of caregivers. It was not enough for them to be present in the room. Children seemed to know or learn fairly quickly that when their childcare teachers were not sitting down they typically were not available for play or attention. Terry might be the exception with a few children, as they approached her when she was standing also. Then again, these were times when she was not busy with room chores such as changing diapers or cleaning the table. The majority of observed and recorded interactions between children and the toddler caregivers occurred when that caregiver was sitting down on the floor. This was the children’s signal to sit on their lap, play with them, talk to them, bring toys to their lap or side, give and receive hugs and kisses. The children’s own efforts to have staff sit down reveal this significance.

Max goes to Kristen who is standing, wanting to be picked up. Kristen says no. Max gestures and pulls on Kristen until she finally sits down. As she does, she tells him that she will not hold him. He plops down on her legs/lap anyway, smiling (1/6/04).

Terry has stood up for a minute; Julian nearby says: 'sit, T-T'. Terry responds with 'I like it when you say sit, T-T.' Terry sits down and Julian sits down between her legs with a toy. He stays there a minute, with Elena and Mia nearby. When Julian gets up, Mia comes and sits on Terry's lap. Terry hugs, kisses, and talks to her (1/21/04).

This theme of availability (sitting down) is continued as I relate my own experiences as a passive participant in their classroom.

My Role as Researcher:

Spending many hours in a childcare center classroom brought back many memories- good memories- of my three years as a group home family daycare director. The number of children and staff, the group dynamics, and of course, the actual events and activities themselves were similar. The major difference was my nearly inactive role in this classroom, compared to my intensely active role in the previous one. My comments included below (italicized) from the journal I kept during the eight weeks of observations reveal some of these evoked feelings.

Many children came to check me out: my writing, my notebook, and nametag, but not often. I think they became used to me being there and not playing with them, or pick them up. I did not assist them when they came to me, but would either direct them to a teacher, or call the staff's attention to his or her need.

I received spontaneous affection from Mia, Brett, Caitlyn, and Ariel after the first week or so, and a lot of attention from Stephen at the beginning, after which he moved to the two's room. No interaction ever with Adam, Missy, or Reese (until nearly my last day

there). Caitlyn, Sam, Mia, Julian, Elena, or Vanessa showed little interest in me, with mostly looks and shy peek-a-boo around the stairs from Kelly and Ariel. The following are excerpts from my research journal (italicized), as well as, several examples of children's attention given to me taken from my observation notes.

“Starting to meet and talk with a few parents, I like that. Toddler staff is not very talkative with me- just each other. Probably for best, still...I feel left out” (from the researcher's journal 1/6/04).

Having hard time ignoring these kids' overtures for interaction with me. They are so cute. One boy comes from a very dirty environment- but he is such a happy fellow, and seems very bright. Way too many kids are coming to me for attention and play. Breaks my heart that I cannot have a relationship with them. This is not easy, nor is it a true ethnographic situation (from the researcher's journal 1/7/04).

Several times today children wanted to play with me or wanted some 'loving'- I could not and did not. It is hard. It is hard not to engage them more, actually find myself discouraging them from playing with me or sitting on me. I still make eye contact and smile, though (from the researcher's journal 1/12/04).

Candace, Julia, Terry, Tamara are present. Max is calling 'mommy' loudly to Julia. Julia: 'I'm not mommy.' Then he says it to Candace. [Does he need help? Want someone to see what he is doing?] Max does it again, Julia keeps telling him to call her Julia, but he says mommy six or seven times. Finally Julia gets him to say her name right. Max is smiling. Then he points to me across the room where I am sitting against the wall. Max says 'mommy.' Julia says 'No, that's not mommy. Who is

that? Is that Karen?' Max gives a big smile and says yes, then he tries to say my name (1/13/04 p.m.).

Am remembering my daycare days with staff, and parents, and of course, the kids. Mostly, I am thinking about my staff and our relationships- the good and the not so good. I miss the talking and camaraderie with Jenny and Megan and others. We did the same things this group does- talk about our personal lives with each other, discuss the children and their home-life, and parents' decisions, etc., and complain about the same stuff- policies, weather, illness, late pick-ups, sick kids brought to daycare...

I wish I could become a part of this kind of group again. I feel left out. I wonder how they feel with me there and watching everything they do. I think they (at least Julia, Candace, and Terry) are used to me, and may forget I am there. They don't seem to hold back in the things they say or do...but they also may have observed I do not write when they are talking amongst themselves (from the researcher's journal 1/14/04).

"Feels like most of children are used to me being there and not playing with them, very few come up to me or even look at me" (from the researcher's journal 1/19/04).

One child greeted me this morning when I entered the classroom, the rest pretty much ignored me- which is the way I want it for my research, but I don't like it anyway- the way it makes me feel. Seems like the children do this to others too- if they know them and they realize they are not there to play or take care of them, like when Cammie or other staff come in the room on business for a few minutes (from the researcher's journal 1/27/04).

Kristen is back this afternoon, seemed strange to see her again. She did her usual glancing at me to see if I am watching her with whomever, but not as much, thankfully. Rest of staff really doesn't pay any attention to me, even though I know they are aware of my presence (from the researcher's journal 1/28/04).

“Ariel walks to me where I am sitting on the stairs. She is smiling. Ariel comes close to my legs then lays her head on my lap -so sweet. She stays five seconds, then walks off” (1/28/04 p.m.).

Caitlyn walks over to Tamara and Sam sitting by the window. Caitlyn's mom is here and waiting to go home. Caitlyn is making the rounds of the room saying good-bye to all the teachers. Then she actually comes to me sitting on the stairs and gives me a hug and kiss! After me, she goes to Julia to give her one. I do not see if Caitlyn hugs Tamara or not.

10:23 Vanessa crawls to me on stairs where I have moved back right after Vanessa arrives. She is looking, talking to, and smiling at me for almost a minute. 10:26 Vanessa crawls further out on the carpet, kneels and chews on a toy. Vanessa is looking at me a lot, but then I am watching her. I try to avoid eye contact while still observing her (2/3/04).

“Am anxious to be done only because I can really start looking at data more closely and analyzing...am going to miss the children and the regular staff. I don't think they will miss me” (from the researcher's journal 2/17/04).

My usual place for observing and taking notes, after the first experimental week, was sitting on the second step from the floor on the stairs leading to the children's loft.

The loft was used infrequently (around four or five times the eight weeks I am there). I was not in the way there, and I had a good view of the entire room, though I had to lean way over (or stand up) to see activity on either side of the staircase, which was a small, limited area anyway. When I realized the difference in children's approaches of staff depending on their position in the room, and to some extent their activities, I wanted to see what would happen if I stepped out of my usual passive mode and sat on the floor, too. I was far enough into my observational time there (week six) that I did not feel I would interrupt or change any relationships between the children and their secondary caregivers. The following relates what transpired when I sat on the floor in the toddler room.

