

Early Childhood Educator Perspectives:  
Transitioning Infants and Families into the Child Care Environment

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### **Abstract**

The focus of this research was to examine the perspectives of Early Childhood Educators and to explore how they support infants and families transitioning to group care. Qualitative research methods were used to explore an in-depth understanding of ten ECEs who participated in a focus group and answered a series of semi-structured interview questions. Thematic analysis, as described by Attride-Stirling (2001) and Braun and Clarke (2006) was used to identify global themes based on the organizing and basic themes. Two global themes were identified: successful transition and challenging transition. The results indicate that ECEs can articulate ways in which successful transitions with low stress and high levels of adaptability for infants can impact overall well-being. They also describe potential strategies and tools that are used to promote positive transition and relationship building with the family as a whole. The study results may be useful to ECEs working in child care programs, families, ECE students and program instructors as well as those who create policy for the provision of quality early learning programs. Additional research in this area is needed in order to ensure that infants are being supported in the transition from home to child care environments so that development is not impacted negatively by the stress of transition. Future research exploring the perspectives of a more diverse group of ECEs is suggested in order to expand the findings of this study.

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Working with all children and families is very important to me and ensuring that children are offered the best opportunities with ECEs who show them warmth, care and respect is my passion. I hope that in some way, the research presented in this study will encourage others to remember that they are very important to the children who need them and how significant their influence can be.

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## Chapter 1

### Introduction

For many families in today's society, parents work or study in order to provide for their families. When families have young children, the parents are faced with the dilemma of who will care for their children when they are not able to do so. In the past, some families have had relatives to help provide care for the children in the parent's absence. However, this is not the case for all families today as many have limited or no family support.

For necessity of work or school obligations, some parents will opt to enrol their infants and young children in child care programs in order to provide for the child's daily care needs (Ebbeck & Yim, 2009; Marshall, 2011). This decision is a critical one for parents as they must consider and decide which child care program or caregiver will take the best care of their child and meet the needs of the family as a whole. Often this scenario occurs before the parent or child has had the time to establish a sense of trust for the caregiver that has been selected and this can lead to mixed feelings and a great deal of stress for all parties: the infant, the parent and the Early Childhood Educator (ECE) (Ahnert, Gunnar, Lamb & Barthel, 2004; Martin & Berke, 2007).

Currently, in North America, there is an added challenge to finding high quality child care for infants and this has to do with the accessibility and availability of infant care spaces. The problem occurs for a variety of reasons and could be related to the higher cost of operating an infant program as opposed to a toddler or preschool program; the lack of ECEs who are qualified or experienced for working with these young children; affordability for families who are unable to pay the parent fees that are increasingly on the rise; and/or accessibility as more

and more families vie for the minimal infant spaces available (Bushnik, 2006; Friendly & Beach, 2013).

Transitioning an infant from a primary caregiving scenario in the home with a parent to a child care program is challenging for all involved. For the infant and their parents, the transition can involve a great deal of anxiety and stress (Cryer, Wagner-Moore, Burchinal, Yazejian, Hurwitz & Wolery, 2005; Ebbeck & Yim, 2009). ECEs play an important role in this transition as they will be the caregiver who aims to meet all the needs of the infant from the child's daily care needs to their development in all developmental realms and essentially, those who support the child's well-being.

Previous research has documented the role that quality early years care environments play in allowing parents to identify and connect with care providers who are able to meet the transition needs of both the parent and the child. This literature, however, has yet to include the exploration of ways in which ECEs see their role in developing positive relationships with parents and young children to support the transitions from home to child care. The study is designed to address the gap by asking infant child care providers to discuss their perspectives in a focus group format. Based on the research examined and the gaps that exist, the following thesis statement was developed: As the well-being of young children in group care is dependent upon the relationships that exist between the parent, child and the ECE, it is essential that the ECEs have both an understanding and an ability to establish strong, trusting relationships.

The following research questions were explored with ECEs:

1. What do ECEs believe that their role is in developing a relationship with infants and families enrolled in their child care programs?
2. How does the ECE's understanding of transition help guide the decisions made for establishing and maintaining a strong relationship?
3. What strategies or practices do ECEs promote to help infants and families feel secure as they begin the transition from home to child care?
4. Do ECEs feel that they have sufficient knowledge or tools to support this very important work of relationship building?

Focus group discussion transcripts were analyzed using a qualitative thematic approach to identify both common and unique themes. Themes identified through a systematic analysis include elements that contribute to a successful transition and experiences that may contribute to a transition considered to be challenging. In either circumstance, relationship building is crucial as the ECE works to ensure that the child feels secure and that the family is trusting and confident. Results demonstrated that the ECEs felt that both of these perspectives must be present in order to achieve an experience that will benefit the overall well-being of the infant.

### **Personal Reflection**

*Supporting children and families has always been something that is so important to me and I have dedicated my career to this work. I have been so fortunate over the years to have been able to welcome so many children and families into child care settings. I have seen how hard it can be for both the infants and their families and I have also seen the way that beautiful bonding and relationships begin to grow with caring ECEs. With my own two sons, the*



*experience of transitioning from being at home with me to being cared for in an infant program was so different with each of them. My oldest son was happy to enter into play and was very accepting of everyone and everything: It seemed like once we said hello, he never looked back. My youngest son was very different. He cried every day at drop off...right until he went to school. I felt helpless as a mom. I feel like these experiences gave me a unique perspective as both the parent who just wanted to know that her baby missed her and the parent who just wanted her baby to know he was safe without her.*

*Having the opportunity to host focus groups with the ECEs who gave up their time and shared their stories and thoughts was amazing. I felt like I was there with them experiencing their successes and challenges. They told me of how supporting infants and families is so important to them and also how it impacts them as individuals. They feel sadness when babies do not want to be with them or they cannot comfort them and they feel joy when the babies reach for them or come to them for hugs and cuddles. The ECEs showed the highest respect for families who shared their children with them as they felt privileged to be allowed into their circle of influence. This is how I felt in the study, privileged that the ECEs let me into their memories and their hearts. I know in my heart that this research will help others understand the perspective of people who commit their lives and their careers to working with infants whether it is a parent who needs to know what a positive transition can look like or it is a student thinking about entering this field. I also believe that this experience allowed the ECEs an opportunity to hear each other and to be reinforced for the important work that they do every day.*

## Chapter 2

### Literature Review

The parents of young children often anticipate placing their child into child care programs when returning to work or school. Having developed a close relationship with their child during the early months or years of life, the stress of transition may be difficult for some parents as they plan for child care arrangements. The notion that quality child care is easily available and accessible to families is not supported in reality. In fact, quality infant care is lacking in many communities making the process of finding good care even more difficult (Wilson, 2014). Characteristics of quality child care environments support infant brain development in part through the provision of primary caregiving and continuity of care during the early years. Trained ECEs are able to attune to infants in their care and build relationships with parents that help to support the early transition into care. The exploration of ECEs' perspectives on transitioning infants and parents into the child care environment proposed in this study will contribute to the existing body of professional development and training available for ECEs to better prepare them for work with families.

#### **Parent child relationships during the first year of life**

The role of a parent is to provide for children in a way that enables them to grow and learn and to become stable and confident in their overall development. Children who are cared for from birth, by their primary caregiver (usually the parent), have developed attachments to those caregivers who provide for all of the infant's needs. A healthy infant-parent relationship will ensure that the child develops a sense of emotional security and trust that the adult will be

there for them when needed (Ahnert et al., 2004; Bokhorst, Bakermans-Kranenburg, Fearon, van IJzendoorn, Marinus, Fonagy & Schuengel, 2003).

The transition of infants from primarily being cared for in the home to group care in a child care program is a critical process as it has the potential to affect the development of the whole child in both positive and negative ways (Bowlby, 2007; Cryer et al., 2005). Effective transitions with low levels of stress and high levels of adaptability, lend themselves to positive outcomes for the well-being of the child. Transitions that are challenging for children with higher levels of stress or of a longer time frame for experiencing distress, can have adverse effects on developmental outcomes (Bowlby, 2007; Mann & Carney, 2008). In order to prevent negative outcomes, parents must work hard to ensure that they are placing their children in child care programs with ECEs who have an understanding and deep regard for the importance of the relationships that will be established.

### **Infant Brain Development**

Infancy to age six is a very sensitive period for brain development. The knowledge of how to support this development is essential for ECEs who will work with infants and families (Bowlby, 2007; Cryer et al., 2005). The brain development of infants involves a specific sequence of processes, all which occur within the first few years of life. Neurogenesis, migration, myelination, synaptogenesis, and pruning involve thousands of neurons that carry electrical impulses and make connections between what the infant is experiencing to their memory (Burchinal, Roberts, Nabors & Bryant, 1996; Marshall, 2011). During these stages, if an infant has not had experiences that come from stimulating environments and supportive, nurturing relationships, the neurons and connections will cease to exist. In order to maintain strong neural connections which lend themselves to positive developmental outcomes, the child

must experience opportunities to engage in quality interactions with people and the environment, repeatedly and with the ability to practice new skills (Bowlby, 2007).

Advances in neuroscience is helping to show that infant brain development is shaped by experiences that are emotional in nature (Zellman & Perlman, 2006). For babies who are younger than 30 months, the right hemisphere of the brain develops at a faster rate than the left and it is in the right hemisphere that the control for intuition, emotional regulation and empathy is governed. These elements of emotional control are critical to healthy social emotional development for infants as they learn to get along with others in a social world (Zellman & Perlman, 2006).

Another key area of significance in brain development for infants is that of resiliency, the ability to overcome adversity. Quality interactions and support are key to any child's ability to become resilient and continue to thrive even when faced with adverse conditions in their daily lives. Being resilient does not mean that challenges do not have an effect on the child or their overall well-being but that the child is able to adapt to the situation that is causing them stress ([www.developingchild.harvard.edu](http://www.developingchild.harvard.edu)). Adaptation or normalization is a process by where the child becomes used to the new and potentially stressful experience and eventually is able to accept it as being typical. At times, the child is able to find comfort from either learning how to self-soothe or they will seek out an adult to offer them support when they are feeling anxious. Experiencing a typical event or having a source of comfort in a new environment leads to a lessening of the negative effects on development that the adversity could have had for the child (Mann & Carney, 2008). Stressful, sometimes traumatic experiences, such as being placed in a child care situation with adults who are unknown and not yet seen as being trustworthy, can be very unsettling and unexpected for the children. The infants are separated from their primary

source of comfort and security and are then in need of reorganizing the behaviours that they use to seek security around people who are unfamiliar and unknown (Ahnert et al., 2004; Howes & Hamilton, 1992).

Lack of stimulation and positive, supportive experiences can mean that the development of the child could be impacted significantly, possibly for life (Klein et al., 2010; Boyer, 2008). In order for this adverse outcome to be avoided, ECEs have to be able to understand the importance of offering infants experiences and environments that are motivating and thought-provoking (Bowlby, 2007; Boyer, 2008; Cryer et al., 2005).

### **Quality Child Care**

The quality of the child care provided plays an important role in helping to promote optimal brain development in infants. In fact, accessing high quality child care can benefit children in all areas of development including physical, cognitive, social-emotional and self-help skills (Abner, Gordon, Kaestner & Foreman, 2013; Hill, Waldfogel & Brooks-Gunn, 2002). Indicators of quality that are correlated to positive developmental outcomes are: staff who are educated and highly skilled; small group sizes for children; adult-to-child ratios that are low and consistent; an environment that is filled with language; a program that is developmentally appropriate for the children; materials that are stimulating and are provided in a safe physical space; and interactions and relationships between the ECEs and the children that are warm and responsive (Martin & Berke, 2007; Wilson, 2014).

While establishing the importance of quality care for the ECEs ability to forge and maintain strong relationships with children and families, the ability to measure the level of quality that is being offered is a significant factor. Quality can be measured by using specific

tools such as ECERS-R, (Early Childhood Environment Rating Scale- Revised) or the newly revised and published, ECERS-3 (Early Childhood Environment Rating Scale-3); ITERS (Infant/Toddler Environment Rating Scale); or the CIS (Caregiver Interaction Scale), to name a few (Arnett, 1989; Harms, Cryer & Clifford, 2003; Harms, Clifford & Cryer, 2015). All of these tools have been created to look at different elements of not only the child care environment which can influence children's developmental potential but also at some aspects of the relationship that exists between children and teachers. Quality of care has a direct correlation between the practices that are sensitive to the relational needs of the child and the family and the infant's future academic, cognitive and social skill development (Ahnert et al., 2004; Forry et al., 2012; Martin & Berke, 2007). Thus, it becomes essential that both quality and relationship skills co-exist in order to support the overall well-being of children who participate in group care.

### **Primary Caregiving and Continuity of Care as indicators of quality**

Primary caregiving refers to a system whereby "...a carer (primary caregiver...) may be responsible for a group of three to four children, focusing on routines like feeding, changing, napping and playing (Ebbeck & Yim, 2009)". Current research documents that in this caregiving relationship, the child is more equipped to exist in relationship with the ECE and that the outcome will be more positive in terms of infant development. The low ratio of caregiver to child ensures that this is a positive measure of child care quality that, if adhered to, offers the child unparalleled security and stability (Bowlby, 2007; Ebbeck & Yim, 2009).

