

WHO CARES FOR BABY? WOMEN'S PREFERENCES

Sarah-Eve Farquhar
Education Faculty, Massey University

(Paper presented at the NZARE Annual Conference, Palmerston North, December 1995).

Introduction

What are women's preferences for the care of their infant? And how are their decisions for baby's care a reflection of beliefs and personal circumstances, as well as a reflection of what support for baby care is available and how accessible it is? The percentage of children less than twelve months old enrolled at an early childhood service is continuing to increase, from 8.5 percent in 1990 to 11.4 percent in 1994 of all enrolments. New Zealand research on infant/toddler care has mostly been concerned with the needs and experiences of parents who are already using formal childcare (Podmore & Craig, 1991; Smith, 1995). We still know little about how first-time mothers (and their partners) come to make the decisions they do about who is to care for their very young child and why.

A three-year study of patterns of maternal work force participation and childcare needs and usage in a 1977 birth cohort of 1265 Christchurch children showed that the demand for, and the utilisation of childcare facilities was very low (Fergusson, Beautrais, Horwood, & Shannon, 1981). The child's parents, relatives and friends provided most of the hours of childcare while mothers worked. This was noted to reflect the women's preferences rather than any absence of childcare facilities.

Kelly (1986) surveyed the views of 84 Australian final year early childhood teacher diploma students on what they would do if they had a child under-two and money was not a factor. An overwhelming majority (71%) chose home based care, by relatives or friends, until the baby was at least 12 months old, 16 percent wanted home care by others, and 5 percent preferred a childcare centre. This finding led Kelly (1986) to wonder if the students' preferences "reflect an active rejection of the kinds of group care they have participated in, where one-to-one ratios do not obtain and carers change with shifts".

Academics and feminists point to the relationship between women's participation in paid employment and the availability of low-cost childcare (David, 1990; May, 1993, Meade, 1990). "Childcare challenges the existent values that mothers should care for their own children most of the time", according to Cook (1982, p.1). Feminists have criticised home-based care for reinforcing and perpetuating women's domesticity (Camilleri & Kennedy, 1994). Petrie (1991) notes that home-based care offers one group of women (working mothers) freedom from the dominant ideology of mothering whilst restricting the "liberation" of another group of women (those who chose to stay at home and/or provide care for other people's children).

Today there are probably few academics who would challenge Western society's increasing reliance on formal group childcare arrangements for infants. But large group care is the least desirable situation for infants to be in according to Penelope

Leach (1995 cited in Aldridge, 1995) a psychologist and writer of books on 'good' parenting. She deplores the trend towards placing children under three years of age in childcare institutions and argues that such services are taking over the parents' role as primary caregivers in children's lives and not doing a very good job of it:

Those who clamour for more and better crèches and day-care centres have got it wrong ...(babies) need full-time, one-to-one loving care, preferably from mothers, but if not then from other loving familial people. Or even to be placed in other family homes. There's a distinction between love and care (Leach interviewed by Aldridge, 1995, p. 9)

David (1990) similarly proposes that young children need to feel that one or more adults really care for them as individuals - in other words love them. After reviewing the evidence on whether children benefit from out-of-home care David (1990) concludes that what seems to be most crucial is that the adults in *any* setting really care about rather than merely caring for the young child. The fundamental difference between the views of Leach and David is that whereas David is adamant that childcare centres can provide the kind of care and love that infants thrive on, Leach argues that the reality is a "beehive" solution of large numbers of babies being cared for in large groups with staff having neither the time nor the energy to provide one-to-one loving care.

There is support for Leach's (1995) views in the literature. Some researchers are critical of infant care in childcare centre settings even when these settings have high standards (e.g. trained teachers, 1 to 3 adult-child ratio, and parent involvement) because children are ill more often, show a decline in mental/motor functioning, display heightened avoidance on parents' return after short separations, and often engage in maladaptive behaviour (crying and fussing) during the first months of care (Barglow, 1988; Belsky, 1986; Hignett, Cory, Rossiter & Rodrigues, 1981).