I am sitting by the wall where Julian comes to me to show me a toy. Elena then comes over with two pieces of train track. I help her put the two together, then she plays on the floor near me a few seconds (2/9/04).

"After the field trip this morning, I try an experiment by sitting on the floor by the wall without my pen and notebook for about 20 minutes: No child except Brett (briefly) paid any attention to me!" (2/18/04 p.m.).

[The day after the field trip]. I have to get four children off the stairs before I can sit down again. Elena wanted to sit by me but I would not let her. Joseph and Kelly are right by me also when I'm trying to write. [Am very popular today!?!]

Kelly and Joseph are by me again.

Julia and Candace are sitting on the carpet now. Terry is not here this morning.

Caitlyn comes over and visits with me, talking and looking at my nametag. Then she turns and sits on the bottom step between my legs and stays several minutes,

even after Candace and I encourage her to go play.

Mia, Kelly, and Adam come over to see me briefly, too. [This is so curious, as yesterday when I sat on the floor I did not have children all over me, and now it is like they have rediscovered me, or maybe this is a result of the excursion yesterday when I came out of my researcher mode to actually help and engage with the children?]

Brett comes over with hugs for me. Elena runs to me with a scrunchy to fix her hair but I do not, and tell to her to ask someone else. Joseph comes up to me pointing to my notebook and saying, 'paper' and 'blue' (the color of my notebook cover).

Morgan is changing diapers, and Candace, Carol, and Julia are on the carpet while the above is going on (2/19/04).

[Monday after the field trip]: I arrive at 8:45 and sit on the floor by the wall.

Candace, Valerie, Terry are sitting on the floor and Julia on the stairs when I arrive.

Terry gets up to get Kelly down from the table. Elena is on Candace's lap, with Adam and Missy nearby. Julian is on Valerie's lap. Ariel and Caitlyn are by Julia.

Brett comes to me smiling and gives me a hug, then turns and sits on my lap, staying for a minute. Adam comes within two feet of me, but just stands and looks. He does not smile. I talk to him, but he does not respond.

Elena comes near me, and then sits down in front of me. She leaves after Brett hits her. Then Brett gets up and leaves and Elena comes back and sits on my lap for a minute.

Kelly comes to my side for 10 seconds. Max comes to me to show me a toy and

talks for 10 seconds. Then all the children leave my side briefly.

Elena and Brett run back to me at the same time and sit on my lap. I am worried about the pen jabbing someone and am missing other action so I stand up after a half minute and set the two of them off my lap. Then I sit back down on the stairs.

About a half hour later I sit back on the floor but over by the windows this time.

Julia is sitting on the floor against the wall. Valerie sits leaning against the toy shelf.

Candace is at the table preparing a craft as she has been for most of the last hour.

Missy comes and looks out the window standing fairly close to me. She just looks at me and walks away. Caitlyn comes and sits on my lap. Reese comes by my side for two seconds. Elena comes and talks to me.

Joseph is playing with toys on the laundry bin top when he accidentally knocks it over. I speak to him about it (all done) and he walks away. Caitlyn leaves my lap after a minute. Ariel walks to me, smiling, from across the room. She falls into my arms. I give her a hug then help her turn around to sit on my lap. I guess she does not want to do that as she wiggles off right away, sitting down by my legs for a few seconds before she gets up and walks away.

10:30 Elena comes and sits by me for a minute playing. Julian comes by me and plays with his toys. I engage in his play briefly. Missy walks to the window again.

This time I talk to her and lightly tickle her side. She just looks at me, and then walks away a few feet, lies down on the carpet and hides her face. [Playing?

Avoiding me?] (2/23/04).

The field trip [2/18/04] was fun- for me anyway. I took few notes, no one got hurt, a couple of children cried at the strangeness (?) but nothing notable as they did not

go to anyone. I got more involved with the children- sat on the platform and helped children get off from the slide (at the bottom) or off that platform and onto the one for the ball pit. Felt good to be holding, playing with, and helping little ones (from the researcher's journal 2/23/04).

Ariel plays peek with me around the stairs where I am sitting.

3:45 Terry sits on the floor with several children playing around her. Ariel brings me her shoe- just plops it down on top of my notebook, then sits down so I can put it on her.

3:55 Caitlyn comes over to talk to me. Reese comes to me and tries to engage me with his toys. Then Ariel does the same thing several times. Ariel keeps coming up to me all smiles. [At this time I leave the room for several minutes to interview a parent].

4:20 I return to the classroom and sit on the floor near the wall, as the loft is open for children to use. Ariel comes up and gives me a hug. Max wants me to watch him throw the big blue beach ball repeatedly, which I do.

4:28 Ariel brings me a toy house and sits down to play with it and me but only for 10 seconds.

4:37 Mia runs to me and squeezes behind my back (against the wall), then playfully pushes me over several times. Max, Mia, Julian, Elena, Ariel are all around me at the same time.

4:45 Some of the children look at and touch my nametag and my paper. Reese and Kelly join us, too. Eight children are now around me- Caitlyn is the only one in the

room who is not. I get up and sit back on the stairs- my usual place.

Elena comes to me and sits on the bottom step between my legs. She stays half a minute and I tie her shoes while she is here.

4:48 Reese comes to me smiling [finally- he has been looking at me, but keeping his distance], loving on me and talking, pointing and touching my paper and nametag. [This is the one and only time he ever comes to me throughout my time here; and what a time!] Ariel plays peek with me around the stairs again.

5:00 children start leaving (2/24/04 p.m.).

“After my arrival in the toddler room, Mia comes to me while I am still standing and talks about the buttons on my shirt, and then the stickers on my name tag after I sit down” (2/25/04).

Candace shared with me [during her interview] that she did not like the idea of me being in the room at first- thought I would be intrusive, in the way, and make her and the staff feel uncomfortable. Then she said after the first week, she forgot I was there, and can't believe the eight weeks are over- it will feel strange without me there now. She also commented on how the children seemed to be okay with me from the very beginning, knowing how some of them do not like strangers, and that my presence did not occupy the children's attention too much. I told her I had to work very hard at maintaining my distance, and only allow eye contact and smiling- though I confessed to easing up on those constraints this last week (since the field trip). She commented on that too. I still think that is the 'cue' for the children to approach me more after that, as well as sitting on the floor more (from the researcher's journal 2/26/04).