Continuity of care refers to relationships that are built in early learning programs based on primary caregiving. The difference is that these relationships are supported and then extended as the ECE remains working with the child throughout future transitions as the child ages and enters older child care programs such as toddler and preschool. Ideally, the same

teacher would be with the same group of children throughout their entire child care experience thereby increasing the strength and stability of the relationship that develops between the ECE and the child (Forry et al., 2012; Mann & Carney, 2008). This caregiving scenario would also benefit the families as well, as they also would be working with the same ECE over the timespan of the child's important early years. The relationship would endure developmental stages and changes that take place over time, increasing the strength, trust and endurance of the bond. This would also, in turn, increase the likelihood that the child's well-being would be established and supported as the ECE will come to know the child in a way that they could not in a different scenario.

### **Caregiving Styles**

The style of caregiving that the ECE offers the infant in his or her care is directly related to potential outcome for infant well-being (Boyer, 2008; Martin & Berke, 2007). The work of Howes and Hamilton (1992) and Howes and Stewart (1987) examined the levels of sensitivity and involvement that ECEs had with the children that were enrolled in their child care programs and how this was linked to infant developmental potentials (Howes & Hamilton, 1992; Howes & Stewart, 1987). The tool developed by Howes and Stewart (1987) to measure the strength of the ECE and the infant's relationship involves a five level scale. The levels range from...

“(1) routine caregiving in which the teacher touches the child for routine care but makes no verbal responses to the child... (2) minimal caregiving when the teacher touches or talks to the child in order to discipline the child, to answer direct requests for help, or to give verbal directives with no reply encouraged to more responsive caregiving, (3) answering the child's social bids but not elaborating or extending them, (4) extending and elaborating the child's social bids, and, finally, (5) intense caregiving including

holding or hugging the child to provide comfort, engaging the child in prolonged conversation, or playing interactively with the child (Howes & Stewart, 1982; Howes & Hamilton, 1992).”

If the ECE is engaging with the infant at the highest level, the emotional climate and quality of the infant care environment is enhanced, thus leading to optimal brain development for the child and opportunities to achieve the highest potential as they continue to learn and grow. The more structured and supportive the sensitive caregiving is, the more positive experiences that the child will have, thus increasing the quality of the program (Howes & Stewart, 1982; Howes & Hamilton, 1992).

When considering what ECEs understand of this very important element of their work with young children, it is important to consider the training or education that is in place for establishing prior learning about relationship building. While reflecting on the specific training or education of ECEs, we have previously established that training programs and education produce a variety of outcomes and understanding of child development and relationship building (Beck, 2013; Martin & Berke, 2007; Wilson, 2014). Research by Knoche, Sheridan, Edwards and Osborn (2009) demonstrates that there is a distinct connection between the education level of the ECE and their ability to positively strengthen families’ competence and confidence in their relationship with their child (Ebbeck & Yim, 2009; Forry, 2012). Other research shows a strong correlation between ECE’s lack of education and their own feelings of confidence and the ability to build a strong relationship with families (Beck, 2013; Forry, 2012; Wilson, 2014). Thus, it is safe to assume that the higher the level of education and understanding of the fundamentals of relationships, the better equipped the ECE will be to try to establish this goal and support the



well-being of the infant in their care with increases in positive developmental outcomes for all areas of development including cognition and social development (Beck, 2013; Boyer, 2008).

When children begin the transition from being cared for in the home by their parent or primary caregiver to being separated from that parent and placed in a group care setting to be cared for by a secondary caregiver, the emotional response can be very intense for the children (Mann & Carney, 2008; Tarabulsky, Provost, Larose, Moss, Lemelin, Moran, Forbes & Pederson, 2008). Some of the reactions that the child may be exhibiting are discontent, crying or fussiness. Other signs of stress can be silent distress or being excessively clingy (Cryer et al., 2005; Wilson, 2014). All of these behaviours can take some time to overcome but the intensity or amount of time the child reverts to these reactions will decrease as they become more familiar with the ECEs offering the care to them.

A question that can arise for ECEs as they consider this experience that the infants in their care endures during the transition period, is to question the detrimental effects that this process can have on infant brain development. Also worth consideration is how longer periods of time in a stressful separation from the parent can effect overall health and well-being of the infant, especially if these scenarios occur frequently (Klein et al., 2010). The duration of a stressful transition can vary for children and only ceases when the situation becomes normative for them, they are able to have reliable expectations for care and have developed strong secondary attachments with a caregiver. Ahnert et al. (2004) found that some children showed decreases in their cortisol levels, thus stress levels, after nine days of adjustment while other children continued to have elevated stress levels until five months in the child care program (Ahnert et al., 2004).

ECEs have an incredible job of not only offering support and stress reduction to the infants and families during the stage of transition to child care but also to use the knowledge they possess to attempt to shorten the duration of the stressful time. A skilled, educated ECE, working in a high quality program, will not only be able to recognize problematic behaviour patterns that may be being established as being normative for children as a coping skill but can also intervene to positive social emotional development for the child (Boyer, 2008).

Having access to knowledge and understanding of typical child development, what quality child care looks like and healthy brain development for infants and young children all lend themselves to the importance of relationship building between the infants and the ECEs who care for them. It is within the context of an established relationship with trusting adults that children build their own framework for understanding inter-connectedness and how they relate to other people (Ebbeck & Yim, 2009; Howes & Hamilton, 1992). This understanding or cognitive processing requires time truly spent in relationship with caring adults. High quality infant programs offer the perfect place to establish these relationships. As the infant's social circles and circles of influence become larger over time with the addition of new adults who care for them, children learn within the context of the relationships that is being built with the responsive ECEs (Ahnert et al., 2004; Mann & Carney, 2008).

The relationship that the teachers and the parents forge is very important to the relationships the child will also develop. Children will watch their primary caregiver to gauge their reactions and to decide if the parent is feeling safe and secure in this new environment (Marshall, 2011; Wilson, 2014). If the parent is not demonstrating these emotions or reactions, the child will in turn question whether it is indeed a place that will offer them security and safety as they are not receiving the social referencing that tells them all is good (Klein et al., 2010;

Mann & Carney, 2008). ECEs will have to work harder to establish a rapport with some parents who are more uncomfortable with the transition than are others. It is common for parents to question the program or practices of the child care centre or the ECE themselves. It is possible that the parent could be feeling a great deal of remorse or guilt that they are not in a position to continue to be the sole caregiver for the child. These emotions could influence resistance to the relationship building that is occurring with the secondary caregiver, regardless of what the ECE is offering them for reassurance (Ebbeck & Yim, 2009). The impact that this has for the ECE is that they are not only responsible for establishing a strong, stable relationship with the child but they must also invest time and energy into establishing the same sense of trust and sincerity with the family members as they will clearly understand how important this is.

Relationship building and developing a sense of trust clearly takes time and research does indicate that the more time that the parent can spend with the child in the child care program, the more secure and safe the child will feel (Mann & Carney, 2008; Zellman & Perlman, 2006). In some Australian child care programs, the transition stage begins with visiting the centre on a regular basis with the parent. This period can last for more than one month (Ahnert et al., 2004; Bowlby, 2007). The outcome that is achieved by progressing at this rate before introducing the child to the care of the ECE in the absence of the parent is that the transition would be either seamless or less anxiety-inducing. Therefore, the child's overall development will be supported and not affected detrimentally (Ahnert et al., 2004).

In addition to the personality or attributes of the ECE that can be supportive of establishing a sense of trust and security with infants and families, are actual teaching practices, styles or routines that are supportive. Klein, Kraft and Shohet (2010) established that some of the practices of the ECE to distract the child from crying for the parent was counterproductive in

establishing strong bonds of trust (Klein et al., 2010). To be more specific, depending on the strength of the crying or demonstrations of stress and anxiety, the caregiver alters his or her reactions. If the child were crying excessively and for longer time periods, the caregiver spent the majority of the time distracting the child presumably in the hopes that this would help them to stop crying and self-soothe. The rationale produced by the study is that when the child was not displaying the strong reaction to being left in the ECE's care, the teacher spent more time trying to establish a connection with the child (Klein et al., 2010). The opposite scenario of when the child was vehemently protesting, the adult focused their own attention on what they could distract the infant with rather than focusing on getting to know what would comfort the child the most. This perspective is informative as it seems that the children who need the strength of a personal connection the most do not receive it until they are in a calmer state (Klein et al., 2010).

The practice of responsive caregiving is considered to be valuable. Martin & Berke (2007), provide a definition of responsive care as "...a philosophy of care, education, and nurturance that meets the changing needs of the developing infant and young child and is sensitive to the individual differences of each child (Martin & Berke, 2007)." If the care routine and interaction style that is offered to the children by the ECE is consistently sensitive and responsive to the child there will be positive outcomes not only in their social skill development but in their cognitive development as well (Myers & Pianta, 2008; Tarabulsky et al., 2008).

Sensitivity, respect and non-judgmental attitudes are all important qualities that need to be reflected by ECEs in order to build effective relationships not only between adults and adults but adults and children as well (Boyer, 2008; Cryer et al., 2005; Forry et al., 2012). The Family Sensitive Caregiving Model emphasizes that ECEs have an understanding of the stresses and

strains that face working families and that the educators be able to put those needs in perspective as they begin to work with new families and children (Forry et al., 2012). This particular perspective is based on several assumptions about the family with the main one being that the parent is the child's biggest influence and this has an impact on development. Another assumption is that if caregivers are sensitive to the demands placed on the family, they then become a positive influence on that family and can help strengthen them in the face of risk (Forry et al., 2012; Zellman and Perlman, 2006). This is very important knowledge for ECEs who are concerned with the development of the whole child and supporting the positive outcomes for the infant's well-being. Not only could it help support the child when they are in the care of the ECE but the support and understanding could permeate the relationship of the child and parent and potentially have a positive effect on the home life as well.

An indicator of a strong relationship between an ECE and an infant is how attuned they are to the needs of the child (Beck, 2013; Forry et al., 2012). Attunement means knowing the child well enough to be able to proactively meet their needs or intervene when the child needs their support (Beck, 2013; Boyer, 2008). As an ECE invests in the relationship building with the child, they learn more and more about the child's needs, moods, communication style and personality traits. This enables them to be able to recognize when the child needs extra support, what to offer the child to satisfy a need and when to offer the infant a challenge to further development in the context of a safe, supportive learning environment (Beck, 2013; Martin & Berke, 2007).

While a great deal of research exists about a variety of themes explored in the body of this work, such as the parent-child relationship; transition stress for infants and children's brain development, a definite gap also exists (Cryer et al., 2005; Ebbeck & Yim, 2009). Some of the

research that exists is limited in that there are many qualitative studies but they are relatively small in size (Forry et al., 2012; Ebbeck & Yim, 2009). This can be problematic as small, qualitative studies are not suitable for all contexts for all families and children and they can be hard to replicate (Forry et al., 2012; Ebbeck & Yim, 2009). Another challenge as previously explored is that all ECEs do not share the same amount, content or quality of education and experience when working with infants (Cryer et al., 2005; Ebbeck & Yim, 2009; Marshall, 2011). The current literature available about infant transition to childcare does not include an examination of what the ECE believes to be important in order to establish strong, secure relationships with infants. How does this relationship building effect overall development for infants in group care and what are the detrimental effects that could be occurring in the absence of this literature? This gap in research must be considered and addressed for if it remains unexamined, children are not receiving the best possible care that they could be receiving in childcare programs as ECEs will not necessarily have all the tools that they could use for building supportive relationships.

This study is designed to address this gap of how ECEs see their role in developing positive relationships with parents and young children in order to support the child's transition from care primarily offered in the home to group care in a child care setting. By asking infant child care providers to discuss their understanding and perspectives in a focus group format, the information collected will support current research as well as future research and new learning to come for those who work with young children and families.

## CHAPTER 3

### Method

The aim of the research study was to explore the perspectives of ECEs working with infants in a group child care setting on their understanding and practices around supporting young children and their families transitioning into child care. The research study gathered ECEs together in focus groups, to discuss their perspectives on the topic. A thematic analysis of the focus group discussion was conducted to support answering the study research questions.

### Participants

Three focus groups of 3 to 4 participants each were scheduled and held. The total number of participants who chose to be a part of the research was ten, which was less than the target number of 12 to 15. Originally, 15 participants had contacted the researcher however, for a variety of reasons, 5 were unable to attend their scheduled group. Inclusion criteria for participation included the following: Level 2 or 3 classification (Province of Nova Scotia), currently working in an infant program with children under 18 months of age and a minimum of 3 years' experience working with infants.

There were a total of ten ECEs who participated in the study group. Of the ten, four had a classification level of 3 (ECE degree) and six had a classification level of 2 (ECE diploma). All participants were currently working with infants and the number of years' experience varied from 6 participants with between 3 and 5 years, 1 had 8 years, 1 had 10, 1 had 16 and the other had 17 years of experience.

The demographic questionnaire also included a question about what education the participants have had to help them learn about infants and/or relationship building. Of the 10 participants, one responded that she was “doing” her diploma for Early Childhood Education without specifying particulars about infant care or development; 8 specified that it was course work or specifically infant-toddler, psychology, or child in the family coursework while completing their diploma or degree; 7 indicated that they had participated in a variety of workshops or professional development opportunities in addition to their formal education; 1 indicated that she also received “on the spot training”; and 1 more specified that she had audited a college course for infant development as a refresher.

