

Promoting Social Competence in ECE: Predicting the Development of Prosocial Behavior from Early Experiences in Child Care and Families

Project Team: Celia A. Brownell, Ph.D., Jesse Drummond, MS.

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Project Description

The objective of this study is to determine which features of non-parental child care and education (ECE), from infancy through preschool, together with family experiences, predict the development of prosocial behavior, a critical and early-appearing component of social competence. Exploring these associations is especially important given the ubiquity of ECE in the lives of infants and young children today, and the central role of prosocial behavior in academic and social success.

Research Questions

1. Which features of ECE programs and caregiving environments are more (or less) associated with the early development of social competence?
2. How do these key features of ECE experiences intersect with parenting and family characteristics to promote (or hinder) children's early social competence?
3. How do ECE experiences influence patterns of growth in social competence over childhood, and how long lasting are the effects of ECE experiences on core dimensions of social competence?

Sample

Families were recruited in 1991 from hospitals located in 10 sites across the nation, including all major regions of the country as well as urban, suburban, and rural areas. During selected 24-hour sampling periods, all 8,986 women who gave birth were screened; 5,416 met eligibility criteria; 1,364 became study participants upon completing a home interview when their infants were one month old. Families were socio-economically and culturally diverse.

Methods

Children were followed from birth to age 15. Major assessments occurred when the children were 1, 6, 15,

24, 36 and 54 months old; at K and grades 1, 2, 3, 4, 5, 6, 7, and age 15. These included home, lab, and/or child care or school visits during

which children, their peers, their parents, and/or their caregivers/teachers were interviewed, observed, and/or completed questionnaires. Intermediate phone interviews were conducted with mothers (and at later ages, with children) at regular intervals to update or augment selected demographic and other data (e.g., child care usage). Detailed measures were thus obtained of home and family environments as well as child-care and school environments.

ECE Features

Quality of ECE is defined by both structural and process variables. Structural variables include caregiver credentials, setting physical characteristics (e.g. learning materials), group size, and child-staff ratios. Process variables include observed caregiving quality (Observational Record of the Caregiving Environment (ORCE); NICHD ECCRN, 2002), caregiver beliefs about childrearing (Modernity Scale; Schaefer & Edgerton, 1985), and caregiver-child relationship (The Student-Teacher Relationship Scale; Pianta, 1992). Hours and type of care (child care center, child care home, or in home care by a relative (not mother) or non-relative) were also measured.

Family predictors

Demographic categories and family dynamics were measured. Demographic categories include maternal education, income, child race/ethnicity; and family structure (i.e. marital status, family size). Family dynamics include child-rearing beliefs (the Modernity Scale; Schaefer & Edgerton, 1985), mothers' parenting practices (The Raising Children Checklist; Greenberger & Goldberg, 1989), maternal sensitive interaction, home environment quality (HOME; Caldwell & Bradley, 1984), maternal depression (CES-D; Radloff, 1977), and parent-child relationship

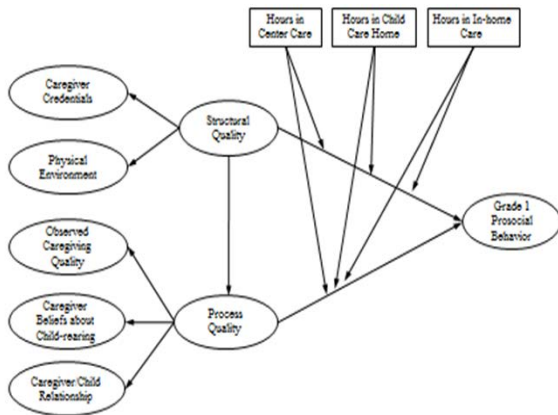
quality (the Child-Parent Relationship Scale (CPRS, Pianta, 1994).

Prosocial Behavior

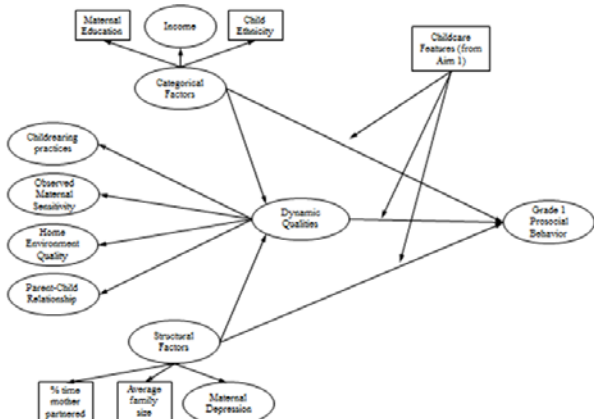
Prosocial behavior was assessed using a multi-method, multi-reporter, multi-context measurement approach at each major assessment age starting at 24 months. Specifically, it was reported by mothers and caregivers or teachers using several different questionnaires (e.g., Social Skills Rating System; California Preschool Social Competence Scale); observed in ECE and school classroom settings, in structured and unstructured observations in the lab and at home, and in dyadic friendship interactions; and obtained from children’s responses to social problem-solving scenarios (e.g., number of prosocial solutions generated). Thus, children’s prosocial behavior within the family, with peers and teachers at school, and in dyadic play with friends was captured.

Proposed Models

Direct and indirect ECE effects on prosocial behavior, moderated by time in care



Direct and indirect family effects on prosocial behavior, moderated by features of child care



Progress Update

Data acquisition and cleaning has begun. We will be able to discuss very preliminary results (i.e., correlations) in December 2015 at the CCPRC Annual Meeting.

Implications for policy/practice

Meaningful, well-grounded, robust and generalizable answers to our questions will inform future policy- and practice-relevant research that seeks to enhance developmental outcomes for children in ECE; inform progress in public policies to ensure that providers meet benchmarks for key factors that promote positive developmental outcomes; and inform policy-relevant issues concerning the potential role of universal provision of ECE as a means of advancing social success and community welfare.

Implications for research

Findings will contribute to our understanding of the mechanisms of prosocial development across infancy, toddlerhood, and childhood; and expand our understanding of the complex interplay of family and childcare socializing processes.

For more information

Additional information about sample, procedures, and instruments can be found in NICHD ECCRN (2005) and the archival website:

<https://www.nichd.nih.gov/research/supported/seccyd/Pages/overview.aspx>

Contact

Celia A. Brownell, Ph.D.
 Jesse K. Drummond, M.S.
 University of Pittsburgh
 Department of Psychology
 Phone: 412-624-4500

Email: brownell@pitt.edu; jkd19@pitt.edu