I am going to miss being there, miss the kids, and miss these three teachers. It is going to feel very strange. Today I went in for a little over an hour, later in the afternoon than usual. They had a surprise for me, which Cammie forewarned when I came in the building before I reached the toddler classroom. The staff in the toddler's room got together and bought me a cake and had it decorated: 'Good Luck, Miss Karen. We will miss you.' Very sweet. I did not bring them a thank you gift (of books) until later (from the researcher's journal 2/26/04).

"Feels strange now this week, not to be going there...this has been a great experience"
(from the researcher's journal 3/1/04).

Chapter 5

Discussion

My study explored the nature of relationships between young children and their childcare teacher in this local center. Though I asked at the onset what place secondary attachments for infants and toddlers in full-time childcare have for their well-being, the question should be “What place do secondary relationships have for their well-being?” My study sheds light on the importance of these relationships that are not strictly in an attachment context.

Of all 17 children only one exhibited behaviors associated with secure attachment: proximity seeking, distress at caregiver’s absence, seeking to gain proximity when caregiver returns, returning to caregiver often during play to seek reassurance (safe base to explore). However, even she had an equally close relationship to a second caregiver, minus the attachment behaviors. One other child could possibly have been displaying signs of insecure-avoidant attachment with all his caregivers (primary and secondary). However, this may be an incorrect assumption, as he was new to the classroom and his behavior may have been his way of adjusting to a new care environment. He also may simply be disinterested in his caregivers, or independent with a less out-going personality.

What can we say about the other 15 children? They were unattached, based on attachment theory and its identifying behaviors, yet involved in warm relationships with at least one if not most of their many caregivers in the toddler room as summarized in the previous chapter.

The ebb and flow in this classroom’s dynamics was remarkable to witness, with

children coming and going and no child staying much more than a year. In just eight weeks alone there were 12 changes in children's enrollment, not to mention staff's schedules and turnover. I was pleased with the longevity and stability of the three major toddler caregivers, as Julia never missed a single day I was there and she was there nearly the whole day. Candace only missed one day due to illness, though I believe she was absent part of Fridays for a class. Terry had classes also. Even so she was there the majority of the time during the week. The other staff was mainly part-time which meant they were inconsistent in their classroom presence. What is germane to this study was that it did not seem to matter to most (all?) of these children who was present as their caregiver, as long as someone was available.

The rhythm of the classroom's daily schedule and routine with the shift in players seemed a natural part of this culture. Everyone soon forgot even the trauma of Ariel and Kelly's first few weeks. Missy's summer-long transition, I think, was an extreme exception, and even she was a content toddler by the time of this study. Adam, Wes, Joseph, and even Sam (though a bit more unsettling for him) all adjusted fairly quickly if not immediately to their new childcare setting.

Did I find support for providing infants with the same secondary caregiver for several years, a process called looping? Not really. Raikes (1993) and Barnas and Cummings (1994) found evidence supporting a better and/or stronger relationship for long-term infant-teacher pairs. I did not. Most of the children in my study engaged strangers and infrequent caregivers nearly as often as they did their more permanent toddler teachers. The infants transitioning into the toddler room during my study adjusted within a relatively short period of time to their new toddler teachers, even with the

obvious difference from their infant caregivers in philosophy or method for comforting them when distressed. Childcare providers have seen this phenomenon again and again. When parents prolong the inevitable temporary, daily separation from their young child it does not make it easier. If there are tears, they are usually short-lived.

A center's policy of moving infants to the next classroom (typically at age one and/or at the developmental milestone of walking) may not necessarily have deleterious consequences for young children. It seemed so strange and upsetting to me at first that most staff, and even the other children, ignored crying babies the majority of the time, with attention usually reserved for cries of pain. The differences in the toddler teacher's attitudes from that of the infant teacher's (not holding crying babies) did not appear to harmfully affect Ariel or Kelly, as this quote attests: "*I can hardly believe the difference in Ariel. She really is happy in the toddler room now, walking more today and very proud of herself. She was very loving with me one time today, too*" (from the researcher's journal 1/28/04). Both girls were really okay after several days of transitioning, well adjusted and happily playing. Vanessa did not have any problem with the move to the toddler room, nor did Stephen moving into the two's room next door. He went willingly and eagerly and never looked back. Therefore, I did not find support for changing the division of classrooms by age (one year at the youngest ages), nor for assigning a sole caregiver to a specific child.

Did attachment play a significant role in these relationships? Based on my observations and interviews, I don't think so. Past researchers have shown a higher incidence of the insecure-avoidant category among children in daycare (Clarke-Stewart, 1989; Howes, Phillips, & Whitebook, 1992). The National Institute of Child Health and

Human Development Early Child Care Research (1998a) summary of their more recent study did not support this finding. A comparison of the children in my study with the global percentages of children in the three attachment categories does not support an increase in this category either. Only one of the 17 children in my study displayed possibly an insecure-avoidant attachment paradigm (5.8% compared to 21%). Only one child exhibited secure attachment behaviors (5.8% compared to 65%). I did not see any of the insecure-resistant behaviors that are represented in the remaining 14%.

As relayed previously, Faran, Burchinal, Hutaff, and Ramey (1984) did not find support for attachment categories in a childcare setting. They found differences in intensity of children's closeness to a caregiver and watching them, but believed they did not prefer any caregiver to another. Though I did see evidence of children preferring one caregiver, more children had close relationships with multiple caregivers. As the previous researchers discovered, it is also possible I would find changes in the children's preferred caregivers six months from now.

Did any child appear to suffer from the lack of a secure attachment to a secondary caregiver? Again, I doubt it. If anything, Missy was more distressed because of her attachment to Candace when Candace left the room, even momentarily. Except for the first few days of transitioning infants and one new toddler, these children did not cry, fuss, or wander aimlessly around the room searching for someone to hold them, unless they were physically hurt or upset over a toy dispute, and even these incidences were not that common. I did not find support for categorizing children in childcare within the attachment paradigm. What I saw for the most part were happy, busy one-year-olds with a wide choice of available adults to meet their physical and social-emotional needs: a lap

to sit on and arms to hug them- basic requirements for any caregiver.

Though attachment was not prevalent in this group of children, never the less, close, nurturing relationships were important for most of these children's feelings of contentment. American parents who want their children to be happy, well-adjusted, self-reliant, and independent can look to this toddler classroom as a prime example of guiding these children onto that path from day one. All of the children promptly learned that they were safe in this place. They were going to be taken care of in the absence of their primary caregivers- their parents. Food, rest, clean diapers and clothes, toys and activities were all regularly provided by affectionate and responsive adults, even if those adults changed within the day, the week, or the full year they were in this classroom.