## **Procedure**

**Recruitment.** Permission to conduct the research study was requested via application to the Mount Saint Vincent University Ethics Board (UREB). Upon receipt of the approval certificate, the recruitment process for potential participants began. Emails were sent to a potential 64 Child Care programs within HRM who operate infant programs and have no violations reported on the HRM website, Child Care Directory <https://nsbr-online-services.gov.ns.ca/DCSONline/ECDS/loadSearchPage.action> (Appendix A: Invitation to Participate). The email presented information regarding the research study including who the researcher was; some of the research questions; information about the focus groups and who to contact for additional information or to register. A poster was included as an attachment to the email which also included information about the purpose of the study and the participation criteria. Child Care Centre Directors were asked to share the invitation with their staff working in their infant programs and to print the poster and place it in their staff rooms. Follow up for the emailed invitation was via a personal phone call or additional emails as requested. An offer was



made that should a director require additional information or if they were unable to print a copy of the poster, a personal visit could occur at either a professional meeting or at individual centres where supplementary information could be shared or a poster delivered, however no requests were received for this.

Individual staff members were then asked to reply to the researcher by email to arrange a phone call to a) review the informed consent and b) arrange attendance at one of three planned focus groups (Appendix A: Informed Consent). The focus groups were scheduled in evening time slots during one week and took place in a seminar room at Mount Saint Vincent University. As it was anticipated that the time frame 4 – 8 pm on a Tuesday, Wednesday and Thursday night should be attractive to the participants, the Tuesday and Thursday groups took place from 6:00 to 8:00 PM and the Wednesday group took place from 4:30 to 6:30 PM. An alternate date was planned in case inclement weather or campus closure caused the cancellation of a scheduled focus group however this was not required. Bottled water and light snacks were provided during the focus groups.

Audio recorders were used to record the group discussion. Additionally, a note taker was also in to room as an observer and recorder. The role of the observer was to make notes during each session about the information that was being shared by the participants. The observer also made notes about facial expressions or body language that was observed, in an objective manner. Following completion of the focus groups, each audio file was transcribed verbatim.

### **Ethical Considerations**

Previous to the participant's agreement to partake in the study and the start of each focus group, the informed consent was reviewed and participants were asked to sign the consent to

participate and consent to be audio recorded. There was and is minimal risk for the participants who participated in the focus group. To ensure confidentiality and privacy, participants were assigned a pseudonym and were referred to by this during the discussions and in the written results.

The room was set up in a manner conducive to small group conversation with the audio recorders placed in the middle of the table to capture the group dialogue. The researcher then asked each participant to sign a confidentiality agreement to discourage the sharing of information discussed by the participants beyond the focus group (Appendix B: Confidentiality Agreement). The note-taker was introduced and her role described for the group. The note-taker also signed a copy of the confidentiality agreement during each session. Participants were initially informed and then reminded that they were free to withdraw from the study at any point up to publication and that they were free to choose to not respond to any questions should they desire.

## **Research Design**

The research study uses a qualitative design to explore the processes that underlie the approach to working with infants taken by the ECEs. Description is an important element of a qualitative research study. The decision to use a focus group was made because it allows for the gathering of information from a relatively large number of participants in a relatively short time (Esterberg, 2002; Kitzinger, 1995). Discussion facilitated in groups can generate insight into the topic that were previously not understood. A strong moderator may be able to move members of the group to explore their perspectives and share their thinking around the topic by allowing individuals think out loud. Finally, focus groups encourage group interaction which brings a variety of viewpoints together leading to greater discussion.

The success of the focus group process is dependent on the skills of the moderator in facilitating and maintaining a focus on the task at hand. The use of audio recording and a note taker for the groups is an important element in gathering the rich data that can be generated in a short span of time during each focus group.

### **Semi-structured interview**

Participants were asked a series of guiding questions to spark and continue conversations. Questions were based on the 4 research questions guiding the study and included some prompting questions as well (Appendix C: Interview Questions). Participants were encouraged to host conversation amongst each other and to ask and answer questions as they arose.

The benefits of the study is that the information collected in the focus groups could help build current research about ECEs perceptions of how to support infant and families through transition to child care. This information would be beneficial to all involved in the field of early childhood education and care as it will be supportive of providing infants with the highest potential quality of care. In addition, this new research could benefit those who are instructing infant care courses and the future students who will learn from them.

### **Analysis**

All audio recordings were transcribed verbatim. Field notes prepared by the note-taker were transcribed and used to fill in any gaps that existed in the transcript and to offer contextual information that may serve to explain the process occurring in the group. The thematic networks analysis described by Attride-Stirling (2001) and Braun & Clarke (2006) were used to guide the analysis of the data. In addition to the creation of thematic networks to illustrate the perspectives

of the ECEs, the researcher systematically answered the four research questions with information collected across the focus groups.

Qualitative research has gained in popularity and usage over the past ten years and has become more widely accepted even though results obtained in a qualitative study tend to be diverse and complex (Attride-Stirling, 2001; Braun & Clarke, 2006). Attride-Stirling (2001) has developed a thematic network to be used a tool for application to methodically analyze qualitative research results in order to produce outcomes that are both useful and meaningful (Attride-Stirling, 2001). Using thematic network analysis enables the researcher to organize qualitative data results in a manner that recognizes themes that are dominant and salient from the work. Thematic network uses basic, organizing and global themes as a way of making connections and portraying the data in a web-like structure (Attride-Stirling, 2001). Thematic networks are also viewed as being very flexible in nature (Braun & Clarke, 2006). In order to understand the application of this thematic network, it is important to explore the meaning of the different types of themes that will become evident during data analysis. Basic themes are the lowest-order themes, they are reflective of beliefs or statements but are not able to stand alone and must be understood within the context of the thematic network in itself (Attride-Stirling, 2001). Organizing themes are middle order themes that are supportive of creating and displaying groups of basic themes from the research analysis. They are used to develop the information collected in the much broader ideas (Attride-Stirling, 2001). Global themes incorporate the broadest images or representations of the analysis as a whole. Global themes are a type of conclusion or summary of the main ideas presented in the work (Attride-Stirling, 2001). Braun & Clarke (2006) went on to explain themes as a whole. “A theme captures something important about the data in relation to the research question, and represents some level of *patterned*

response or meaning within a data set” (Braun & Clarke, 2006). Braun & Clarke also proposed phases of thematic analysis which loosely resemble the work of Attride-Stirling but appear to be somewhat more applicable for the purposes of this work (Attride-Stirling, 2001; Braun & Clarke, 2006).

**Table 1 Phases of thematic Analysis**

Phase	Description of the process
1. Familiarizing yourself with the data:	Transcribing data (if necessary), reading, and re-reading the data, noting down initial ideas.
2. Generating initial codes:	Coding interesting features of the data in a systematic fashion across the entire data set, collating data relevant to each code.
3. Searching for themes:	Collating codes into potential themes, gathering all data relevant to each potential theme.
4. Reviewing themes:	Checking if the themes work in relation to the coded extracts (Level 1) and the entire data set (Level 2), generating a thematic ‘map’ of the analysis.
5. Defining and naming themes:	Ongoing analysis to refine the specifics of each theme, and the overall story the analysis tells, generating clear definitions and names for each theme.
6. Producing the report:	The final opportunity for analysis. Selection of vivid, compelling extract examples, final analysis of selected extracts, relating back of the analysis to the research questions and literature, producing a scholarly report of the analysis.

*Note.* Adapted from “Using thematic analysis in psychology,” by V. Braun and V. Clarke, 2006, *Qualitative Research Psychology*, p. 87. Copyright 2006 by Edward Arnold Ltd.

## **Chapter 4**

### **Results**

For the purpose of this research, the thematic analysis of both Attride-Stirling (2001) and Braun & Clarke (2006) were combined and applied to the transcript analysis. The identification of global, organizing and basic themes from the collected data was based on the work of Attride-Stirling (2006) in order to recognise patterns and to organize the responses of the participants (Attride-Stirling, 2001). The phases of thematic analysis were then applied in order to examine and analyze the results of the study further (Braun & Clarke, 2006). Combining these two processes in examining and coding the participants' responses to the interview questions identified many basic themes that were relevant to the work and perceptions of the ECEs. These basic themes were then ordered and grouped into broader organizing themes and applied to identify the global themes of the data collected. All of these themes, as well as extract examples that are compelling and relevant will be evident in the results of this work.

**Figure 4.1 Global Theme: Successful Transition**



### **Organizing Theme: Infant Reactions**

The global theme of Successful Transitions became very evident while exploring and examining the responses of the ECEs. Further, four organizing themes became apparent as the transcripts were reviewed. The first of these was infant reactions which was the physical indications of feelings demonstrated by the infants. Further examination and coding responses leads to four basic themes: The child's emotions; indications of success; awareness of the parental connection and differences in individual infant needs or personalities. Looking at each of these separately does not adequately describe educator's perceptions. Classifying and examining basic themes together does however, depict a clear picture of how the ECEs portray a positive transition for infants.

In terms of infant reactions, the ECEs gauged the success of a transition for the child when the negative physical signs of stress and anxiety were absent. The signs appear to be universal and the experiences of the educators who participated in the study all reported intense crying when infants are left at the childcare centre. This intense crying was described to last for a period of between 2 weeks to 5 or 6 months. The latter being the longest period of adjustment time reported and was a commonality for four out of the nine participants. All of the ECEs seemed to agree that shortness of the period of time that infants cried when left in their care, was an indicator of the success or ease of the transition. Other physical indicators of a child struggling with transition were that the child cries for the parent when the parent leaves the room and also that the child can have very intense negative reactions to the ECE. Betty told a story about a one-year old infant new to the infant room. The child had begun her transition to the



childcare centre while the ECE was away and upon her return, after approximately 10 days, the child screamed anytime that the teacher approached her.

so I came after two weeks back and I saw that she was sitting at the table and I couldn't... look at her...She was totally red and when she saw me she started crying, crying, crying, crying. And I told [co-worker]...please handle her because she needs more time to see me. The other kids were good but she was...whenever I am going like not too close...her face was so red, like too red (Betty).

A few of the participants referred to the period of adjustment or transition into their infant programs as the time it took the children to “settle”. In order to comfort distraught infants, some ECEs found that re-directing the child’s attention or distracting them from the cause of their distress, can calm them quickly.

I try to do a lot of distracting but in a positive way. So a lot of the time we will go to the window and find a truck. We will go to the window and wave to the parents. We can now all go to the window and [I say] ‘oh, let’s see who is coming’ and they all run over even though they were crying 30 seconds ago (Holly).

Another common theme that came from comparisons of all the focus group discussions was that the ECEs referred to the strength of the bond that they forge with the infants. One participant talked about a relationship that she has experienced with an infant she began to care for at four months of age “...she is currently 10 months old so we have had her for 6 months now and the bond that we have formed with this child is just crazy...(Dawn).” Along with these strong connections, observations of how the infant was behaving also seemed to be seen as being able to show the child’s ability to adapt to the new environment and caregivers. The educators

described that they knew the children had settled in when they came into the infant room either on their own without the parent pushing them, when the reactions they offer you are smiling and waving and when they are able to begin to play as soon as they enter the room. One discussion about a transition that an ECE had participated in with a baby girl who had joined her centre and was moving from a different centre where the transition had been quite challenging for the infant and the family. The communications with the family indicated that they were quite anxious that this might occur again.

They were really concerned when they came in because it had been such a long time. So I explained that that's very common and that it may start all over again or she may be used to a little bit of the separation anxiety and it may be easier for her. At first we weren't sure how it was going to go...but now, it's only been two weeks and she is already smiling and waving and it just feels really nice (Gail).

The ECEs discussed the importance of the connection between the child's emotions and that of their family member, at length. The majority of the ECEs referred to the transition of the infant and the family as being positive when the child could see that their parent or caregiver could drop them off to the child care program without getting upset or crying. According to Holly "...seeing mommy leave without crying...is a big thing." Kelly was in agreement with Holly as she also shared the connection between parent and child's reactions. "...when the parents are calm and relaxed and not anxiety filled, than the child's great (Kelly)." To understand this even more clearly, Amy spoke of infant's intuition when it comes to their family.

...children feel their parents' feelings...Children know if their mom is feeling anxious or they know that as soon as they drop them off in the morning, they are going to go into

the hall and cry. Kids know that. Kids understand how their parents feel and so making the family feel comfortable helps make the child feel comfortable (Amy).

The final basic theme identified by the ECEs, was the responsibility for getting to know the infant in respect to personality differences and distinct. The ECEs shared their thoughts and experiences about how important it is to understand the child as an individual with emotions, reactions, personalities and interests. Some discussion occurred about variation in infant reactions to transition. In one example an ECE spoke of two children who began transitioning at relatively the same time. Communication with both families led to anticipation about how the infants might react to the changes. The ECE and colleagues, as well as the parents, were surprised that the opposite of what was expected, occurred.

...this little girl that just transitioned beautifully, we expected would have a hard time and then another little girl that we expected would just walk in and own the place...last week was fantastic and this week is sad...and the parents are fairly easygoing...they are a little bit surprised because last week when they came in they were saying 'oh, she will be fine' ... (Gail).

