

## Impact of Child Care Strategies on Psychosocial Development of the Children in Peri-urban Punjab

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### ABSTRACT

*The present study was undertaken to assess the impact of child care strategies on psychosocial development of children in Punjab. The sample consisted of 920 children (aged 1-3 years) belonging to low socio-economic status families. The sample was further sub-divided into two sub-samples namely children of working mothers (n=460) and children of non-working mother (n=460). The sample of children of working mothers was further sub-divided on the basis of various child-care strategies observed for the care of child during working mothers' absence. Accordingly, four child care settings were observed namely care by grand parents (n=200), siblings (n=140), adults other than grand parents (n=45) and anganwadi workers (n=55). Bayley Scales of Infant development (1993) was used to assess mental and psychomotor developmental outcomes of children. The results revealed that sibling care showed poorest developmental outcomes when compared with non working mothers. It was found that the care provided by grand parents and adults other than grand parents showed very little difference in the developmental outcomes when compared among themselves. However, developmental outcomes in their care were poorer when compared with non-working mothers and care provided in Anganwari.*

**Key words:** Child Care Strategies, Psychosocial development;

Children living in poverty are always at risk because majority of the women in the economically weaker sections of the Indian society work to help their families to make the two ends meet. Work participation is indeed a question of survival of them. A large number of women in this section are employed in marginal occupations like collection of fire wood, cow dung and fodder. Work of women outside home particularly of mothers of young children has been a controversial subject for many researchers. The concern is aroused by the belief that employment adds to already heavy work load of house care and responsibilities for the mother of very young children. These responsibilities may compete with the child for the mother's attention and affect the quality of their interaction which in turn may result in negative child outcomes. Muthusamy (2006) studied the relationship between increased female work participation and mother's time with children

in developing countries and reported that working women spend significantly less time on child care than non-working women.

The early years are considered to be very important for physical, motor, socio-emotional and intellectual development of the child. Family socio-economic position may also interact with the employment status to affect maternal and child behaviour. Maternal employment in the 1st year of child's life has significant negative effects on cognitive development of children as reported by Han et al (2001). Another aspect of maternal employment is the supervision of children whose mothers work. In order to understand the effect of mother's work away from home on quality of home environment, it is imperative to consider how the alternative systems of child care develop and what are the different child care strategies used by the working mothers and how these care givers affect stimulation

and quality of home environment provided to the child. It follows that maternal employment should have an adverse affect on child's development if it increases the probability of poor quality care giving and beneficial affect if it increases the probability of high quality care giving. However, there is a knowledge gap of focusing on the impact of location of alternate care, the age of substitute care giver, development period of the child on the quality of home environment provided to the child. So, the present investigation is planned with the following objectives:

- To ascertain various child care strategies used by working mothers of children aged 1-3 years in the low socio-economic group.
- To investigate the impact of different child care strategies on children's psycho-social development in the low SES group.
- To assess the impact of mother's working status on children's psycho-social development with respect to various child care strategies used in low SES group.

## METHODOLOGY

The present study was conducted in the rural areas of Ludhiana and Jalandhar districts. The details of the villages are given in table 1. The villages which fell beyond 5 kms of octroi posts were selected. The sample (n=920) for the present study consisted of children in the age group of 1 to 3 years. The sample was selected by paying door to door visit in the village by the Investigator along with the Anganwari worker. Firstly, all children in the selected village in the age group of 1 to 3 years were selected. Then, socio-economic status scale by Pareek and Trivedi, 1964 was applied to those listed families to assess their socio-economic status. Children belonging to low SES group were selected. The sample was further sub-divided into two sub samples namely children of working mothers (N=460) and children of non-working mothers (n=460). *Bayley Scales of Infant development (1993)* was used to assess mental and psychomotor developmental outcomes of children. The collected data was analysed using the t-test to observe the statistical significance of differences in the means scores of children of working and non-working mothers across different child care settings.

## RESULTS AND DISCUSSION

During the study, it was observed that women

belonging to low SES group worked as daily wagers, sweepers, domestic helps and collected fodder and fire wood for their subsistence. Those group of women were characterized as working women who left their children in the supervision of other care givers while non-working women were those women who remained at home doing the household chores and did not participate in income generating activities.

**Table 1. Distribution of children of working mothers across various child care settings (N=460)**

Age Group	Care by grand parents	Care by siblings	Care by kith/kin	Anganwadi care
13-18 months	90	25	-	-
19-24 months	60	55	-	-
25-30 months	30	60	25	-
31-36 months	20	20	20	55
Total	200	160	45	55
Percentage	43.47	34.78	9.78	11.95

It is evident from Table 1 that working mothers (n-460) used four types of child care settings when they were away for work. Of the total 460 children, 43.47 per cent children were looked after by grand parents and 34.78 per cent children were under sibling care. About 10 per cent children were looked after by other adults like aunt or neighbourers etc. And 11.95 per cent children were sent to Anganwadi centres. *Klemesu et al (2000)* also reported that of the mothers using child care givers and 15 percent of these child care givers were children between 6 and 15 years of age. It is also heartening to note that most of these non-adult care giver were girls who drop out from the schools in order to look after their younger siblings so that their mothers can do productive work. Care by a sibling is a very common form of child care but a cause of concern as it denies the older child educational opportunities and childhood itself. *Capizzana and Adams (2004)* also observed that children from poorly educated, immigrant, and less affluent families are more likely to be cared by relatives than in child care centres.