I think some of the angst of U.S. society, particularly parents, over children in full-time childcare stems more from our Westernized and more recent (20th century) romanticized ideal of family life than any real or perceived danger to children in or diminished quality of 'other care'. The ideal defined as the tight, small nuclear family as the healthy, correct, and best rearing environment for young children, with mother as the primary (and sometimes only) caregiver (Wilson, 1986). That puts the childcare center classroom at the very opposite end of the child caregiving spectrum, with relative care, non-relative care in the child's home, and non-relative care out of the child's home somewhere in the middle.

This invites us to consider an extended family model, which is still prevalent in many non-Western societies, as well as right here in the U.S. within Black families (Hunter & Ensminger, 1992). It has not been that long ago that rural White and urban European immigrant families also had more than one generation under one roof and/or

several cross-generational families living together (Rivers & Scanzoni, 1997). This meant shared child-rearing duties and multiple caregivers within the same four walls.

Neighborhoods within cities and small-town communities replayed this same scenario in its streets. It was accepted and expected practice for all adults to watch over and take responsibility for the well-being and well-behaving of everyone else's children, and not just their own. These support networks or interdependent relationships have been called "social families" (Rivers & Scanzoni, 1997, p.334) by previous researchers, and are not necessarily blood kin.

I saw such similarities in this center classroom that I imaginatively assigned family titles to the various teachers as their activities or roles, and their presence in the room suggested: Candace as the provider 'dad', Julia as the disciplinarian mom, Terry would be the affectionate, sometimes fun or silly aunt, Cammie the visiting grandma, Tamara the older cousin or another aunt, and other teachers such as Morgan, Kristen, or Lori as the big sister. For most of these children, it was whoever was available, physically present and usually but not necessarily emotionally present, and typically sitting down on the floor. The children seemed to have an acute sense of awareness of who was available or not- busy doing business, daycare chores, and/or moving in and out of the room.

Usually the part-time caregivers (visiting aunts) sat on the floor, except when changing diapers. This was unlike the three major caregivers, who often had other chores and/or were not sitting, particularly for Candace, the lead teacher. Her responsibilities kept her on her feet three-quarters of her time in the classroom, with frequent trips outside of the room. As such, she did not appear to have a close relationship with any child. She and Missy have an unusual relationship, particularly since Candace did not

single her out for interaction or affection. Missy also was equally close to Terry, the third main caregiver for this classroom. The others did not choose to go to Candace for attention, play, or assistance most likely because she was not available most of the time.

The most influential factors did not appear to be personalities, level of warmth, or education (within reason) in availing these toddlers of close, warm, nurturing relationships. These caregivers were not cookie-cutter women. Their most similar characteristic would probably be their age of 20-something. They had different types and levels of education, some not even remotely connected to child development. They also had different personalities with different styles of relating to children, though all could and did, but even that varied slightly from day to day, moment to moment, and child to child.

Valerie seems a bit cool (reserved) to be working with kids, have not seen any warmth or loving interaction with kids at all. But Julia isn't the warmest person either, and a lot of kids go to her. Terry is harder to read, she is very warm and loving most times, other times she seems closed and mentally absent. Candace, I think- tries to be warm with kids- and she is most of the time, but she also is in charge and has a lot of other duties that takes her away from direct child interaction. She also hasn't felt well. I don't think there is one child that preferentially chooses her (from the researcher's journal 1/14/04).

The one theme I saw among these thousands of daily interactions was the physical availability of caregivers. More than just being present in the room, the majority of observed and recorded interactions between children and the toddler teachers occurred when that caregiver was sitting down on the floor. Julia and Terry sat down considerably

more times than Candace through out the day. Eleven of the children had notably more positive interactions with all caregivers when they were sitting down. Some of the comments from my research journal reflect this impression and my resultant reactions.

I have been thinking about earlier today when observing Cammie come into the room several times this morning on business, especially after yesterday's numerous interactions with kids. They were all over her yesterday, and practically ignored her today. What's the difference? I wonder if it is because she sat on the floor yesterday (accessible?) and did not today? Do children just know intuitively or by some cues I'm not aware of that this person is approachable, and that person is not, or the same person is emotionally available one time but not at another? Physical and emotional availability/presence is a part of relationships, but what are the specifics and dynamics? (from researcher's journal 1/22/04).

Am wondering if children choose an adult to go to based on availability not personality. Those staff that are sitting down are available to kids. This is most notable with Cammie and the difference between her brief, standing/walking visits to classroom and the day she was actually there caring for kids as staff (from researcher's journal 1/25/04).

I went back this afternoon, and tried an experiment of sitting on the floor to see if I got any interaction with the children; most ignored me. But the next morning it is like I am their long-lost friend. Many children kept coming up to me even though I am in my usual place on the stairs, and engaging me in play or talk. Then today I sat

on the floor for several minutes two different times, and lots of children came to me then. Staff all seemed out of sorts today. I did sit on the other side of the room- last week was against the wall, today against the window. Could this possible have made a difference? I doubt it. I think that my change in behavior towards them during the field trip last week was a signal to them that I was no longer hands-off or disinterested in them, even though it took another day for me to see any difference in their behavior (from researcher's journal 2/23/04).

The implications for childcare centers based on this availability factor seem to indicate a policy to intentionally promote caregivers sitting on the floor to allow accessibility to children most of their day, along with providing more comfortable floor seating (foam mats, cushions, large pillows, etc.).

When the center classroom is viewed utilizing an extended family model with multiple caregivers, the children's behaviors and relationships make more sense. Children who appeared to be indiscriminately friendly (with multiple relationships), unattached, disinterested, and/or independent were not atypical simply because they did not fit into the attachment paradigm. Attachment theory, accompanied by specific observable and assessable behaviors, was developed around children and their relationship to their mother or primary caregiver as seen within the nuclear family. Childcare centers do not emulate the nuclear family. They are modeled after our educational institutions, with rooms divided and children promoted to the next class based on age. A center classroom's relational dynamics are more characteristic of families and/or cultures structured around multiple caregivers.

Therefore, I would recommend for further study a more in-depth look at family

structure and caregiving dynamics in cultures with multiple caregivers such as Black Americans (as suggested by Jackson, 1993), and then conduct comparison studies with childcare center classrooms. I would also recommend more discretionary use of the Attachment model and its correlate assessment instruments for childcare studies when they relate to the evaluation of secondary relationships. Instead, I believe the development of a multiple caregiver model for childcare centers and similar settings would be more appropriate and useful for future research of young children and any secondary caregiver relationships. Though Pianta (1992) suggested that the differences between mother-child attachments and teacher-child relationships might be one of intensity (level and strength of observable attachment behaviors), evidence from my study point to entirely different types of relationships.