When this same topic arose in another focus group, Kelly attributed the ease of transition with little or no stress, to the child's innate ability to be social, as she experienced with a new little boy.

Just this boy that recently started. Just right as soon as he was in, speed crawling through the classroom like he owned the place...there are certain infants that are just...they love social and you can put them into any environment and they're good to go and I think that is just him. He is just really easy (Kelly).

When ECEs understand specific infant needs, transitioning into child care can be smoother. One ECE recollects a relationship that she built with a little boy who was around 13-14 months when he began at her centre. She and her colleagues took time to observe and document what was occurring and a surprising pattern emerged.

So we tried to observe what his interests were so we could have those things available when he would come...so at my centre, we switch shifts so sometimes I would be there when he came in the morning but sometimes one of my colleagues would be there. And I noticed that when he came in when the other teachers were there, it was a much calmer transition for his parents but when I was there he seemed to be much more upset. So I was trying to observe and trying to figure out why this was happening and what I ended up figuring out was that I was just too excited in the morning...I am very animated and he didn't need that. He wanted calmness. He wanted to say goodbye to his parents, come in calmly and find what he wanted to do and kind of be on his own...I didn't know how to respond to that (Amy).

### **Organizing theme: Family Reactions**

Another organizing theme that became apparent was the significance the ECEs attributed to the reactions that the adults, family members or caregivers, had when supporting their child through the transition. Repeatedly, in each of the three discussions, the conversation came back to the ECEs role in helping the parent or family member become comfortable in the child care setting.

...You can see they are apprehensive about leaving their kids. If the child's upset a lot of the time, they get upset. They don't want to see their children crying. They...up to

this point, they have been the centre of their lives and in some cases...they have never left their child in the care of anybody else. And, it's making them comfortable so it is talking about their child like the child is the only thing in your world too. It's developing that relationship where they are comfortable leaving their baby with a complete stranger (Holly).

In another focus group discussion, an ECE spoke of the challenges that families face in the balance of parenting and work or school life. She shared a story of a child who was having a challenging time transitioning to the centre and getting settled or comfortable. For mom, the process was easier but the tribulations came from being both a mother and a student, as was described by the ECE.

I had one [transition] a few years ago. Mom was a student and [after] four months, this child [had] just stopped crying...it was nothing to do with mom, she was great. A little stressed because she had an unhappy child, trying to go to university and get everything done. Christmas time came...Mom...couldn't do it anymore and pulled her...Mom came in very upset that she was doing this but she just didn't think she could continue alone because she was up in Halifax by herself (Ellen).

One important element that Gail brought into the conversation was that sometimes, for a variety of possible reasons, the parents may be unable to be the one to help their children settle into a program. For one infant, the grandmother was helping her become accustomed to the program and the two were very close. The ECEs supported this relationship by encouraging the pair to become familiar with the room and the routines. The ECE felt that it was important to ensure that the grandmother was feeling good about how her granddaughter would do when she could not be with her.

...like this little girl. Her grandmother spent the entire week with us last week. She just would spend a few hours but then I spoke with the grandmother because when the grandmother is here the granddaughter wants nothing to do with us. Don't even come close to me and so we didn't. We just let her explore. And we said to the grandmother, when you leave next week, I just want you to know that we're not spending a lot of time with her now because she doesn't want us to but we won't be leaving her alone next week. I don't want you to be thinking that you are going to leave and she is not going to have anybody...and the grandmother really seemed to appreciate that (Gail).

The ECEs expressed their perspectives of respecting families in every situation "...and you've got to respect every parent...no matter what (Julie)." Her sentiments were shared by Gail:

For me, building a rapport with the families is just as important as the relationship that you are going to have with the infant because they can't tell you anything. And you really need a parent to trust you and to let you know what is happening. If they have been up screaming all night. If the parent is you know, like some days when a parent walks in and they are like 'here'. It's really important for the parent to be comfortable to do that knowing that we are not going to judge them (Gail).

All of the educators who participated in this research project were able to clearly articulate the benefits establishing an effective relationship with the family of the children in their care. Carla indicated that when this is truly in place, parents trust you to care for their infants in their absence and to make decisions in the child's best interests. Carla shared an example of this in her description of planning nap routines with her co-worker. When the trust is established, the family members are okay with the ECE's decision making skills.

...I think trust is also important with, between ECE and parents...because sometimes when we ask parents about the routine for the nap time...When we ask the parent about that like two or three families don't ask us about...[they say] do whatever you want. I think the trust...is that everything is smooth and comfortable with the families (Carla).

Another time that the trust is evident is when ECEs are sought out for information sharing. All of the focus groups had examples where parents needed to know exactly what was going to happen in an information sharing way as transition was very new to them and they did not know what to expect. Sometimes this included what to bring for their children and what kind of routine they would see in the program. Other times it is about being open and honest with families about the reality of transition.

...we're pretty much brutally honest with them usually. I mean, we tell them it's definitely going to be a transition. Like expect that your child is going to cry at drop offs for the first at least a week or up to two weeks maybe. And it will slowly get better...we tell them that because we don't want to set the standards too high. I mean it's kind of unrealistic to tell them that their child is not going to cry and that they are going to be happy as soon as they start...it's going to be very difficult (Dawn).

At other times, the family needs reassurance that everything is happening as it should. "...you might leave your child and they are crying and when you come back, they might be crying. But we promise, they haven't been crying all day long. This is why we take pictures (Fran)."

Relationship building is not always easy as was indicated by three of the participants. Fran discussed two mothers who struggled with the process. One mother, in particular had a

hard time accepting that the care her daughter was receiving met her expectations. Fran worked hard to try to meet the needs of the family and to win over the trust of this particular parent.

I can think of a couple of mothers. Different families. That both of them were extremely anxious and one of them ended up being a great ally but at first it was very difficult because she was questioning everything. ‘Do you put enough bum cream? I like it done specifically like this.’ And it took a while for us to get everything. And I think it just took Mom some time to get to know us and once that happened, it was a lot better for her (Fran).

One of the most important aspects of building and maintaining relationship with the families of infants in child care is that sometimes personalities or approaches are not always the same. Oftentimes, situations or conversations are shared that offer a new insight into the roles that the ECEs play in the lives of the children in their care. Amy and Dawn spoke of two fathers with whom they found it difficult to make a connection with or even just have a conversation. Amy shared how documentation had an impact on the one father.

We also had a similar dad in our care and so we did a piece of documentation that was in his child’s voice. So we wrote it as if he was saying it from our observations. And when he read it, he thought...he told us that he felt like we must really know him [the infant]. To be able to put ourselves in his mind to think about maybe what he would say about his day. So there’s all those little things you can try... (Amy).

### **Organizing theme: ECE Reactions**

The next organizing theme observed in the discussions was about ECE reactions or perspectives regarding the role that they play in transitioning families and infants. From the first



conversation to the last, it was apparent that these ECEs felt that their work responsibility was in helping infants and families become comfortable with them as individuals, with the environment of the child care program, and with the care that was being offered.

The ECEs relied heavily on what they knew of child development and developmental theory in order to work effectively with infants and families. These perspectives were shared in dialogue not only about how the information guided their decision making but also so that they could help provide assistance when necessary. In one instance, Gail shared that her knowledge of developmental milestones offered her a unique opportunity to support a child who had not been in an environment where she was encouraged to do a lot for herself. In this scenario, the family had the belief that it was their responsibility to meet all the infants' needs in order to show their affection for her. The ECEs then worked to create an environment that was supportive for the infant and allowed her opportunities to become independent and to "catch up" to her peers.

So this little girl was about a year when she started and she wasn't feeding herself and she wasn't sleeping in a crib and she wasn't taking a bottle...so we worked slowly on...offering her a cup...Mom still wanted to come in and nurse and that's fine...she [couldn't] come in and wake her up but we can call you anytime or she would call us before she was going to school...but that was a big thing we established. That we are not going to wake her because she needs to sleep. She is stressed out and sleep is really good for her. And we worked on getting her sleeping in a crib so we don't want to disrupt that....So, we worked hard with the mom on everything...getting her to sit in a chair, getting her to put a bib on...And then the mom started to come to us and ask us how to

start dealing with things at home. It was probably three months before she offered her a whole cracker (Gail).

The ECEs are very aware of how challenging the transition to child care can be for the infants and they take their responsibility in helping them to feel safe and secure, seriously. Carla clearly recognizes how the babies may be feeling. “Some of them...are scared from everybody when they see first time (Carla).” Amy had a similar perspective and was able to elaborate on what elements of the experience of transition could be new and frightening for the infants.

They might be feeling that their parents aren't going to come back and they are in this strange environment where they don't feel that they are in control. They are not used to anything, the toys, the food, the environment, the other children, the caregivers. They're not used to the voices. Everything is so new and different than anything they've ever been exposed to. You know if you are with your parents in your home for six or eight or 10 months, and then you come to this brand new place, it must be so scary (Amy).

Establishing rapport with the parents was discussed a great deal by all of the participants. For at least three of the educators, the discussion of establishing rapport with the families included that they had begun to share more information about who they were as individuals with the families as they were getting to know them. The consensus was that letting families know how much experience they have working with infants can serve to be a source of comfort for them. They have also recently begun to share more about who they are as people.

I find it helped when I was doing my intro [to the infant program]...I never really spoke much about myself. Like I never told them basically anything about myself other than that I was in the infant room for x amount of years. I found I started telling them a little

bit more about myself...not a whole lot, a little bit. And I found that this kind of allowed them to open up (Ellen).

Gail and Amy also spoke of sharing with new families some of what the experience was like for them as parents when their own, now older, children came to the infant program where they worked. For these ECE parents, their perspective was that this experience gave them and the new families a type of connection in a shared common bond or understanding.

The biggest thing for me, working in the infant room is that I have two boys and they both went to the centre. So I feel like one...benefit that I have for families is that I understand how they feel because I had one child...and he was always upset. And the people that I work with are like my second family so I trusted them but still I could hear my child crying all day. So when the parent is standing in the window crying because their child is crying, that was me. So I feel like I have that level of understanding that I can offer them to make them feel better because I have experienced it (Amy).

The commitment that these ECEs disclosed regarding supporting the infants through this challenging time was evident in their dialogues. On quite a few instances the ECEs addressed that they would do whatever it took to help the infant settle and help calm their crying. In this example, Amy changed the schedule and created an environment and familiarity that one baby liked.

He is quite upset when they leave but he does settle and he does like to go for walks so we make sure that is always part of our routine. The days that he is there, we make sure that we go in the stroller and we try to keep the routine the same...he just doesn't like the transitions so we try to keep them to a minimum. We do lots of singing and he...there is

kind of one little space that he seems to like so we make sure that that's available to him with some things that we've noticed that he likes... We keep those close so he is seeing the same things when he comes, then maybe he will be more content (Amy).

For Kelly and the colleagues at her centre, the focus was on comforting infants who needed reassurance that they were safe. "It was getting them settled enough and you would find other teachers would walk in [to the room], and the owners would walk in and everybody would grab a baby. So some days there would be like 5 of us, all rocking different babies. And once you got them settled, it would be great (Kelly)."

### **Organizing theme: Program Requirements**

Throughout the course of the discussions with the ECEs and when asked directly about tools and strategies they use to support the transition process, many similar themes and ideas were recurring. The most discussed tool for supporting families was clearly using some variation of an introductory period or orientation to the infant programs. All the ECEs indicated that this practice was not only supportive of the families as it allowed them a gradual introduction but also because they had a better sense of what child care was about and how the ECEs would be interacting with their children. The differences in this process was the variation in how it was offered in different programs or even if it was a part of transition. Most popular orientation processes began with a visit that varied in length from a few hours to a morning. In most cases, the families stayed with the infants and in one case, the ECE would encourage the family to leave "...to go get a coffee and come back (Julie)." For all of the ECEs, the second day included the infant being left in their care for a specific amount of time but not a full day and then this length of time increased each day. For most of the ECEs, this introduction or orientation took the most part of a week (three to five days). One ECE shared that it was up to

the parent if they wanted to spread this out more... “You don’t know us and you are more than welcome to spend as much time here as you like...just getting to know us and the room and seeing how everything is run (Gail).” The difference for the remaining ECEs was that it was up to the families if they wanted to participate in this process as it was not required although it was highly recommended. If a parent declined, the child was accepted into the infant room on the first day for a full day with no family support other than the drop off in the morning.

In some programs, particular attention is paid to the initial visit at the centre as it is viewed as being crucial to relationship building with families. In this scenario, the team will work together so that one ECE is able to sit with the family for an extended period of time. This enables them to collect valuable information that will support building rapport with the family as a whole. “...when a parent comes in we sit with them for like two hours and you know, [ask them]...tell us your child’s schedule, how do you get them to sleep, how long? (Gail).” At least one other ECE stated that they had an open door policy as well and that families were invited to come at any time. Two other programs shared that due to their location, it was not feasible for parents to physically come visit or check on their children and one ECE shared that her centre had cameras so the family could have a visible check in on the infant program.

Individualized schedules seemed to be important to the ECEs as a way to meet the needs of the new infants. Observations of the children and information shared from between the family and the ECEs allows the educators to get a good idea of what the infants are accustomed to and what their needs are. Amy shares how this is a big part of the program at her centre.