A study of the experiences of 16 Australian mothers returning to paid work and placing their infants in childcare showed that the primary concern of all the mothers was that their baby should receive at least the same standard of care that they provided in the home (Rolfe and Richards, 1994). All but one of the mothers stated that the best form of care for their baby was individualised attention, and that they alone could provide that ideal care. Fergusson et al (1981) suggests that New Zealand mothers consider their participation in paid work to be secondary to their primary commitment to motherhood, and thus most work short hours and choose employment which enables their infant to be care for within the family environment. More recently, Podmore (1994) and Smith (1995) noted that caring for children primarily remained the responsibility of mothers in New Zealand.

Meyerhoff (1992) proposes that instead of concentrating solely on pushing for the simultaneous expansion and improvement of childcare services, people should be lobbying more for family-friendly employment measures such as longer paid parental leave, part-time jobs, working at home instead of the office, flexi-time, and job sharing. His view may well have merit if care in the family environment or by a person who is well known to the family is what women with very young children prefer and believe to be best.

This paper provides a case study of the preferences for infant care of four women with very different personal situations and levels of career commitment. It looks at the women's preferences for infant care, and how their arrangements impacted on family life, infant well-being, employment and career development. The study presented here is small and exploratory in beginning to examine choices in the type of childcare and the quality of childcare valued and used by parents of infants.

Method

Four women were interviewed for this study, either at their workplace or at home. The women were selected for study on the basis that each was a first time mother with an infant under 18 months, and that they differed from each other in the care arrangements they had made for their infant. Two women known to the researcher agreed to participate in the study, and these two women each recommended another woman known to them as fitting the criteria for selection in the study. The age and employment status of each of the four women is shown in Table 1 along with details of their infants' age at the time of the interview, the type of childcare used, and for how long.

Table 1. Overview of Participants and Infant Care Arrangements

Women's name	Abby	Barbara	Cathy	Diane
Age	29	29	29	25
Employment	Temp. secretary	Computer consultant	Lab. Supervisor	Cares for another child
Highest Household Income Earner	No	No	Yes	No
Infant's Age	8 months	12 months	5 months	7 ½ months
Care Arrangement	With friend at her home	Childcare centre	Child's father at home	With self at home
Duration of Care	8 hours daily	8 ¾ hours daily	8 - 9 hours daily	All the time

All four women were similar in age. They were all in employment, although in the case of Diane this was self-employment at home caring for another child during the day. There types of care arrangements were used: first in the family home (Cathy and Diane), second care by a friend at her house (Abby), and third at a formal licensed childcare centre (Barbara). The women all lived in a nuclear family situation with their partner or husband and child. Diane's younger brother also stayed at her house during the week so that he could attend a nearby school.

The interviews were taped and later transcribed for analysis. Questions covered topics of what participants considered to be an ideal care arrangement, their reasons for and satisfaction with their current care arrangements, how their life had changed since

having their baby and in what ways they would like to change their current childcare and working situation.

Findings

1. Ideal Care for Infants and Congruence with Practice

All four women believed that ideally babies were best cared for at home by the mother or parents. According to Diane “the mother knows what the needs and wants of their child are”. Abby whose baby was cared for by a friend added that her experience had taught her that a baby can be as competently cared for by a loving caregiver. Cathy, who had only just started to use a crèche on occasional days when her own and her husband’s work hours overlapped, believed that other caregivers could be helpful on a part-time basis but not full-time as the baby would not know who mum was and would not be brought up the way the parents wanted.

For Diane, Abby and Cathy their beliefs matched the type of care used. Barbara’s use of full-time formal childcare was at odds with her personally held beliefs about ideal care. Barbara believed that home care was preferable because infants “catch too many bugs (infections)” and “are not going to bond with parents as well when they are handed onto somebody else”.

Barbara, Cathy, and Abby all commented on the importance of children spending at least some time in group settings learning to relate with other children and to be part of a crowd before starting school.