The possibility of designing an assessment tool specifically to study secondary attachments in their natural setting may be one outcome of my study. Rutter and O'Connor (1999) list four parameters that need addressing in a new attachment assessment instrument: developing codes for other relational qualities, such as indiscriminate friendliness (as seen here in Mia, Julian, and Brett); a measure based on a child's behavior in everyday contexts, instead of a laboratory as in the Strange Situation; a means to quantify attachment features, not just categorize them; and to find a way to differentiate attachment insecurity observed in one relationship from what may be a pervasive paradigm, indicative of social maladjustment (as in Adam's case).

The fluidity of this classroom's dynamics resulted in toddler-teacher relationships that were fickle and transitory, which is definitely not a characteristic of attachment. Yet these impermanent and flexible connections between children and their adult caregivers

appeared to be viable, sustaining, and fulfilling. One last quote from my journal written during data collection suggests a closer scrutiny of the group as a whole in a childcare center's classroom relationships and not just individual dyads: "*Have just been transcribing today's observation notes and had an image come to mind of gorillas or chimps in the wild- how they interact and their social behaviors. Something about this group is similar!*" (from researcher's journal 1/22/04).

My recent study has attempted to shed new light on secondary relationships by not relying strictly on the attachment lens. Results revealed relational and behavioral categories outside of attachment that included indiscriminately friendly, singular close relationships, multiple close relationships, and disinterested/unattached/independent. Further research could add support for these categories as well as define other relational behaviors within a childcare context. Therefore, I would encourage future studies of a qualitative and ethnographic nature to continue our understanding and description of the varied and multiple relationships between young children and their childcare teachers.

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Appendix A

November 2003

Dear Parents and Staff at Blacksburg Day Care and Child Development Center:

My name is Karen Reigle and I am a third-year doctoral student at Virginia Tech's Human Development Department in Child Development. I am hoping to do my research for my degree requirements in the Blacksburg Day Care Toddler room and am asking for your participation in my project.

The purpose of my study is to describe and better understand the relationships between young children and their childcare teacher. Beginning in January, I would like to spend several hours each weekday for approximately eight weeks in the toddler classroom observing and occasionally videotaping relevant behaviors relating to these relationships.

I would also conduct informal interviews with the children's childcare teachers to gain insight into their perceptions and feelings of their relationships with the children in their care, as well as record parents' thoughts about their children's relationships with their childcare teacher.

I plan not to be intrusive in the everyday classroom activities of the children. My role is to simply describe the relationships in this particular classroom. Knowledge of toddler's relationship formation should be beneficial for both parents and teachers in supporting young children's feelings of security in day-to-day interactions with their childcare teachers.

Your written consent will be needed for your child to participate in my research project. Anyone who does not wish to participate will not be included in my observation notes nor videotapes; inadvertent inclusions will be delete/blacked out. No one who participates in this study will be identified directly, they will be assigned pseudonyms accessible only to me as sole investigator.

Since my observations and interviews will be information used in my doctoral dissertation, information will be shared with the members of my committee at Virginia Tech: Dr. Andy Stremmel, Dr. Vicki Fu, Dr. Mark Benson, Dr. Lenore McWey, and Ms. Mary Ellen Verdu.

Thank you for your consideration and time. Questions are welcome at any time; I can be reached at 540-961-3747 or through email: kreigle@vt.edu

Karen E. Reigle
Doctoral Candidate, Child Development
Human Development Department
Virginia Polytechnic Institute and State University

Appendix B

IRB REQUEST PROTOCOL

Title of Study: The Nature of Relationships Between Young Children and Their Secondary Caregiver In a Childcare Center Classroom

Investigator: Karen Reigle

Justification of Project

The purpose of my study is to understand and describe the varied and multiple relationships that form between children (approximate ages 12 to 24 months) and their childcare teacher in a center context. My results will probably take the shape of a story narrative using thick, rich description, or portraits of different dyads within the classroom. I believe I will find many types of relationships, including but not limited to attachments, evident among the children and their secondary caregivers, and these could be presented as descriptive comparisons.

Relationship studies have been conducted on children's attachment relationships: primary attachments are typically with their mother; secondary attachments can be another family member or non-relative, as in a daycare provider. These behaviors have been empirically documented for over four decades and across multiple contexts and cultures.

Though there has been considerable research in the last few decades on children's relationships with other adults in their lives including childcare providers, how it compares to the primary attachment paradigm, and how it may impact a child's behavior or outcome, none of the research so far has taken a qualitative approach; and researchers have mainly been interested in the assessment of the mother-child or primary relationship, not an understanding or description of secondary relationships. The length of time spent in the midst of young children observing and learning about their childcare culture in a naturalistic setting should enhance the in-depth picture of what these secondary relationships look like.

My research question is what is the nature of observable relationships between children and their childcare teacher in day-to-day interactions? Therefore my main goal will be to describe these observed relationships between children and their childcare teacher; do they form close relationships? What do these relationships look like? How would one describe them?

Procedures

Access to my study site, The Blacksburg Day Care and Child Development Center, has been in progress over the past two years as one of several public daycare centers in Blacksburg that I have visited. My extensive experience in childcare has previously gained me access to observe and interact with young and pre-verbal children by their allowing my presence indicated by positive actions and reactions (implied consent); written consent will be obtained from the parents of the children in my chosen classroom, as well as from the center staff. Criteria for my choice of a public daycare center in Blacksburg is based on the openness of the director and teachers for research and my presence in the classroom; location of the center to allow for daily visits; the design and size of the classroom, that correlates to the number of available children and staff to observe (a larger number of both increases possibilities of relational dyads, hence more data).

Using an ethnographic approach, data collection will be through naturalistic, on-site observations recording relevant behaviors relating to the relationships that form between a child and his/her childcare provider or teacher. As a passive, participant observer, I will observe all the children and teachers in one classroom where the numbers range between 8-14 children, and 3-6 staff, but will only write field notes on relational interactions between the children and their caregivers- positive or negative, and any identified attachment behaviors witnessed in the children. Videotapes will be employed during one morning session per week to augment my study in allowing greater assurance in capturing relational interactions.

The children, both boys and girls, in this particular toddler classroom are between the ages of approximately 12 and 24 months. I will be spending several hours as a passive participant observer in the

toddler classroom in the mornings (Monday through Thursday) for approximately eight weeks beginning in January, 2004. Only behavior that spontaneously occurs in the classroom setting will be observed; no attempts will be made to structure the children's behavior.

My data will also include informal interviews with the children's childcare providers to gain insight into their perceptions and feelings of their relationships with the children in their care, as well as parents' thoughts about their children's relationships with their childcare teacher.