Communication is huge...There has to be a lot of conversation with the family and making them know that you want what is best for their child and you want to learn about them and what their routine is. Because the biggest thing is when an infant comes to a

child care centre is we try to do as much as you can that they are used to. so they are not coming to you to fit into your routine, you're...I feel [that] you should be trying to figure out what works for them and what they are used to and do that for them. Meet their needs (Amy).

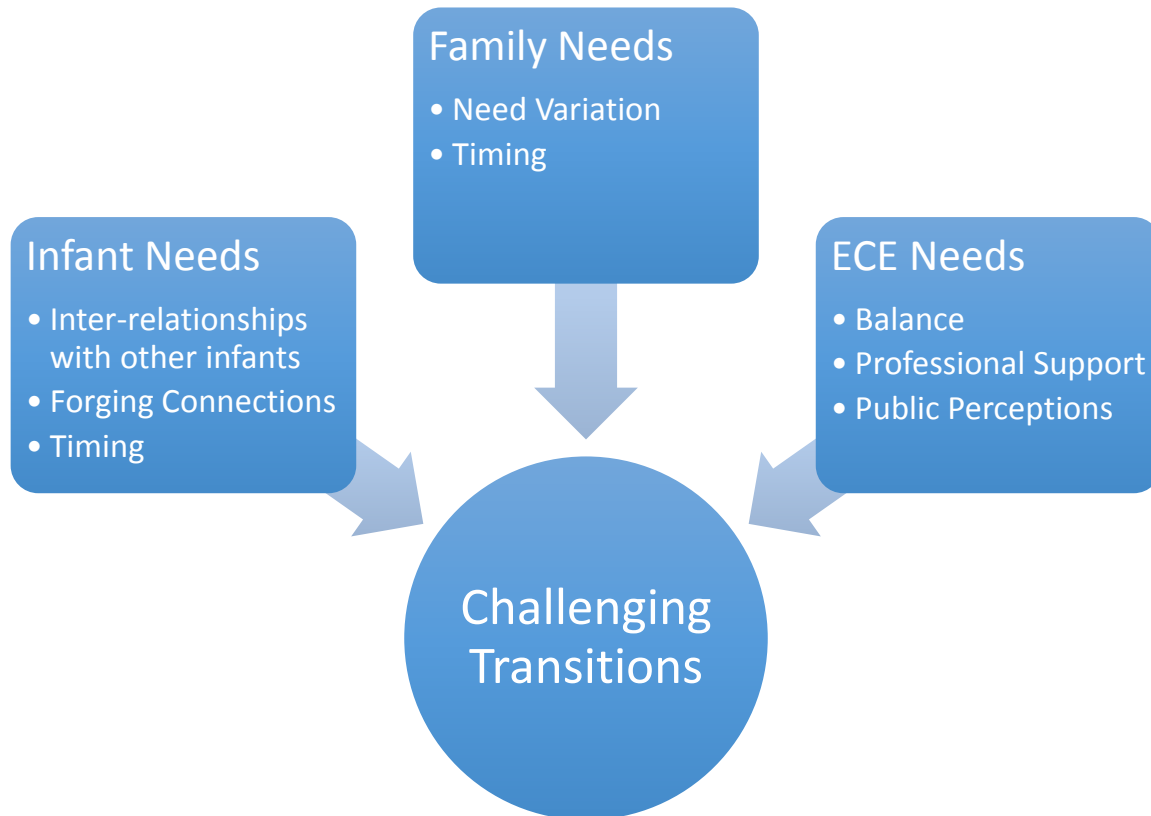
Another example of how individualized care is supported for infants was regarding infants' differing connections with ECEs and how part of their job is respecting the child enough to give them opportunities for this and not to overstep boundaries.

We've had children that come in and they want nothing to do with us and they just want to be in their own little bubble and do their own thing. And they are completely fine with that and that's okay. We will leave them and that's what they need right now. When they need us, they will come to us. It's just all getting to know the child (Dawn).

The significance of communication that Amy referred to in order to learn everything she needs to know about a child's routine was identified in every focus group, by each ECE and in many different contexts. "We don't want a child come and we just don't know what to do with the child...obviously asking questions is where that comes into play. Getting to know what they like. If we didn't ask any questions at all than we would have a child and we wouldn't have any idea at all what they like, what they need (Dawn)." All of the ECEs felt that the most important part of their program that was useful to establish a strong, positive relationship with a new family and thus a successful transition, was their ability to communicate well with them. This requirement does not stop as the child and the family's comfortability with the ECEs and the program is established but is something that continues as the relationship grows.

**Global Theme: Challenging Transitions.**

Further examination, organizing and coding of the research results collected in response to the interview questions directed the researcher to the second global theme that became evident: Challenging Transitions. It is very important to establish that the ECEs did not find the transitions with the children and families to be challenging because they were unsuccessful as the reason was quite the opposite. In most cases, when describing what the ECEs deemed to have been challenging experiences, the outcomes were positive and meaningful. They also seemed to be the experiences of which the ECEs were most proud. What caused these experiences to be categorized as challenging was that sometimes it was very hard for the ECE to support all or everyone who needed it at the time and sometimes that the lack of support was not there for the educator. The three main organizing themes that came from this category were: The infant needs; the family needs; and the ECE needs.

**Figure 4.2 Global Theme: Challenging Transition****Organizing theme: Infant Needs**

A few times during the sharing of experiences of infant transition, the ECEs spoke of how challenging it can be for other infants already participating in the programs when new children join. Holly spent quite a bit of time describing a scenario that she had been part of where three new infants began at the same time. Two of the infants were quite upset and cried a lot. The reaction that the other infants had to the children's cries was very intense so Holly had to not only find ways to soothe the baby that was sad but also the other children who were



responding to the sadness. She shared that she did not think this crying was empathetic for the crying child but more of a strong aversion to the sound of the crying.

...last September we had three new babies start at once and two of them were...didn't adapt well. They screamed and they had a very high-pitched scream. And the other children didn't like it when they cried. So as soon as they walked into the room, they started screaming and the whole room started screaming...they get very distressed. Even now if they cry, a couple of mine will cry and it is a very distressed cry. It's a very upset cry...and as soon as they are not in the room or you get them stopped, it's mellow again (Holly).

Earlier, we discussed scenarios where ECEs had children react to them in a negative way. Both Betty and Amy shared stories of infants with whom making a positive connection with was challenging. In both cases, they had to work hard to establish a sense of trust and acceptance for the infant. This was a hard process for them as they really had to reflect on what the child needed and not on themselves. This was also not a usual response for them and it brought out some strong reactions.

It felt really uncomfortable at first because I wanted to know what I was doing wrong. But then through observation and figuring out what it was all about, then I felt empowered to know that I took my own needs, put them aside and figured out what the child and the family needed. And once I stepped back and gave him she space, I felt really good about being able to do that for him so that it could be positive for him (Amy).

A few times during the conversations with the ECEs, the question of time or insufficient time came up as being a challenge to establishing a strong relationship between the ECE and the

family. As has been clearly established, the job of the parent who has a child that is finding the transition from home to childcare extremely stressful, is potentially both painful and emotionally disturbing. In some cases, it seemed to the ECEs that the parents could not cope with their child continuously crying and they chose to withdraw them before the child was able to settle into the program. This was shared by Ellen as she explained her response to a mother's news that she would be withdrawing her infant during such a scenario. "...we just got her...she just got settled in. Are you sure you don't want to give it another try? (Ellen)." A similar situation came up for Gail as she spoke of a family who were taking their child out of the program to travel as a family for an extended period of time, just as the child began to settle into the program.

And then they went back to [country] for the summer. Mom was done school so they went back to [country] for the summer. We were like noooo! Because she was coming back in September and we knew that it was going to be the exact same situation with her going into toddlers...sometimes you almost feel like you are swimming against the flow... (Gail).

### **Organizing theme: Family Needs**

During the consideration of the global theme of Challenging Transitions, exploring the needs of the family became very important as an organizing theme. There were several scenarios that were shared by the ECEs as examples of times when the needs of the family were not something with which they were familiar. By discussing this as a challenging transition does not mean that the family's needs remained unmet but quite the opposite. The ECEs went out of their way to find information and increase their learning in order to effectively support the family. The scenarios were deemed to be challenging because they made the ECEs very reflective of their role in supporting the family and it was hard work.

Two of the ECEs spoke of how they found that offering infant care on a part-time basis was very challenging for all those involved. One ECE discussed that it was hard for her because she was not used to this type of attendance but she did not consider that to be a negative as she merely needed to increase her familiarity. She indicated that she felt that it was difficult for the infant the most as there was a lack of consistency of when he would be coming to the infant program and when he would be staying at home with his father. This child was very upset and stressed whenever he went to the infant program and the ECE thought that this was impacting the length of time that the child needed to settle in and that it was taking much longer. The impact on the family of course, was that the parents were feeling helpless and worried for their child so they were considering withdrawing him from the program. In this quote from the ECE, she explains that the family accepted the position and made their choice about attending as they would not necessarily have another space when they required it at the end of the father's parental leave.

So he comes Tuesday and Thursday only in the morning and he goes home after lunch. Every time he comes, I feel that he thinks he is starting all over. I don't feel that he remembers a lot of his experiences when he is there. He is ten months old. And it is difficult as an ECE to build that rapport with the family and also to have a relationship with him. And so for me it is a huge challenge because my personality is that I just want to be friendly with everyone and make families feel comfortable and have that bond with the child and figure out what makes them happy when they come to our room and it's difficult when he only comes two days a week. And he is feeling most of the time when he is there, he is feeling upset because he is not sure why he is there, I think. So it's been challenging and also the family is very nervous about the childcare experience and

they're very worried. You can see that they are very worried and so even though we keep the communication open and we answer all their questions and we give them all the information that we can think about how his day is going and what we think is working, and all of that, when it is only two times a week, it is a much longer process (Amy).

Another family circumstance that can add to the level of difficulty the transition a family is encountering, came up as Betty described that she has worked with a family who has been going through crisis. In this particular case, the custody of two children was removed from the parent and given to the grandparent. Betty spoke of how unsteady this has been for the children and for the grandparent who is trying her best to be there for the children. Their lives have changed and all Betty can do is to be there for the family offering support. In a situation such as this, the infant program might be the most consistent thing in the baby's life.

But I think so there is some family problem or something where they are not allowed to see [them]. So these two children, we had routine before...so it was really, really hard [following the crisis]...because one month he did not sleep in his crib....But the grandma is so good. She is really, really caring person and she is almost crying when she is leaving them...but it is these poor children...It's little bit like she loves both of them but not like a...how can I say it...to see to them. To do something to improve their behavior or something. She is not telling them anytime, anything (Betty).

In all three of the focus groups, the topic of infants with food allergies and restrictions came up. This was identified by all of the ECEs as adding to the stressfulness of the transition process for both the ECEs and the parents. All of the ECEs had experience with this and some of the allergies were more complicated than others. In some cases, food merely had to be excluded from an infant room. For other foods, the risks were much higher for the infant, adding to the

stress for the ECE and the family. Dawn explains the gravity of a situation where an infant joined the child care program who had a severe allergy to milk.

Recently we had a new child start and he has a very severe milk allergy. Very, very severe. So he cannot have any milk products and he has two epi-pens on site. Ummm, I think it was just very challenging because obviously it is group care and they are bringing their child into a situation like that where obviously the environment is controlled but only to a certain extent. So we didn't have really any experience with this before it was just a challenge for us to try to figure out our routine again because he has to be in a highchair so all of our other children are at tables, in chairs down low. So he is at a highchair and unfortunately he has to stay in the highchair until all of the milk products are cleaned up. It is very difficult to transition the family as well. I mean we can tell them that obviously we are going to make every possible arrangement to keep their child safe and try to make them feel as comfortable as possible (Dawn).

When asked about how she felt during this time, Dawn's answer was reflective of the emotional response that she had had. "I think it is scary. Definitely scary...you always have it in the back of your mind like oh my goodness if I mess up even the slightest little bit, that is a child that needs to go to the hospital. That is very terrifying (Dawn)." In Ellen's focus group, she also shared the complexity that is added to a mealtime routine when children have allergies and foods have to be avoided or restricted. In this example, she spoke of how strategic she had to be for exploring how to feed a group of children while keeping everyone safe. "...And one child was allergic to the same things as my wheat child [allergic reaction to wheat]... but my wheat child was allergic to more than my other child. So I always did my wheat child first and then my other child and then everyone else was dished out. And I had shelves with the food on it and it was just

confusing (Ellen).” All of the ECE’s seemed to be able to relate to these processes and emotions as they understood how serious an allergic reaction can be. “Every time I go to give someone food I am just like ‘are you allowed to eat this? Let me just check my list (Gail).”

### **Organizing theme: ECE Needs**

All of the ECEs who participated in the study, showed such commitment to the work of providing for positive transitions for families to transition to child care programs. They identified that sometimes the work is like a balancing act. They are not only supporting the new infant and their family but at the same time providing the same level of quality of care for the other children and families enrolled in their programs. “So it is really, really hard for us because with eight children and like you want two months after new child coming, new child coming all the time (Betty).” While considering a similar train of thought, Fran spoke of using her environment to support the needs of the children in the group as a whole as her attention sometimes needed to be with one specific child.

