

**INFANTS SETTLED IN TO CARE: MORE THAN
ATTACHMENT**

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ABSTRACT

Increasing numbers of infants in western countries are spending large amounts of time in childcare but little research attention has been paid to the critical transition period between leaving the mother, or other primary caregiver, and entering the group care setting. Studies following small groups of infants have been undertaken but nothing has been done to access the significant amount of information held by the experienced carers who settle these infants in to care. This thesis reports on South Australian research that makes available rich information about the influences that promote the likelihood of a positive transition for infants settling in to care.

There is no currently available profile of behaviours that indicate to the observer that an infant has successfully made the transition and has settled in to care. Using information from the Early Childhood field, Child Development research and experienced carers, two profiles have been developed which describe the infant who has 'settled' in to care and the infant who has not yet settled. The possibility that some infants adjust to care by becoming detached and withdrawn and are overlooked by caregivers is also explored.

One hundred and thirteen qualified and unqualified childcare staff in community based and private childcare centres in South Australia were surveyed with an instrument developed by the researcher, from existing research into infant attachment, temperament and adjustment to care. In the primary study, quantitative and qualitative data was gathered and analysed to develop profiles of behaviours of the 'settled' and the 'not settled' infant. These results (the profiles) were triangulated in a secondary procedure, through the use of focus groups, with qualified and unqualified childcare staff. In the second study, quantitative and qualitative procedures were used to determine common understandings about the time infants take to settle in to care, whether some infants never settled and the processes and procedures, including the use of primary carers, that assist an infant to make the transition from home to centre care.

The results indicate that successful attachment to more than one carer is important for an infant to be considered settled in to care. Positive temperamental traits assist the infant to settle more easily, but difficult temperament traits are not seen by carers to be a particular barrier to infants achieving a settled status. No support was evident for findings from other research that had indicated that some infants adjusted to care by becoming withdrawn and detached.

The caregivers' information on the time infants take to settle into care reveals that in their collective experience the range is half a day to 10 months, with an average of two to three weeks. Specific parental attitudes and centre practices are reported as highly influential in determining the time it takes an infant to settle. Information from respondents about infants who never settled, why they thought that was and what happened to the infants, as well as the detail on when caregivers would recommend a child was withdrawn from care are also reported. Respondents support the use of a primary care system for infants entering care.

The findings of the research have implications for researchers', caregivers working with infants in child care and the administrators of childcare centres. The profiles offer researchers an opportunity to select infants who have 'settled' into care when undertaking research with infants in group care. This would reduce any unwanted effects on the data that were due to including infants not yet settled in to care.

Childcare staff wanting to track their interactions with, expectations of and support for infants as they enter care and settle in could also use the two profiles to guide their interactions with the infants. The detail of the results also has information for administrators of child care centres in setting staffing policies and rosters, determining minimum ages for infants entering care and deciding policies and procedures around infant attendance patterns, orientation visits and primary caregiving policies and practices for their centres.

DECLARATION

I certify that this thesis does not incorporate without acknowledgment any material previously submitted for a degree or diploma in any university; and that to the best of my knowledge and belief it does not contain any material previously published or written by another person except where due reference is made in the text.

Valerie Aloa

Date:

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DEDICATION

This thesis is dedicated to my parents **Dulcie** Liege (Burke) and
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Born and raised in Ceduna in South Australia's outback, neither finished more than 8 years of school, but they fought for education opportunities for their five children. Their indomitable spirits and personal resilience demonstrated for us that quiet persistence pays off. Their tolerance of my 'feistyness' and their emotional support encouraged me to explore and experience the wider world. This completed Ph.D is a direct result of their love for me and the curiosity and risk taking they encouraged and supported.

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