Questions for caregivers:

Do you have a close relationship with any of the children in your care?

If yes, with whom, and describe this relationship.

How would you describe your relationship with the other children?

Describe specific behaviors that indicate to you a child's relationship to their childcare teachers.

What do you do to support and encourage positive relationships with the children?

Questions for parents:

Does your child seem to have a close relationship with a particular teacher?

If yes, please describe this relationship- and the behaviors of your child that support your beliefs.

Describe your feelings about your child's relationship with their childcare teacher.

Risks and Benefits

A benefit to study children's secondary relationships is to determine its importance in determining childcare policy as it relates to child placements, transitions, and continuity of care for infants and toddlers. Knowledge of toddler's relationship formation should be beneficial for both parents and teachers in supporting young children's feelings of security in day-to-day interactions with their childcare teachers.

One of the built-in limitations of the study design is my required presence in the classroom that I anticipate will affect and possibly alter the children's on-going relationships with the childcare center's staff. I intend to limit my participation in interacting with the children and their play and care. Because I am aware of this inherent dynamic and its possible consequences, I will document all these interactions and possible new relationships forming, and reflect on how this may impact the children's relationships with classroom teachers. Staff may feel uncomfortable at first with my presence and note-taking, but I will assure them by explaining the nature and purpose of my study in writing and verbally; I am not here to judge or evaluate children, staff or parents, but simply describe the relationships in this particular classroom.

A minimal risk may be the possibility of close relationships developing between the children I will be observing and myself. When my research is concluded and I do not return to the classroom, there is the possibility of the children exhibiting distressed behaviors. However, this is not an undue risk for the children, as with the current high turnover-rates of childcare teachers, caregivers leaving are already a normal part of the child's daycare experience. I will also limit my participation and interaction with the children in the classroom.

Confidentiality/ Anonymity

The data will be strictly confidential. The participants in this study will not be distinguished directly by name or any other identifiers such as race. They will be assigned pseudonyms known only to me as sole investigator; the list of names and pseudonyms will be kept in a secured place at my residence. All access to the field notes will be confined to the investigator. Videotapes will be kept in a secure place at my residence also for one year from taped date, then destroyed; they will be viewed and transcribed by only me.

Results from my study will be presented in written and oral form for my doctoral dissertation committee in the spring of 2004 and submitted for possible future publication (in which case no identifiers will be used, for example center's name or the city). In some situations, it may be necessary for an investigator to break confidentiality. If child abuse is known or strongly suspected, I am required by law to notify the appropriate authorities; however, I will communicate any concerns with the director of the center

first.

Informed Consent

Informed consent will be explained and secured from all possible participants for this project: the director, staff, and parents of the children in this particular toddler classroom. A copy of the informed consent form is attached to this request.

Right to Withdraw

The participants will be informed that they have the right to withdraw from this study at any time without prejudice or penalty. Subjects are free not to answer any questions they choose without negative consequences.

Appendix C Request for Expedited Approval of Research Involving Human Subjects

Principal Investigator: Karen E. Reigle
 Co-Investigators(Faculty): Dr. Andrew Stremmel

Department(s): Human Development Mail Code: _____ E-mail: HDD@vt.edu Phone: 231-6149

Project Title: The Nature of Relationships Between Young Children and Their Secondary Caregiver
 in a Childcare Center Classroom # of Human Subjects: 50

All investigators of this project are qualified through completion of the formal training program or web-based training programs provided by the Virginia Tech Office of Research Compliance.

Note: To qualify for Expedited Approval, the research activities must: (a) present not more than minimal risk to the subjects, (b) not involve any of the special classes of subjects, except children as noted, and (c) involve only procedures listed in one or more of the following categories. The full description may be found in the Expedited Review section of the Virginia Tech “*IRB Protocol Submission Instructions Document*” or 45 CFR 46.110 (<http://ohrp.osophs.dhhs.gov/humansubjects/guidance/45cfr46.htm#46.110>)

Please mark/check the appropriate category below which qualifies the project for expedited review:

- 1. Clinical studies of drugs and medical devices when proscribed conditions are met [see item (1), page 8 of the “Instructions” document].
- 2. Collection of blood samples by finger, heel or ear stick, or venipuncture subject to proscribed limitations [see item (2), page 9 of the “Instructions” document].
- 3. Prospective collection of biological specimens for research purposes by noninvasive means. Examples: hair and nail clippings, deciduous teeth, permanent teeth, excreta and external secretions, uncannulated saliva, placenta, amniotic fluid, dental plaque, muscosal and skin cells and sputum [see item (3), page 9 of the “Instructions” document].
- 4. Collection of data through noninvasive procedures routinely employed in clinical practice, excluding procedures involving x-rays or microwaves [see item (4), page 9 of the “Instructions”].
- 5. Research involving materials (data, documents, records or specimens) that have been collected or will be collected solely for non-research purposes (such as medical treatment or diagnosis [see item (5), page 10 of the “Instructions” document].
- 6. Collection of data from voice, video, digital, or image recordings made for research purposes [see item (6), page 10 of the “Instructions” document].
- 7. Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language communication, cultural beliefs or practices, social behavior), or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies [see item (7), page 10 of the “Instructions” document].

Investigator(s)	Print Name Karen Reigle	Date
Departmental Reviewer	Print Name	Date
Chair, Institutional Review Board		Date

This project is approved for 12 months from the approval date of the IRB Chair.

Appendix D

Informed Consent for Parents of Children

Title of Project: The Nature of Relationships Between Young Children and
Their Secondary Caregiver In a Childcare Center Classroom

Investigator: Karen E. Reigle, Virginia Tech Doctoral Candidate

I. Purpose of this Research Project

The purpose of my study is to understand and describe the different kinds of relationships that form between toddlers (approximate ages 12 to 24 months) and their childcare teachers. My chosen research site, the toddler classroom at the Blacksburg Day Care and Child Development Center will have no more than 14 children (both boys and girls) at one time, with approximately 3-4 staff. I will be observing all the children and the interaction with their secondary caregivers, but will write in detail on only a few of these relationship pairs.

II. Procedures

I will be spending several hours as an observer in the toddler classroom in the mornings Monday through Thursday, for approximately eight weeks beginning in January, 2004. The classroom's activities and routine will not be disrupted or altered in any way; I will be present in the classroom but not interacting with the children. I will be writing notes on what I see happening in regards to the relationships that form between the children and their childcare teacher. Only behavior that spontaneously occurs in the classroom setting will be observed; no attempts will be made to structure the children's behavior. In order to assist me in observing interactions in the toddler classroom, I will be videotaping one session/morning per week.