So sometimes I feel like we need more than that, like especially if we...have some children like...you need more hands. Sometimes you are dealing with that. You can’t do the normal thing [for programming]. You have to set up your classroom really well. Make sure that it is good for them to play with so you can attend to the needs of that child. And hopefully your other co-workers are on board which I have been lucky so far that they have all been great (Fran).

Further consideration and exploration of the research study perspectives of the ECEs, identified that the most prominent challenges that the ECEs felt impacted their ability to do their work well were: the ability to consistently meet the needs of the infants while still fulfilling job

requirements and ECE consistency. Even when sharing elements of the work that they felt made it hard to accomplish their goals, the ECEs persevered and always considered their experiences with a positive outlook. The reality is that this can be hard work even if it is rewarding. Some of the ECEs shared that they sometimes struggle with the responsibility of establishing relationship and that when children are stressed and upset, it can be emotionally hard for them as adults even though they try not to take it personally. “It can be very hard to struggle through a day of children crying and you have no idea why. Like, sometimes you can go home and you just want to cry. But you fight through (Dawn).” In her focus group, Fran shared similar thoughts. “Sometimes you feel defeated especially if you’ve got a screaming child every day in the morning or all day...yeah. It can be really stressful (Fran).” For Ellen, this balance came from not having enough time to fulfill everything that was necessary in the work. “Just finding time to do it all (Ellen).” All of these responses had to do with the stress of transition and the demands of the work of being an effective ECE. Fran also shared her thoughts on this perspective but also drew attention to the daily responsibilities that compete for her time and attention as well. It is also important to consider that Fran speaks of completing this work, bonding and daily tasks, while not having her consistent co-worker with her.

Today was laundry day. That makes bonding harder and we had a sub who couldn’t speak English very well. That makes bonding a lot harder too. To try to get things done and they don’t know the routine and it’s harder to tell you what the routine is as well. Sometimes they just don’t understand. That makes everything harder too. The little...and tidying. Like, I don’t mind putting some things away but sometimes scrubbing or...like, I had my boss come in one day and she was like “oh your table is a mess” and I was like

“yes, it is”. And I am playing with this child here because I don’t care about this table. I care about this child (Fran).

This idea of how necessary yet sometimes challenging it can be to work with a teacher who is not consistently part of the ECEs infant teaching teams came up a few times in the focus groups. In the following example, Gail acknowledges how substitute staff may have the best intentions but just not knowing the children, routines or needs can make it more difficult for the ECEs.

That is challenging sometimes, because we’ve had...you know, sometimes you get subs [and] they want to do a really good job and they want to be fast and efficient so you are like nooo! Here’s our list. He can’t have milk and we do this, and we do this...and it is sort of just making sure that everything is where it needs to be... (Gail).

While some of the other ECEs shared that they found it very difficult to work with substitute staff, they did acknowledge that they need someone to help them out and to follow regulations of how many adults were required to be working with a group of infants. In some scenarios, the substitute did not know how to support the ECE, the infants or the program and this added to the responsibility and the work of the ECE. As shared by Holly, who an experience of a particularly trying week with two new children and a substitute teacher. “So, back then we had the two [crying infants] in particular that would cry and that particular week, the week they started, it was me and a substitute. So I didn’t have...she was a body in the room (Holly).” This is especially trying as Holly was attempting to establish a connection with the two new infants as well as to meet the needs of the other children already enrolled.

In one focus group, Julie and Holly were having a discussion about having teaching vacancies in programs before there were eligible new ECEs to begin working with them. The dialogue that they were sharing was about how they had been asked to work with a substitute



teacher who perhaps was not as skilled or educated as they would have preferred, while they waited for the new ECE to begin.

That's hard too. When they tell you, we've got somebody for you, you just have to deal with this one...at one of my old centres, it was like that. For a while I was in a room with 8 [infants] and it felt like it was just me. And part of you is like, okay, I got it, I can do this and then there are times when it is like, okay, I can do it but I don't want to have to do it (Kelly).

Julie also shared this sentiment as she described a conversation she had had with a substitute teacher who was reluctant to work with Julie in the infant program and was openly complaining about how she did not like this aspect of working at the child care program.

I had this topic one day with this person and my exact words...nicely were maybe you should find a new job. Because this is my job. I love it because I enjoy being with the children. I enjoy watching them and seeing how they are growing...so if there is anything negative in my room from you about my kids...you need to take it outside...keep your negative thoughts to yourself about the infant room (Julie).

Outside impressions or opinions of the work that these ECEs do and value every day, was another prominent theme that came up while analyzing the results. Various ECEs in each of the focus groups spoke of how they felt that their jobs were misunderstood or even misinterpreted. They also sometimes shared statements about feeling that their career was not valued as a profession. Dawn felt that this can come from the parents who do not seem to appreciate all that is required to care for the needs of the infants and to provide for their overall well-being. "You do get the occasional parent where you do feel like that they think they are above you...but

maybe they have like a high-paying job and they just feel like they are higher up on the totem pole than you. And you're just the person who looks after their kids. That's it (Dawn).” Some of the reactions that the ECEs felt occurred for them from others, surprisingly came from other ECEs who work with different age groups of children. Many of the ECEs shared statements or pieces of conversation that they had heard from others that reflected misinterpretation of the importance of their role with infants and families. “The infant room is definitely not for everybody. I have definitely talked to a lot of people in the field who just do not want to go in the infant room. That they say right away that that's not my cup of tea. I don't want to go in the infant room (Dawn).” The ECEs shared that some of the misinterpretation about what the work of an infant ECE had to do with what happens in the room during the day and the programming that is offered to the children. According to Ellen, she hears sentiments about people not wanting to work with infants. “The infant room I find really hard...even with subs that don't want to work in it. A lot of them are just afraid of the infants (Ellen).” The focus group with Carla had a similar conversation about the lack of programming that other colleagues believed occurred in the infant room and how the role of the ECE was misinformed. “That's exactly with us too. What are you guys doing? All day, nothing. But they are not thinking that we are building their base, right (Carla).”

In one scenario that Holly was sharing, she spoke of the challenge of supporting newly transitioning infants who were having an extremely stressful nap experience. She was attempting to support them each day by offering comfort and being near them as they cried. She shared how trying it was when other ECEs in the child care program expressed their frustration and perhaps ill-pointed anger because the crying of these infants was impacting their routine and their children.

It's a drop ceiling so when they start crying, they wake up the other classrooms... so I created two nap rooms just to accommodate the other children including the other classrooms [of the centre]... Well when you start hearing the other rooms pounding on the walls... that's not including the texts they send (Holly).

When she was asked how this reaction made her feel as an ECE her response was clear that it was unsettling. "...it's frustrating because they know what is going on. Their children aren't quiet either. It's almost like their children are more important (Holly)." Amy felt that this challenge regarding the opinion of the role of ECEs was a systemic problem that exists at a societal level as she described possible public perception.

There's also that feeling that is still out there, I feel, in society as a whole that people don't understand our job. I think people don't value what we have to offer and although you would hope that it's not as it was years ago, there is still those families that don't value what you do. They don't see you as a professional and when you take your job very seriously and you are trying to do the best think that you can do and you feel so... you feel like what you do every day is so important. You are laying this foundation for children and every choice that you make and everything that you say and everything you do with them is affecting them in some way positive or negative. And hopefully the majority is positive. It's hard as a person to know that people don't see that and don't understand that (Amy).

Based on all of these observations and experiences that were shared in the research study results, it is clear that the ECEs not only take their role as a support to families and infants seriously but that they are professionals. Over and over, they described how they went above and beyond what was required of them so that they could not only meet the needs of each family

that they were working with but that they could exceed them when establishing relationships. These close connections supported the infants and the families through the transition to child care programs and they continued to offer support and care the entire time the children and families were enrolled in their programs and sometimes even longer.

## **Chapter 5**

### **Discussion**

The purpose of this study was to examine the perspectives of ECEs regarding why and how they build and maintain relationships with infants and families who are entering a child care program. The experience of the ECEs who chose to participate offers an insight into not only what these educators believe to be important about the transition process but also how to support families in order to be successfully integrated into group care. In order to understand the perspectives of the ECEs, the focus group participants answered questions, reflected on their experiences and beliefs, listened to each other and often offered feedback to each other. They shared a similar education and seemingly similar type of work and commitment to offering quality care to the infants and family who came to them. The ECEs had no prior knowledge of who would be in the focus groups and possibly had not met each other before this opportunity arose. Even so, their responses about what their role is in establishing relationship with infants and families as well as the practices that are supportive of this, were very similar and very informative.

As the well-being of young children in group care is dependent upon the relationships that exist between the parent, child and the Early Childhood Educator, it is essential that the ECE's have both an understanding and an ability to establish strong, trusting relationships. Not only was this statement clearly supported by the reflections of the ECE's in the study but it was also evident that these educators were committed to supporting quality infant care, which is very important work (Abner et al., 2013; Hill, Waldfogel & Brooks-Gunn, 2002). There were four research questions that were intended to be answered by the data that was collected and analyzed. As will become apparent, all were answered clearly and meaningfully.

### **The ECEs belief about their role in developing relationship with infants and families enrolled in their child care programs**

The results of this study were clear in demonstrating that the ECEs understand their role to be significant in relationship building with infants and families. The first consensus was that the family needed to be supported as a whole in order to have a successful transition. The ECEs clearly articulated that in order for children to be at ease in the childcare environment, the family had to have the same comfort level. It was stated on many occasions that if the parents were not comfortable, the children would not be comfortable. This belief is consistent with current research regarding parent needs during transition to child care (Marshall, 2011; Wilson, 2014). In order to be successful, the two entities must be supported at the same time.

Circumstances often do not allow adequate time for the family to be in the child care environment together so the ECEs work on different levels to support transition of the family, in the same time frame. For the infant, the ECEs all shared that their main goal in creating a relationship with a new child was establishing a sense of familiarity and eventually a sense of security and trust. Warm, responsive teacher-child relationships are one of the indicators of quality and so these results indicate consistency with current research findings (Forry et al., 2012; Martin & Berke, 2007). In order to form this type of relationship, all the ECEs used a gradual approach when first meeting the infant. At other times, they noticed the need to physically withdraw when it became clear that the infant was not ready or accepting of the advances. In such instances, they stepped back to allow the child more space or to support infant's need to be with another caregiver. Time was the main indicator of success as gradually, the infant showed less signs of stress and anxiety and increased acceptance of the care that the ECE was offering, and they were all willing to support this.

The second finding that came from discussion of the ECEs role in relationship building was that specific support for family needs during the transition period had to be accepted and supported. It was clearly demonstrated that it was recognized how much the parent relied on the ECEs ability to connect with the infant. If the parents could not see their child settling into the program, it could negatively affect their ability to fulfill their own roles and responsibilities. This belief is consistent with current research regarding parent needs during transition to child care (Marshall, 2011; Wilson, 2014). In addition, families had specific needs of their own such as communication and transparency in what parents could expect for their infants while in the care of the ECEs. Such practices have been identified in research as being consistent contributors to an effective ECE-parent relationship (Abner et al., 2013; Hill, Waldfogel & Brooks-Gunn, 2002).

An additional finding that emerged from the research results about ECE beliefs and relationship building was a recognition that all infants are unique and have individual needs. While some infants only need a short transition to adjust to this new experience, others needed a great deal more time and patience and this was clearly articulated by the ECEs. This is similar to current research that outlines how new experiences and stimulation that the child is uncomfortable with can lead to adverse outcomes, if the educator does not intervene (Boyer, 2008; Klein et al., 2010). In many cases, the ECE's spoke of examples of situations where they needed to either step up to care for the infant or to step back and allow another educator to support the child, consistent with best practice. This was challenging for some, as all of their reflections spoke of their desire to help infants feel safe but in some cases it was clearly established for them that the infant did not respond to their invitations.

In other experiences shared by the ECEs, the unique needs of the infants became known as the ECEs responses to the child were not conducive with what the infant wanted or needed. Martin and Berke (2007) shared research findings about the levels of responsiveness of ECEs that are consistent with the practices and beliefs of these participants. One element of being a responsive caregiver is to recognize and support individual needs for care, communication and receptiveness (Martin & Berke, 2007). In this study, the ECEs put their own needs and desires behind what was important for the infant and encouraged whatever pathway seemed to be more effective and beneficial.

Finally, the evidence shared that demonstrates that the ECEs feel they play a significant role in relationship building is in the information sharing that takes place with families. It became apparent in the study results that ECEs viewed sharing information with family members as being a source of providing comfort and reassurance. This process varied from facts offered about the infants' day to knowledge shared about child development. When the ECEs spoke of information sharing it was as a means for helping the family know about the programming in which the infant would participate. It could also be information shared about the infant's reactions and emotions that were observed during the parent's absence. On other occasions, it was general themes of child development perhaps as what to expect as the infant grows or how to help the child reach developmental milestones. All types of information sharing supported building connections between the family and the ECE and indirectly supported the infant as the comfort level of the parent increased. Consideration of all of this information collectively does answer the research question of what the ECEs believe their role is in developing relationship with infants and families. In the end, the ECEs who participated in the study felt that this role was important to overall child and family well-being.