Abby’s placement of her daughter in the care of a friend whilst she worked fulfilled her perceived need for daughter to learn to relate with others and not to be totally dependent on her. Abby valued the attention given to her daughter by her friend as caregiver. Barbara and Cathy did not believe that constant adult attention was healthy for infant social development. In Barbara’s words: “Baby gets absolutely 100% attention at home and although he loves it I’m not sure that’s good for him as a person when he grows up. He does have to learn to wait for things”. In the week previous to being interviewed Cathy had placed her baby in a childcare centre for five hours and she mentioned that he received less attention than other babies who were more demanding and wanted to be carried around. She was pleased that her son was mostly left on his own, apart from feeding and changing, as she did not want him to learn to expect lots of attention.

2. Reasons for Particular Care Arrangements

Each woman differed in her main reasons for seeking or not seeking assistance with care for her infant. Barbara was firmly committed to her career and had not considered not working after she had her baby. She felt she would go “nuts” if she did not work. Cathy viewed her work as a career but would have preferred to work fewer hours. She explained that if she did not have a husband willing to stay home or if her family’s financial situation was better she would have worked only two instead of five days a week. Her husband stayed at home to look after the baby, because she had a higher earning job that did not contain the risks to physical safety that his previous job had.

Unlike Barbara and Cathy, Abby had resigned from her job before the birth with the intention of not returning to paid work. But when her baby was four months old Abby decided she had to have the structure and stimulation of employment: "I was going insane staying at home. Before I had baby I was working 60 to 70 hour weeks, so I went from that to nothing. I wasn't getting out of bed until lunch-time every single day". The consequence of her decision to return to work was that Abby could only get a position with less responsibility. However she liked this because her job did not require total commitment and concentration left her with energy and enthusiasm to be with her baby when she was at home.

Diane attached less importance to the centrality of paid employment in her life than the other women interviewed. She decided as a teenager not to pursue serious employment involvement, and worked in a job she did not enjoy as a bank-teller. Diane was proud of being a housewife and mother, and felt that although her mother visited during the weekends for the first few months so that she could have a break, she did not feel she needed a break or time-out from her role.

3. Formal Childcare Dilemmas and Choices

Barbara considered use of a childcare centre to be a necessity for her to continue working. She chose the childcare centre because it was located within a few minutes walking distance from her work. She said she would have preferred her baby to be cared for in a home environment but felt that (a) it would exploitation of another women as she could not afford to pay her what she would have wanted to pay her, and (b) that in the open environment of a childcare centre there was a lower chance of child abuse occurring. Barbara worried from the start that her decision to use a childcare centre might not be the best decision for her baby: "I made a definite decision not to go and look at other centres. I didn't go to look at his one until two days before he went in so I wouldn't have an option to freak out".

Abby had intended to use a childcare centre at her husband's work at a very reasonable cost of \$80.00 a week. She worried though that it had "five babies to one caregiver and I thought that while she is little she needs closer care". When attending antenatal classes she made friends with another mother who offered to care for her baby. To begin with Abby said her husband wanted baby to be at a childcare as he felt baby was less likely to be abused in a childcare centre, but now the caregiver had become like a member of their family and her husband was happy with the arrangement. Abby paid the caregiver more (at \$100 week) than she would have paid to use the childcare centre, but felt that not worrying about the quality of care provided for her baby was worth paying more.

4. Experiences and Feelings about Quality of Care

Cathy, Diane, and Abby reported that they were totally happy with their baby's care. Cathy's husband tells her what her baby needs and does, and baby was very attached to him as the primary caregiver. Her husband did most of the housework, including meals and laundry. Diane said that her baby was very dependent on her and would not go happily to anyone else, but she knew that her baby enjoyed and thrived on this close loving relationship. The caregiver Abby used provided her with much needed support, including washing nappies, doing activities with her baby such as swimming

that she would have wanted to do if she was not working, and following through with her wishes for how she wanted her daughter brought up. Her caregiver was flexible with hours so Abby could when she wished or her job required it, work longer or different hours on any day.

In contrast, Barbara was not happy with the support she received. She explained that the teachers at her childcare centre had not shown an interest in finding out what she wanted for her baby:

They get some exposure to music but not the way I would prefer him to learn about music and notes and tunes rather than pop music.

He wouldn't have water play at home where they throw rice in the water because I have no desire to have him catch a cold.