III. Risks

I believe there are minimal risks to any of the participants in this study. Since all observations by investigator will be conducted inside the classroom, interactions between the children and the researcher will be unavoidable but kept to a minimum. I will not attempt to develop a caregiver relationship with the children in the classroom, but they may miss my presence after my research is completed and I do not return to the center. Children will remain in their natural childcare environment without any intervention, nor will they be evaluated or tested in any way.

IV. Benefits

I hope to add to our knowledge about the different kinds and quality of young children's day-to-day relationships with regular caregivers outside their family circle. Any information to provide toddlers with a nurturing environment will be beneficial for them and enhance their families' sense of well-being.

V. Extent of Anonymity and Confidentiality

The information I gather will be strictly confidential. I am the only person who will have access to participant's identities, with a pseudonym given to each child in my writings. Results from my study will be presented in written and oral form for my dissertation committee in the spring of 2004 and submitted for possible future publication (in which case no identifiers will be used, for example center's name or the city). Videos will be kept in a secure place for one year from taped date, then destroyed; they will be viewed and transcribed by only me. All access to the field notes will be confined to me also.

In some situations, it may be necessary for an investigator to break confidentiality. If child abuse is known or strongly suspected, I am required by law to notify the appropriate authorities; however, I will communicate any concerns with the director of the center first.

VI. Compensation

There will not be any compensation offered.

VII. Freedom to Withdraw

Parents are free to withdraw their child from the study at any time without penalty or prejudice.

VIII. Approval of Research

This research project has been approved, as required, by the Institutional Review Board for Research Involving Human Subjects at Virginia Polytechnic Institute and State University, by the

Department of Human Development.

IRB Approval Date

Approval Expiration Date

IX. Subject's Responsibilities

If you voluntarily agree to allow your child to participate in this study, you have the following responsibilities:

Your involvement as a parent in this study entails permission to observe and videotape your child in his or her center classroom.

X. Subject's Permission

I have read and understand the Informed Consent and conditions of this project, and have had all my questions answered. I hereby acknowledge the above and give my voluntary consent for my child to be observed:

Date

Parent's signature

Should I have any pertinent questions about this research or its conduct, and research subjects' rights, and whom to contact in the event of a research-related injury to the subject, I may contact:

Karen Reigle
Investigator

(540) 961-3747; kreigle@vt.edu
Telephone/e-mail

Dr. Andrew Stremmel
Faculty Advisor

(540) 231-4671; astremme@vt.edu
Telephone/e-mail

Dr. Joyce Arditti
Departmental Reviewer/Department Head

(540) 231-5758; arditti@vt.edu
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David M. Moore
Chair, IRB
Office of Research Compliance
Research & Graduate Studies

(540) 231-4991/moored@vt.edu
Telephone/e-mail

This Informed Consent is valid from _11/03_ to _11/04_.

Appendix E

Informed Consent for Parents

Title of Project: The Nature of Relationships Between Young Children and
Their Secondary Caregiver In a Childcare Center Classroom

Investigator: Karen E. Reigle, Virginia Tech Doctoral Candidate

I. Purpose of this Research Project

The purpose of my study is to understand and describe the different kinds of relationships that form between toddlers (approximate ages 12 to 24 months) and their childcare teachers. My chosen research site, the toddler classroom at the Blacksburg Day Care and Child Development Center will have no more than 14 children (both boys and girls) at one time, with approximately 3-4 staff. I will be observing all the children and the interaction with their secondary caregivers, but will write in detail on only a few of these relationship pairs.

II. Procedures

I will be spending several hours as an observer in the toddler classroom in the mornings Monday through Thursday, for approximately eight weeks beginning in January, 2004. The classroom's activities and routine will not be disrupted or altered in any way; I will be present in the classroom but not interacting with the children. I will be writing notes on what I see happening in regards to the relationships that form between the children and their childcare teacher. Only behavior that spontaneously occurs in the classroom setting will be observed; no attempts will be made to structure the children's behavior. In order to assist me in observing interactions in the toddler classroom, I will be videotaping one session/morning per week.

I will also conduct brief, informal interviews with the children's childcare teachers to gain insight into their perceptions and feelings of their relationships with the children in their care, as well as parents' thoughts about their children's relationships with their childcare teacher. Neither parents nor center staff will be asked to schedule time outside of their regular daycare attendance and routine.

III. Risks

I believe there are minimal risks to any of the participants in this study. Since all observations by investigator will be conducted inside the classroom, interactions between the children and the researcher will be unavoidable but kept to a minimum. I will not attempt to develop a caregiver relationship with the children in the classroom, but they may miss my presence after my research is completed and I do not return to the center. Children will remain in their natural childcare environment without any intervention, nor will they be evaluated or tested in any way. The informal interviews with parents will not be for assessment purposes but to record their opinions and impressions of the children's relationships with caregivers in the childcare setting.

IV. Benefits

I hope to add to our knowledge about the different kinds and quality of young children's day-to-day relationships with regular caregivers outside their family circle. Any information to provide toddlers with a nurturing environment will be beneficial for them and enhance their families' sense of well-being. Parents may contact me at a later time for a summary of the research results.

V. Extent of Anonymity and Confidentiality

The information I gather will be strictly confidential. I am the only person who will have access to participant's identities, with a pseudonym given to each child or adult in my writings. Results from my study will be presented in written and oral form for my dissertation committee in the spring of 2004 and submitted for possible future publication (in which case no identifiers will be used, for example center's name or the city). Videos will be kept in a secure place for one year from taped date, then destroyed; they will be viewed and transcribed by only me. All access to the field notes will be confined to me also.

In some situations, it may be necessary for an investigator to break confidentiality. If child abuse is known or strongly suspected, I am required by law to notify the appropriate authorities; however, I will communicate any concerns with the director of the center first.

VI. Compensation

There will not be any compensation offered.

VII. Freedom to Withdraw

Participants are free to withdraw from the study at any time without penalty or prejudice. Subjects are free not to answer any questions they choose without negative consequences.

VIII. Approval of Research

This research project has been approved, as required, by the Institutional Review Board for Research Involving Human Subjects at Virginia Polytechnic Institute and State University, by the Department of Human Development.

IRB Approval Date

Approval Expiration Date

IX. Subject's Responsibilities

If you voluntarily agree to participate in this study, you have the following responsibilities:
Your involvement as a parent in this study entails giving a few minutes of your time to answer questions about your child's relationships with his/her childcare teacher.

Sample questions for parents: Does your child seem to have a close relationship with a particular teacher? If yes, please describe this relationship- and the behaviors of your child that support your beliefs. Describe your feelings about your child's relationship with their childcare teacher.