**ECEs use their knowledge and understanding of transition and the effects of stress on the child and family to guide their decisions of how to establish a relationship.**

From the results, the first indication of ECE knowledge and transition was in the sharing of comprehension of transition stress. The ECEs described experiences of the challenge that transition can bring for infants and families that were sometimes traumatic to all involved. These episodes were both meaningful and emotional for the ECEs to share. They believe that their main objective in the work that they do is to build relationship and support families. When a transition is challenging, this conflicts with the ECE goals and intentions. The ECEs are very aware that being in a prolonged stressful state can have a negative impact on infant well-being, as is evident in research (Boyer, 2008; Klein et al., 2010). If it becomes apparent that patterns of behaviours are not effective in new transitions, the ECEs will seek to find alternate concepts to try. Some examples of methods of altering practice to support new families were: seeking out other ECEs whom a distraught child might connect with; modifying the infant environment or the routines that infants are participating in; and seeking additional learning opportunities for the ECEs if they were unfamiliar with new, trendy baby rearing practices. The ideas or concepts may be new but the philosophy behind the ECE interactions with the infant and family as a whole are based on best practice and teacher responsiveness. This knowledge and perseverance is reflective of the ECEs education and is also indicative of a high quality environment (Abner et al., 2013; Hill, Forry et al., 2012).

Secondly, the ECEs all shared that they had specific education in early child development that supported them in establishing relationship with families. This ranged from a two year diploma to a four year degree. What all of this knowledge lends to the ECEs, is a clear comprehension of overall child development and the highest quality childcare cannot exist

without this (Abner et al., 2013; Hill, Waldfogel & Brooks-Gunn, 2002). In addition to this valuable education that these ECE have, they all also spoke of hands-on learning that they have gained over the years of working with infants. For this study, the years of experience for the ECEs ranged from 3 to 17 years, working directly in infant care. This learning consolidates their theoretical knowledge and enables them to be well-rounded ECEs. It is also where they learn from other colleagues which was shared in more than one occasion as the ECEs shared how they know the most effective ways to interact with families. Being mentored by an ECE with more experience is influential. In some cases, the ECEs shared that they were actually being mentored by infants and families. As was previously stated, each family has a unique composition and life experience base themselves so this learning of how to interact with infants and families is a constant cycle for the educators.

Learning and experience supports the ECEs knowledge of developmental stages and milestones as well as around the age that children will typically reach them. Being educated in child development enables the ECEs to support infant development by engaging them and offering opportunities to practice newly emerging skills. The ECEs will also be able to recognize when the infants require challenges that will help them to continue to learn and grow as is demonstrated in current research (Boyer, 2008; Klein et al., 2010). All of these practices and beliefs that the ECEs are demonstrating are consistent with research that is accessible and available as being tools to provide infants and families with the best possible outcomes.

Finally, the evidence that the ECEs are knowledgeable of the potential stress that transition can bring to a family came from their goal of becoming attuned to the needs of the infant. With attunement, as described by Beck (2013), the ECEs used a variety of methods to learn about the personality and preferences of the infants so that they are able to intervene to

offer support, before high amounts of stress occur. To gain this perspective, the ECEs described the use of a variety of means for increasing their familiarity with the infants and families. This was accomplished through open communication, observation and documentation, and in trial and error as they made note of infant reactions to specific scenarios. The learning outcomes enabled the ECEs to make small connections with the family which increased in duration and size over time. The connections also increased with opportunities as the infants and the adults in their families grew to connect and trust the educators consistent with current beliefs in the field of Early Childhood Education (Boyer, 2008; Cryer et al., 2005; Forry et al., 2012). The ECEs shared an understanding that every child was different so practices that were effective for one child were not necessarily going to be effective with another (Martin & Berke, 2007). The ECEs spoke of specific examples of attempts to comfort the children and all of the different avenues that they would try, offering the child food or bottles, rocking them, cuddling them, taking them for walks, playing with them and offering them toys, etc. For this particular research question regarding education, experience and decision-making for the ECE, it is clearly evident that the ECEs base decisions on a sound knowledgeable background. They will continue to make attempts to increase connections with infants and families until they are successful and they never give up.

**Early Childhood Educators promote strategies or practices to help infants and families feel secure and safe with them as they begin the transition from home to child care.**

In all three of the focus groups, the ECEs shared examples of strategies or practices that they have either established or learned from colleagues that are supportive of infants and families during transition. The first, effective strategy that was consistently described is open communication. The ECEs have a deep understanding of the need to communicate effectively

and continuously with the families who they are establishing relationship with. This open communication was accomplished with a variety of methods and included both verbal and receptive endeavours. The information collected demonstrated that there were definitely moments during each day when the educator made themselves available for information sharing on the part of the family and for responding to questions or offering clarity for concerns. Sharing information or stories about what occurred during the day in the infant program was also seen to be incredibly important to the ECEs and the families, as well. Communication is crucial to relationship building and instilling a sense of trust in a family as we have learned from research and this was clearly evident in the work of the ECEs (Ebbeck & Yim, 2009).

All of the ECEs spoke of supporting an introduction or orientation process for the infants and families as they began their transition to the child care program. As with current research, the practice is regarded as being beneficial for everyone involved (Mann & Carney, 2008; Zellman & Perlman, 2006). Contradictory to research that promotes a standard introduction to infant programs by families, the practice or flow of this orientation was not consistent for the ECEs (Ahnert et al., 2013). In this study, the ECEs all spoke of different applications although some of the practices were similar. Even though this is inconsistent with current research supporting the overall benefits of a structured orientation, the ECEs either found success in what they were practicing or they recognized that it could be improved (Mann & Carney, 2008; Zellman & Perlman, 2006).

Much of the descriptions of the orientation phase began with an initial visit to the program with the family and the ECE. This allowed for the child to become comfortable and from the sounds of the experiences, for the educators to find out what the child was used to and what the parents wanted for their children. This is consistent with best practice in the field

(Ahnert et al., 2004). Another goal that this visit facilitated was that the families could see the ECEs engaging with other children and to help them have a clearer understanding of what their infant's day would be comprised of. The family could also see first-hand, presumably what a high quality infant program should look like (Abner et al., 2013; Hill, Waldfogel & Brooks-Gunn, 2002). The next step included opportunities for parents to leave their children with them for shorter periods of time to longer ones that occurred over a period of between 3 days and two weeks. The ECEs really valued this process as they felt that it was beneficial for all of those involved in the transition including the other infants who were enrolled in the program. In some cases, the introduction phase was not required of the families although the educators spoke to the families about how beneficial and important it is and they encouraged this to happen. For a variety of potential reasons, some involving work schedules, it did not always occur and the ECEs described how difficult the process was for the child and most likely the family as a unit.

Another important practice that emerged from the discussion and is supported by research of Ebbeck & Yim (2009) is the use of a primary caregiving model. In the results, one of the ECEs described that her centre was using this model as a means for caring for infants and families. For this centre, this involved one specific educator making the initial contact with the child and the family and then being the primary person to provide for approximately 2/3 of the daily care needs of the child. This practice is similar to models promoted in current literature (Ebbeck & Yim, 2009). The ECE found the practice to be beneficial as it helped to establish a strong relationship and encouraged the educator to learn important information about the infant and the family.

Other ECEs did not practice this method in particular but most of them provided a variety of levels of individualized care as is also deemed as being relevant and important in research

(Martin & Berke, 2007). This seemed to range from centre policies that encouraged learning about the child's daily schedule and mimicking this as closely as possible when the child was at the centre. The other end of the range involved teachers who recognized that children seemed to connect with ECEs in different ways and then they would alter their involvement in order to accommodate and encourage this. For example, if a child seemed to prefer one ECE over another, the educator did not take it personally but stepped back to encourage the bond that was developing,

All of these practices and strategies were established by ECEs, based on their own education and knowledge gained from experience. Their goal of supporting infants and families through the difficult process of transition is achieved through these means. It is clear that these particular ECEs and presumably the colleagues that they work with are committed to supporting families and making strong, secure relationships with them. It is also evident that these particular ECEs are professional, educated, affectionate individuals who care deeply for the children and families enrolled in their programs which in turn makes them highly effective ECEs (Abner et al., 2013; Hill, Waldfogel & Brooks-Gunn, 2002).

**ECEs do not feel that they have all the necessary knowledge or tools to support this very important work.**

The final research question that this study attempted to answer was about whether or not the ECEs felt that they had sufficient knowledge or tools to support them as they build relationship with infants and families. There seemed to be dual responses to this question from the ECEs. Most of the initial responses were no. The ECEs did not feel that they had enough knowledge. More in-depth exploration led to the distinction that the ECEs did feel that they were prepared in their comprehension of overall child development and developmental theories

as per their education and classification levels (Abner et al., 2013; Hill, Waldfogel & Brooks-Gunn, 2002). In some cases, however, the challenge in this area was not the amount or the quality of the education but how long ago the courses were completed. For many of the educators in the field for the longest length of time, they expressed interest in a refresher course of some type. There was a recognition that research occurs on a continuous basis and what is considered to be best practice for infants and families can change due to this. One of the participants did disclose that they had chosen to audit a course on infant toddler development to support her work as she was transferred to the infant program, but this was in fact some years ago as well.

The ECEs discussed the opportunity of professional development (PD) as being of great value to them in their work with infants and families. The current research that was reviewed to learn more about supporting families through transition to child care did not really address the value of professional development or lifelong learning for ECEs. However, this was inconsistent with what the ECEs valued as they shared that they search for and participate in this type of learning on an on-going basis as a means to improve their practice. There were some perspectives of challenges that came with current professional development that is available to the ECEs during the focus groups. Some of this challenge lies with actual availability and they ECEs felt that there is not always a lot of opportunities to explore the world of infant care as a basis for PD. Another challenge was that opportunities for PD that is focused on infant needs can sometimes be repetitive and therefore not always applicable. One ECE was very specific about how discouraging it is for her when she attends a workshop and the instructor implies that all PD can be altered to support infants. She felt that this was not the case and that professional

development for infant care needs to be more specialized as this is a truly unique branch of the field.

The consensus was that theoretical knowledge is sufficient and beneficial for educated, trained ECEs as is reflected in all research about quality of programming for children (Abner et al., 2013; Hill, Waldfogel & Brooks-Gunn, 2002). The participants seemed to be in agreement that the experiential learning that they receive from practicum experiences or actual on the job training is just as, if not a more important tool to benefit them in supporting infants and families. One participant described a type of internship that she benefitted from upon graduation from her ECE program. She was hired by a centre being run or supported by the program itself and then for the first year, she worked alongside a mentor who helped her in her learning journey. She found this to be a very valuable experience. In the literature review, training as a whole was promoted as improving quality of programming and there was no differential between theoretical and practice based training (Martin & Berke, 2007).

One additional, interesting outcome from all of the focus groups were that different participants shared how much they enjoyed the opportunity to come together with other ECEs who work in the same age group of infant care. They felt that the experience was rewarding in that it had encouraged them to think critically about the work they do and the relationship building with children and families. Some of them also shared that it was rejuvenating as they felt the value of the work they were doing was being strengthened and reinforced. Others also expressed the desire for more opportunities such as this one where infant caregivers could come together for discussion and support.

The entire process of this research study was initiated to understand what the perceptions were of ECEs who work with infants and their families. The literature review informed of what



best practice is and what families can benefit from. The focus groups and the subsequent analysis of the information gathered demonstrated not only what the ECEs view as being supportive of relationship building with infants and families during transition but how they go about implementing supportive practices. These educators were not only caring and supportive of children and families but they were also advocates in wanting what was best for everyone in the transition to child care. All four of the research questions were answered clearly and descriptively and thus the original thesis statement was supported. As the well-being of young children in group care is dependent upon the relationship that exist between the parent, child and the ECE, it is essential that the ECEs have both an understanding and an ability to establish strong, trusting relationships. Not only did these particular ECEs demonstrate that they know how important their work is in this area, but they also indicate how committed they are to ensuring that infants and families feel safe and secure when they build relationships with them.

### **Research gaps and limitations**

Using a qualitative research method to explore the perceptions of ECEs who support infants and families as they transition to child care programs addresses some of the gaps that exist in current literature. This type of study enables a deeper exploration not only of what ECEs think and believe but it also offers insight into where this knowledge came from. Experiential knowledge is unique as it is built over time and as the ECEs share their stories, more learning comes from the explanation of the journey of acquiring the answer than merely the answer itself.

As was previously addressed in the limitations of current literature about infant transition, while there are many qualitative studies that exist regarding relationship building, the challenge lies is that they are relatively small in size (Ebbeck & Yim, 2009; Forry et al., 2012). This limitation continues to exist with the results of this particular research study. While the

information collected did serve the purpose of answering the research questions, it continues to remain that the participant size is small in relation to the field of Early Childhood Education in HRM, in Nova Scotia and certainly in the field nationally and worldwide. The information collected is not always suitable for all contexts and certainly not for all families and children or even all child care programs as they are all incredibly unique and different. This was addressed by the ECEs who felt that each child and each family was unique and in need of some aspect of individualized care in order to forge a beneficial relationship and an effective transition.