I don't like the fact he gets the play dough and eats it and somebody hasn't stopped him.

I'd like the toys washed more often. They don't wash the toys for toddlers at all.

I don't like picking him up and finding him with dirty hands and face and nose to be wiped. I'd like his face wiped during the day.

The main and overall complaint that Barbara had about her baby's care was that he got sick at least one week out of every four. Her doctor's bills were high and she was annoyed that her baby was catching preventable infections, such as conjunctivitis and diarrhoea. Barbara did not "think there is anything that is particularly good" about her baby's care, although she mentioned that her baby was receiving "some education". At Barbara's childcare centre there was not one adult responsible for her child but many adults, and she found this made it difficult to try to communicate her expectations and wishes with so many teachers.

5. Financial and Work-Experience Changes

All four women noted that a main change in their lives was a reduction in income. Barbara pays childcare fees, Abby pays her caregiver and has taken on a new job with a reduction in personal salary of \$12,000 and no security of employment, Diane no longer receives wages as a bank teller and instead is looking after another baby at \$20.00 a day to help cover household expenses, and Cathy's wage now stretches to cover almost all family expenses as her husband gave up full-time employment. All four women felt that there was not always enough money to go around.

Abby had a good career before baby was born and now has "just a job. I go home, forget about it and dedicate my time to baby". In contrast, Barbara said that she can't go home and forget about her work. She makes "an effort to take work home when it's needed, because physically I can't always be here (work) at 8.30am". Being a mother meant to Barbara that she must appear to be more professional in her work. She tried 'to make up for an apparent lack of dedication by doing each individual job better'. Cathy did not feel that the nature of her work changed but she experienced some disapproval from colleagues for perceived neglect of her baby. In Cathy's words, "if a dad comes back after the baby is born they wouldn't say 'where is your baby' – they'd assume the baby is at home".

6. The Significant People in their Baby's Life

When asked who were the significant people in their baby's life all four women stated that they were. All except for Diane also said that their husband or partner was a significant person because their husband/partner had a similar or higher level of involvement in baby's care. Abby felt her baby loved her caregiver. Barbara mentioned the names of two teachers who her baby "seems to like", however the teachers were rotated to care for different groups of children every three weeks at the centre making the formation of close relationships unlikely.

Unlike the other women, Diane did not receive any assistance with her baby's care outside of the home. She mentioned that her husband phoned her and asked her if baby was missing him, to which she replied "Nope, you're hardly ever with her so how is she going to miss ya!" Her 13 year old brother, who stayed at her house during the week, was important in her baby's life as they loved playing together.

Abby and Barbara considered that like Diane they were their baby's primary caregiver. Cathy's husband was the primary caregiver in her family. Abby, Barbara and Cathy all relished the time they had with their babies, rather than regretting the time that they spent away. Barbara had "persuaded" the childcare centre teachers to let her child sleep for as long as possible so that he would be awake for longer in the evenings to interact with her and husband.

Discussion

This small exploration of the childcare preferences of mothers with infants suggests that the key issue may not be the availability of formal childcare, but rather what mothers' want in relation to their beliefs, values, and lifestyle (Fergusson et al; 1981; Kelly, 1986). The question of who is to mind the baby when continuing or returning to work after birth can involve difficult decision-making. The interview material presented in this paper suggest that there is considerable individual variation in why women make the choices they do, and that their choices reflect such aspects as beliefs about the contribution and effects of childcare use on children, their personal circumstances including financial situation and husband's work, and their life choices including whether and to what extent to pursue a career or be at home during their child's early years.

The four women all held views on what constituted quality childcare for their infant. Quality was about personal care, the ideal being care within the family or a caregiver who was considered part of the family. Barbara's view on this conflicted with her political commitment to supporting the availability of early childhood education in centre-based settings with trained teachers who were paid a good wage. Barbara was least happy with her childcare arrangement. It was interesting in the interviews that only Barbara mentioned that her infant was receiving an education. However, in the home-based situations it appeared from the interviewee's comments that infants were also receiving educational stimulation but in more authentic ways (e.g. going for walks and swimming, playing with an older peer).