*Impact of child care strategies on Psycho –social development outcomes* : Mean motor and mental development scores of children aged 13-36 months are presented in Table 2a & 2b. It is evident from the tables 2a & 2b that the mean scores obtained by children under the care of siblings were lowest both on motor and

Group	Mean motor scores $\pm$ S.D	t-value
Grand parents	83.34 $\pm$ 3.95	9.00*
Siblings	77.26 $\pm$ 8.43	
Adults other than grandparents	82.93 $\pm$ 2.85	4.42*
Siblings	77.26 $\pm$ 8.43	
Anganwari	85.36 $\pm$ 4.76	6.73*
Siblings	77.26 $\pm$ 8.43	
Grand parents	83.34 $\pm$ 3.95	0.65
Adults other than grandparents	82.93 $\pm$ 2.85	
Anganwari	85.36 $\pm$ 4.76	3.20*
Grand parents	83.34 $\pm$ 3.95	
Anganwari	85.36 $\pm$ 4.76	4.00*
Adults other than grandparents	82.93 $\pm$ 2.85	
Non-working	85.96 $\pm$ 5.10	11.54*
Working	81.43 $\pm$ 6.69	
Anganwari	85.36 $\pm$ 4.76	0.26*
Non-working	85.96 $\pm$ 5.10	

Group	Mean mental scores $\pm$ S.D	t-value
Grand parents	83.81 $\pm$ 3.56	10.42*
Siblings	78.25 $\pm$ 6.39	
Adults other than grandparents	83.13 $\pm$ 2.36	5.01*
Siblings	78.25 $\pm$ 6.39	
Anganwari	85.65 $\pm$ 5.13	7.74*
Siblings	78.25 $\pm$ 6.39	
Grand parents	83.81 $\pm$ 3.56	1.21
Adults other than grandparents	83.13 $\pm$ 2.36	
Anganwari	85.65 $\pm$ 5.13	3.05*
Grand parents	83.81 $\pm$ 3.56	
Anganwari	85.65 $\pm$ 5.13	3.62*
Adults other than grandparents	83.13 $\pm$ 2.36	
Non-working	86.79 $\pm$ 4.77	13.80*
Working	82.03 $\pm$ 5.61	
Anganwari	85.65 $\pm$ 5.13	0.32
Non-working	86.79 $\pm$ 4.77	

**Table 3. Classification of development index scores of children across various child care settings.**

[illegible]

All figures are in percentage, PDI=Psychomotor Development Index; MD= mildly delayed performance (Score range 70-84)

N= within normal limits performance (Score range 85-114) MDI=Mental development Index; Age in month,

Mean motor and mental scores of the children cared by grand parents were comparable with those obtained by children being cared by adults other than grand parents. Differences between the two groups were statistically non-significant. Perusal of Tables 2a & 2b revealed that majority of children cared by grand parents and adults other than grand parents were showing mildly delayed performance both for MDI and PDI.

The children cared by anganwadi workers scored better than their counterparts cared by grand parents, adults other than grand parents and older siblings. Differences were observed to be statistically significant at 5 per cent level. About 51 per cent of the children cared by anganwadi workers were classified as showing normal performance. These findings are in line with the study conducted by *Raizada et al (1993)* who observed that mental development of children attending anganwadi was significantly better than that of non-attenders. Similar results have been reported by *Votruba-Drzal et.al (2013)* and *Duncan (2003)*.

It was observed that children cared by mothers who remained at home had scored better than the ones whose mothers went away for work. The differences in this case were found to be statistically significant ( $P < 0.05$ ). Majority of the children (65.21%) of working mothers were classified as showing normal performance (Table 3). When scores of children cared by anganwadi worker were compared with that of children of non-working mothers, statistically non-significant differences were observed. It could be inferred that care provided by anganwadi worker promises to effect the psycho-social development of the child to the same magnitude as that by the mother at home. For motor and mental development children cared by older siblings were lowest among all other child care settings being considered here. It is supplemented by the earlier observation that the care giving environment provided by siblings was the poorest among all other care settings. The lowest motor-

mental scores obtained by children under the care of older siblings are thus in line with such an impoverishing environment.

## CONCLUSION

It could be concluded from the results that sibling care showed poorest developmental outcomes when compared with non working mothers. It was found that the care provided by grand parents and adults other than grand parents showed very little difference in the developmental outcomes when compared among themselves. However, developmental outcomes in their care were poorer when compared with non-working mothers and care provided in Anganwari.

Child care has to be a part of holistic integrated strategy for the development of poor as it permits women to work and improve their economic condition. In view of the results of the study, the following recommendations need to be kept in mind by policy makers for making welfare schemes for poorest of the poor:-

If the mother is working, children should not be left in the care of older siblings as it affects the quality of stimulation provided to them. Young children who are kids themselves have no skill for child care. Community should be sensitized against dropping rural girls from school to take care of their younger siblings.

Care in the Anganwadi is recommended as it is better than care provided in the other care settings

The community and the government should be sensitized about the need of day care centres in every village in view of the results of the present study. These day care centres should be equipped with the age appropriate educational play materials for psycho-social development of children in low SES group. These day care centres should fulfil three objectives, namely, provide a service for working women, provide for development of young children and enable young girls to attend school. Besides, these centres can promote support to the family (particularly women) by having health education and literacy programme.

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