Another limitation of the study that would certainly be a challenge to address is that while the ECEs who chose to participate in this study had a minimum classification level (i.e. training and education) as well as a minimum amount of years of experience, this is not the case in every infant program. Educators, while certainly following the regulations that are in place to provide for quality of care, are not necessarily required to complete a degree or diploma in child development. There is also no specific requirement of education or experience that an educator has to have for working with this potentially vulnerable group of children. The criteria of the study also created a limitation in that while ECEs were sought with a particular education, there also exists a group of ECEs who could also share a lot of information about their experiences and knowledge of transition who could not participate. These are the educators who work with infants who hold a classification level of entry or level 1. In addition, the same theory could be applied to ECEs who have less than 3 years of experience working with infants. They also could have valuable information to share for research about transition and relationship building with families.

As previously stated, the current literature available about infant transition to childcare does not include an examination of what the ECEs believe to be important in order to establish

strong, secure relationships with infants. This was an area of research gap that was addressed in this particular study as the ECEs shared their understanding of what transition is and how to support children and families in an effective manner while going through this process. The limitation for this same point is once again about the number of participants. These ECEs shared knowledge that was valuable and informative but by sheer numbers it cannot be applied to every situation. Despite these limitations, the results found in this study are both informative and useful as it is clear that the role of the ECE is crucial in supporting infants and families in transition and in establishing relationships so that the well-being of infants is supported completely and could be useful for many different aspects of childcare.

### **Implications/Future Research**

ECEs who are committed to broadening their experience and learning would find this research to be informative as they may find their belief of the role of helping families transition to child care to be similar. As with the ECEs in the study who felt energized and reassured that their experiences were similar to other ECEs who are educated and experienced with relationship building, this study could do the same for a reader who was working in the field. The study also shared a variety of perspectives on what composes a successful transition. For ECEs who lack knowledge in this area or for ECEs who have not received training or education about why transition is important as an indicator of child well-being, there is a lot to be learned from this study. Not all ECEs have the same training and they certainly do not all have the same experiences. Learning from each other or colleagues who work with the same challenges, opportunities and possibilities is incredibly valuable. A future outcome of this study could be to encourage a learning community for ECEs who work with infants so that the opportunity is there to learn from and with each other.

For families, the study could support instilling additional trust in the child care field and in their own ECEs as they will be able to understand and evaluate what the ECEs believe their role is in supporting them and their families' needs. Some families may not even be aware of what the regulations are in governing who works in early learning programs so this study would enlighten them in not only understanding the value of ECE education and training but also in the thought and practices that are encouraged in some programs. If a family is enrolled in a program where ECEs practice the quality measures that encourage and support positive transitions, they may not even be aware that there are alternatives. Learning from the stories that are shared from the ECEs who participated in this study will clearly demonstrate that the ECEs who are chosen to work with and provide for a family's infant should be working in a way that is conducive to healthy relationship building. While there is no specific evidence in this study that the ECEs work in child care programs that are high quality it is an assumption that their education and experience have a positive impact on program quality as these are classed as being indicators on measurement tools. Future research could specifically measure the quality of the infant environments as well as the knowledge of the educators about transition. Another option could be to expand the question set that was used in the focus groups to include those that would capture more about quality child care indicators. While focusing on families, future research could use semi-structured interviews or focus groups to learn more about the perspectives of the family as they transitioned with their infant to a group care setting.

For Early Childhood Training programs, the topics of the adverse effects of infant stress and how to effectively support families during the transition process should be explored in depth. The creation of coursework or the addition of material for course criteria that focuses specifically on infant well-being, infant brain development, infant mental health and how to support families

as a whole as they transition to child care settings would be supportive of inexperienced ECEs. For students as well as ECEs working with infants, additional professional development opportunities that address some existing research gaps would be beneficial and would support feeling prepared and capable of supporting infants and families. Encouraging practicum opportunities in infant settings could provide newly graduated ECEs more hands on experience as they begin working as well as the opportunity to learn from experienced ECEs who are knowledgeable. This could provide them with a genuine understanding of the realities of this work and of the joy that can come out of relationship building with infants and families that is effective and meaningful.

Lastly, this study can be very useful to policy development for the field of Early Childhood Education as it is clear that the true nature of the work of infant ECEs in regards to relationship building and transition is not as effective as it has potential for. We learned from the ECEs who participated in this study, that in order to meet the needs of the infants and families during this stressful time, there needs to be support in regards to the education and experience of all ECEs who work with infants. In addition, particular attention should be paid to how infant programs are functioning to support relationship building both in promoting increased individualized care for infants and with increased understanding of how introduction or orientation processes support all infants in the program, not only the infants and families who are transitioning. Research is clear that both of these practices benefit infants in overall development and are supportive of decreasing stress for families as a whole. Policy development around individualized care, program orientation or introduction, primary caregiving and continuity of care would not only raise awareness of the concepts but also how beneficial they can be for all stakeholders in child care centres. An additional benefit would be to look at

flexibility in job requirements and programming so that ECEs are able to support optimizing positive transition experiences as with having additional supports available on days when families will be visiting programs so that they are able to receive undivided attention during those initial contacts. Policy development around educator consistency and turnover would be a positive outcome of this study. It is clear that the ECEs felt burdened by not having consistent, reliable and effective co-workers and this is a potential threat to the security of the transitioning infant and family. This study could also be helpful in informing child care programs about not only trying to meet the minimum standards of regulations but also how to proceed in establishing practices and policies that will help them exceed them. Education, experience and training do not guarantee the quality of a program but they do have an impact and can be very effective for increasing program quality. Use of measurement tools for ascertaining quality of infant programs would be effective for this and for raising the levels.

This study examined the perspectives of ECEs and how they understand and support infants and families as they transition from home to a group care setting. These perceptions are only of the ECEs who participated in this study and they may be different for other ECEs who work with the same age groups and in the same field. Possible future research should address how the perceptions of other ECEs who work in the field could compare to these results. During the course of the focus groups, the ECEs shared their how much emotion they put into offering care to infants and families. Additional research could examine and address the emotional labour that goes into being an ECE as it is not just about taking care of infants but really caring about them. In addition, another perspective could be to closely examine the perspectives of families as they are either about to experience a transition for their infant to child care or what the process was like once the infant and family have been settled into a child care program. This

could offer a much deeper insight into how ECEs support infants and families in relationship building.

Infants and families who are considering or experiencing a transition from home care to group care, have a clear understanding of how stressful and traumatic this phase can be for all involved. For the infants, it is getting to know strangers who are attempting to connect with you and establish a relationship when you are not familiar with them or the new setting. For the parents, it is giving these strangers their infants when they do not know them well enough to trust them and in some, perhaps even most cases, there is no other choice. This research attempted to look at the perspective of the ECEs who do this very important work. As the well-being of young children in group care is dependent upon the relationships that exist between the parent, child and the ECE, it is essential that the ECE's have both an understanding and an ability to establish strong, trusting relationships. The results of this research study have supported this statement for the ten ECEs who chose to participate. They all demonstrated an understanding of overall child development as well as what children need in order to establish secure, trusting relationships. They were also all very much connected to the importance of this work and in story after story described the lengths that they went to, in order to meet the needs of the children that they care for. This professional commitment didn't stop at the children as the ECEs repeatedly shared that they also have a responsibility to support the families of the children in their care.

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**Appendix A***Department of Child and Youth Study*

## Letter of Invitation &amp; Informed Consent

Dear ECE,

Date:

My name is Cathy Ramos and I am a graduate student in the Master of Arts (Child and Youth Study) program at Mount Saint Vincent University. As part of my degree requirements, I am conducting research under the supervision of Dr. Joan Turner. I am inviting you to participate in my study *Early Childhood Educators Perspectives: Transitioning infants and families into the child care environment*. As the well-being of young children in group care is dependent upon the relationships that exist between the family, child and the ECE, it is essential that the ECEs have both an understanding and an ability to establish positive relationships. The purpose of the research is to gain a deeper understanding of how ECEs perceive building relationships with infants and families who are transitioning to child care. The benefits for infants, ECEs and families are that the information collected in the focus groups could help build current research about early childhood educator's perceptions of how to support infant and families through transition to child care. It will be supportive of providing infants with the highest potential quality of care. In addition, this new research could benefit those who are instructing infant care courses and the future students who will learn from them.

This study requires participants to participate in one of three focus groups that will occur during the week of February 22 to 25<sup>th</sup>, 2016. The most convenient focus group date will be discussed and decided upon with you via phone conversation and a confirmation email will be sent to you. The focus group will be set for two hours and will take place in the evening at Mount Saint Vincent University. The focus group will be audio recorded and there will be an individual assigned to be a note taker present at each group. You will be asked to sign a form agreeing to the recording of the focus group. A confidentiality agreement will be read to the group before beginning the discussion in order to assure confidentiality of information shared and identity of participants of the focus groups. The results of the study will be presented in group data only and no individual participants will be identified. Quotes from the discussion may be used in the thesis and in future publications and presentations to illustrate important findings. Quotes will not be accompanied by any identifying information.

Your participation is completely voluntary and it entails minimal risk to you. Recounting your experiences as an ECE working with infants in a childcare program may bring awareness to the importance of establishing positive relationships with children and families. Narrating your experiences may also provide valuable insight for those who also share this important work. You may decline to respond to any questions that you may be uncomfortable answering and are free to withdraw from the study at any time without penalty, up to the publication of the thesis.

Every effort will be made to maintain participants' confidentiality. Although the focus groups will be audio taped, the researcher will not identify participants by name on the recordings. Pseudonyms will be assigned in order to protect your privacy in any narrations that you share. Transcripts will be coded using

the pseudonyms so as to ensure that participant anonymity is maintained. The demographic questionnaires will also remain anonymous and will be used only as a means of contextualizing data.

All information obtained in this study will be kept strictly confidential with the exception of any disclosure of harm or intent to harm a child or vulnerable person, or a participants' intent to harm themselves. In the event of any such disclosure, the researcher has a duty to report the information to the proper authorities.

Results of this study will be published in a Master's level thesis document. In addition, information and/or quotes from this study may be published and/or presented to academic and non-academic audiences via presentations or publication. Only Cathy Ramos and the thesis supervisor will have access to the focus group transcripts. After completion of this research, a summary of the study will be made available to you upon your request, and a copy of the completed thesis will be available at the University Library and/or Child and Youth Study office, Mount Saint Vincent University.

If you have any questions about this study, please contact Cathy Ramos, (XXX)XXX-XXXX, ([email address](#)) or Dr. Joan Turner, ([email address](#)). This research activity has met the ethical standards of the University Research Ethics Board at Mount Saint Vincent University. If you have any questions about how this study is being conducted and wish to speak to someone who is not directly involved in the study, you may contact the Chair of the University Research Ethics Board (UREB) c/o MSVU Research and International Office, at (XXX)XXX-XXXX or via email at ([email address](#)).

**By signing this consent form, you are indicating that you have fully read and understand the above information and agree to participate in this study. You will be given a copy of this consent form for your files.**

---

**Participant's signature**

**Date**

---

**Researcher's signature**

**Date**

*One signed copy to be kept by the researcher, and one signed copy to the participant.*

#### *Audio Recording*

Interviews will be recorded using audio recording to assist with the accuracy of your responses. Please select one of the following options:

I consent to audio recording:

Yes \_\_\_\_\_

No \_\_\_\_\_

---

**Participant's signature**

**Date**

---

**Researcher's signature**

**Date**

**Appendix B**



*Department of Child and Youth Study*

Confidentiality Agreement

I, the undersigned, acknowledge that all information of a confidential or private nature, shared in the focus group ECE’s and Relationship Building will be kept by me in the strictest confidence. I will refrain from sharing information including names of participants, details of experiences, nature of interaction, any personal data or business of the other participants, which may come to my knowledge or attention in the course of facilitated discussion.

I, the undersigned, understand and acknowledge that the researcher has a responsibility to report any disclosure of harm or intent to harm a child or vulnerable person, or a participants’ intent to harm themselves.

**By signing this consent form, you are indicating that you have fully read and understand the above information and agree to maintain confidentiality regarding information shared at this focus group. You will be given a copy of this consent form for your files.**

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<b>Participant’s signature</b>	<b>Date</b>
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<b>Researcher’s signature</b>	<b>Date</b>
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*One signed copy to be kept by the researcher, and one signed copy to the participant.*

## Appendix C

### Semi-Structured Interview Questions

- Please describe a successful transition for an infant and their family that you have experienced.
  - What about the experience do you think made it positive for the child? ...for you as an ECE?
- Please describe a challenging transition for an infant and their family that you have experienced.
  - What about the experience do you think made it challenging for the child? ...for you as an ECE?
- What do you know about transition itself?
- What factors affect transition and establishing trust with infants and family members?
- What effect could transition have on infants? (positive and negative)
- What do you believe that your role is in developing relationship with infants and families enrolled in child care programs?
- Are there practices in the work day that make relationship building easier or more challenging?
- What strategies or tools do you use to support infant and family needs during transition?
- What is your understanding of primary caregiving?
- Are there any challenges in the day to day implementation of primary caregiving?
- What is your understanding of continuity of care?
- Are there any challenges in the day to day implementation of continuity of care?
- Do you feel that you have sufficient knowledge required to support transition to child care?
- If not, do you feel that you require additional knowledge or training in order to support this very important work?