The four women were committed to motherhood and being mothers (Fergusson et al., 1981). They all preferred (or longed for) the forms of care that enabled them to

continue to be a significant person in their baby's life, raising and educating their baby. This small study serves as a reminder that parents place high importance on the emotional needs of their infants. Parents are not ignorant about what is important for quality for their child (Podmore & Craig, 1991) but unfortunately within our social and political context parents may not always be supported or empowered to choose the quality they would prefer

A main concern for the women was achieving consistency between home and caregiver or centre expectations and ways of caring and teaching. Communication between parents and teachers/caregivers is essential for infant well-being and optimal outcomes. Yet most professional articles on caring for and teaching infants focus on relationships between caregiver and infant, or other aspects such as staffing and the play environment (e.g. Honig, 1985).

In conclusion, not all mothers may, if given or able to have the choice, want the kind of early childhood education childcare environment that is promoted by policy and in the early childhood profession as best. We need research to examine whether the political and professional push to promote the benefits of formal childcare (as opposed to 'back-yard' care) and for telling parents what defines quality for their child, will re-shape personally held preferences and values or result in parents experiencing a greater conflict of interest between what they want and know to be good for their child and what they believe to be the best choice to make for their child as a member of society.

References

- Aldridge, V. (1995). Dr Leach rocks the cradle. *The Dominion*, February 27, p. 9.
- Barglow, P (1988, March). *Infant attachment, nonmaternal care and maternal employment*. Paper presented at the annual meeting of the American Orthopsychiatric Association, San Francisco, CA.
- Belsky, J. (1986). Infant day care: A cause for concern? *Zero to 3*, 6(5), 1 - 7.
- Camilleri, P. & Kennedy, R. (1994). Educational issues for family day care: Results of a South Australian Survey. *Australian Journal of Early Childhood*, 19(3), 39 - 44.
- Cook, H. (1982, October). *Parental praxis: The politics of parent power*. Paper presented to Parents Seminar, Hamilton Day Care Centre Trust.
- David, T. (1990). *Under Five - Under-Educated?* Milton Keynes: Open University Press.
- Fergusson, D. M., Beautrais, A. L., Horwood, L. J. & Shannon, F. T. (1981). Working mothers and day care. *New Zealand Journal of Educational Studies* 16(2), 168 - 176.
- Hignett, W., Cory, V., Rossiter, R. & Rodrigues, D. (1981). *Longitudinal Observation of Infants' Responses to Separation and Reunion in the Day Care Environment*. Pittsburg, PA: Louise Child Care.
- Honig, A. S. (1985). High quality infant/toddler care: Issues and dilemmas. *Young Children*, 40 - 46

- Kelly, J. (1986). Day care - An unfortunate necessity or a desirable community resource? *Australian Journal of Early Childhood*, 11(1).
- May, H. (1993). *The Hand that Rocks the Cradle should also Rock the Boat*. Hamilton: Waikato University.
- Meade (1990). Women and young children gain a foot in the door. *Women's Studies Journal*, 6(1/2) 96 - 110.
- Meyerhoff, M. K. (1992). Viewpoint: Infant/toddler day care versus reality. *Young Children*, 47(6), 44 - 45.
- Petrie, A. (1991). Family day care schemes: Entrapment or liberation for women? *Hecte* 17(1) 61 - 66.
- Podmore, V. N. & Craig, B. H. (1991). *Infants and Toddlers in New Zealand Childcare Centres*. Wellington: NZCER
- Podmore, V. N. (1994). *Employment and Childcare Arrangements among Families*. Wellington: New Zealand Council for Educational Research.
- Rolfe, S. A. & Richards, L. (1994, July). *Families developing in the context of quality care: The experience of Australian mothers*. Paper presented at the XIIIth Biennial Meetings of the International Society for the Study of Behavioural Development, Amsterdam.
- Smith, A. B. (1995, January). *Working in Infant Childcare Centres. Final research report to the Ministry of Education*. Dunedin: University of Otago.

Copyright is held by Sarah Farquhar. Email Sarah@childforum.com Copies in the published format may be printed and distributed freely by individuals provided that the source is fully acknowledged.