X. Subject's Permission

I have read and understand the Informed Consent and conditions of this project, and have had all my questions answered. I hereby acknowledge the above and give my voluntary consent:

Date _____
Subject signature

Should I have any pertinent questions about this research or its conduct, and research subjects' rights, and whom to contact in the event of a research-related injury to the subject, I may contact:

Karen Reigle (540) 961-3747; kreigle@vt.edu
Investigator Telephone/e-mail

Dr. Andrew Stremmel (540) 231-4671; astremme@vt.edu
Faculty Advisor Telephone/e-mail

Dr. Joyce Arditti (540) 231-5758; arditti@vt.edu
Departmental Reviewer/Department Head Telephone/e-mail

David M. Moore (540) 231-4991/moored@vt.edu
Chair, IRB Telephone/e-mail
Office of Research Compliance
Research & Graduate Studies

This Informed Consent is valid from __11/03__ to __11/04__.

Appendix F

Informed Consent for Childcare Teachers

Title of Project: The Nature of Relationships Between Young Children and
Their Secondary Caregiver In a Childcare Center Classroom

Investigator: Karen E. Reigle, Virginia Tech Doctoral Candidate

I. Purpose of this Research Project

The purpose of my study is to understand and describe the different kinds of relationships that form between toddlers (approximate ages 12 to 24 months) and their childcare teachers. My chosen research site, the toddler classroom at the Blacksburg Day Care and Child Development Center will have no more than 14 children (both boys and girls) at one time, with approximately 3-4 staff. I will be observing all the children and the interaction with their secondary caregivers, but will write in detail on only a few of these relationship pairs.

II. Procedures

I will be spending several hours as an observer in the toddler classroom in the mornings Monday through Thursday, for approximately eight weeks beginning in January, 2004. The classroom's activities and routine will not be disrupted or altered in any way; I will be present in the classroom but not interacting with the children. I will be writing notes on what I see happening in regards to the relationships that form between the children and their childcare teacher. Only behavior that spontaneously occurs in the classroom setting will be observed; no attempts will be made to structure the children's behavior. In order to assist me in observing interactions in the toddler classroom, I will be videotaping one session/morning per week.

I will also conduct brief, informal interviews with the children's childcare teachers to gain insight into their perceptions and feelings of their relationships with the children in their care; center staff will not be asked to schedule time outside of their regular daycare attendance and routine.

III. Risks

I believe there are minimal risks to any of the participants in this study. Since all observations by investigator will be conducted inside the classroom, interactions between the children and the researcher will be unavoidable but kept to a minimum. I will not attempt to develop a caregiver relationship with the children in the classroom, but they may miss my presence after my research is completed and I do not return to the center. Children will remain in their natural childcare environment without any intervention, nor will they be evaluated or tested in any way. The informal interviews of staff will not be for assessment purposes but to record their opinions and impressions of the children's relationships with themselves in the childcare setting.

IV. Benefits

I hope to add to our knowledge about the different kinds and quality of young children's day-to-day relationships with regular caregivers outside their family circle. Any information to provide toddlers with a nurturing environment will be beneficial for them and enhance their families' sense of well-being. Childcare staff may contact me at a later time for a summary of the research results.

V. Extent of Anonymity and Confidentiality

The information I gather will be strictly confidential. I am the only person who will have access to participant's identities, with a pseudonym given to each child or adult in my writings. Results from my study will be presented in written and oral form for my dissertation committee in the spring of 2004 and submitted for possible future publication (in which case no identifiers will be used, for example center's name or the city). Videos will be kept in a secure place for one year from taped date, then destroyed; they will be viewed and transcribed by only me. All access to the field notes will be confined to me also.

In some situations, it may be necessary for an investigator to break confidentiality. If child abuse is known or strongly suspected, I am required by law to notify the appropriate authorities; however, I will communicate any concerns with the director of the center first.

VI. Compensation

There will not be any compensation offered.

VII. Freedom to Withdraw

Participants are free to withdraw from the study at any time without penalty or prejudice. Subjects are free not to answer any questions they choose without negative consequences.

VIII. Approval of Research

This research project has been approved, as required, by the Institutional Review Board for Research Involving Human Subjects at Virginia Polytechnic Institute and State University, by the Department of Human Development.

IRB Approval Date

Approval Expiration Date

IX. Subject's Responsibilities

If you voluntarily agree to participate in this study, you have the following responsibilities: As a staff person at the Blacksburg Day Care and Child Development Center, your participation only requires a few minutes of your time while there to answer questions about your relationships with the children in your care. Sample questions for caregivers: Do you have a close relationship with any of the children in your care? If yes, with whom, and describe this relationship. How would you describe your relationship with the other children? Describe specific behaviors that indicate to you a child's relationship to their childcare teachers.

X. Subject's Permission

I have read and understand the Informed Consent and conditions of this project, and have had all my questions answered. I hereby acknowledge the above and give my voluntary consent:

Date
Subject signature

Should I have any pertinent questions about this research or its conduct, and research subjects' rights, and whom to contact in the event of a research-related injury to the subject, I may contact:

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This Informed Consent is valid from __11/03__ to __11/04__.

Appendix G

Codebook Key for Categories:

- S : Staff initiates interaction with a child.
or
C : Child seeks proximity to or initiates interaction with staff.
or
C/S : Child and /or Staff: both or unsure which one initiated contact.
- P : Positive staff interaction, even if child is unhappy.
or
N : Negative; staff interaction is for discipline.
- I : Interaction occurs between staff and child, either verbally or physically.
or
NI : No Interaction: if child is only near staff without even verbal interaction, or child is watching staff;
also for daily care: diaper changes, washing (unless notable exchange takes place).
- D: Distress, child is hurt and/or crying, or child is in need of assistance with a toy or clothing.
- NI- K: Children's actions with or approaches to me.
- SD: Sitting Down, reference to staff positions in the room.
- F - C: Facts about Children unrelated to interactions with staff (absence, illness, reunion with parent); interactions with another child.
- F - O: Facts about Other things such as the room, the schedule, or staff movements unrelated to interactions with children.

Data are coded with multiple keys/letters. Examples of primary codes:

- C-I-P/SD: Child initiates play with a caregiver who is sitting on the floor.
- S-I-N: Staff initiates a disciplinary action with a child.
- S-NI: Staff moves child away from doorway, or tries to engage a child in play
but the child moves away.
- C-NI: Child waits at the door for particular staff to return to classroom, then follows her around the room.
- D/S-I-P: Staff goes to child who is crying and the child is comforted.
- D/C-NI: Child approaches staff with request for assistance or comfort and is ignored.
- D- NI: Child bumps his head but does not go to any staff, nor does staff go to him.