

Attachment theory and primary caregiving

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Through the Looking Glass

OFFERING INTENSIVE PARENT SUPPORT programs within an early childhood setting recognises that early childhood educators are uniquely placed to form highly supportive and ongoing relationships with children and their families as part of their everyday work. This feature of early childhood programs can be utilised to include educators as partners in interventions with families where there are disruptions to the parent-child attachment relationship. The Through the Looking Glass project has been operating in early childhood settings since 2005 with positive outcomes for both families and children. The project is located in an early childhood setting in which a primary caregiving system is established so that each child is allocated an educator as their primary caregiver, who takes the key role and interest in the child's day-to-day experience thereby becoming the 'secure base' for the child within the centre. Under this model attachment theory is the underlying theoretical framework utilising the Circle of Security model. All educators participate in ongoing professional learning to support them to be emotionally available to children. When primary caregiving practices are ingrained in policy and practices through a centre, all children and families benefit.

Introduction

Through the Looking Glass (TtLG) is a parenting intervention program that supports mothers where there is a disruption to the mother-child attachment relationship. The project is based on attachment theory and draws from the 'Circle of Security' project model (Marvin et al., 2002). TtLG is innovative in that it conceptualises early childhood programs as being uniquely placed to provide the support necessary to offer therapeutic intervention and containment for the family. Within this project the educator, through the primary caregiving model, develops a significant relationship with both the child and parent. Together with a health professional, they collaborate to develop and enhance the attachment relationship between the parent and child.

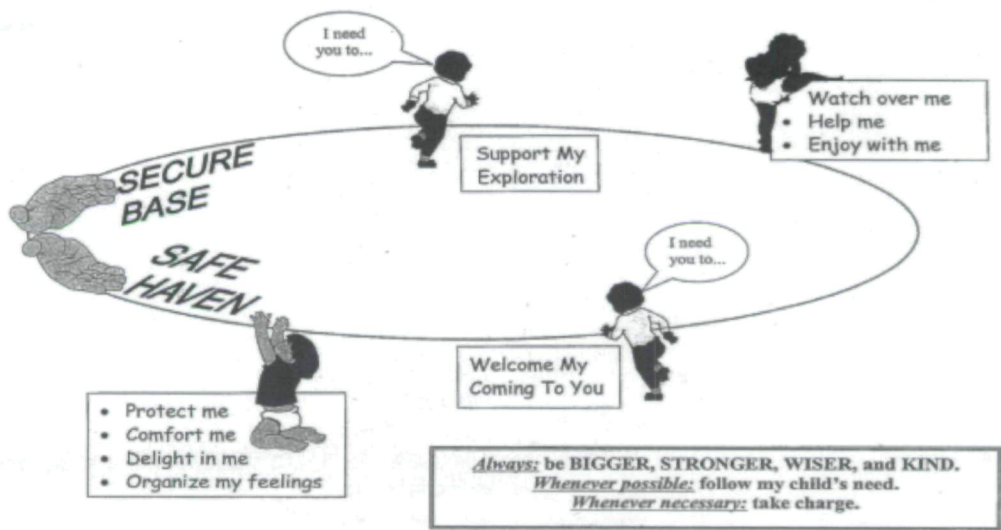
The project model was developed between 2002 and 2005 at Lady Gowrie Child Centre SA, adopting an action learning approach. During this stage, with funding from the Commonwealth Government, the centre worked with a highly skilled reference group to map out the project approach in detail. In 2005, with further funding under the 'Invest to Grow' strategy, the project was rolled out to five sites, to test the feasibility and rigour of the model. A comprehensive evaluation plan was established and an independent evaluator from the University of Adelaide engaged. The evaluation report has demonstrated that

very positive outcomes have been achieved for parents, children and staff involved in the project.

TtLG is unique in recognising the capacity of early childhood educators to support families during a therapeutic intervention. The model treats educators as equal partners and the early childhood component forms part of the intervention, rather than simply providing support for the program. With the health professional, educators engage with parents to assist them in achieving their goals while modelling relationship practices. To do this, educators must be consistently emotionally open and available (Dolby, 2007) and develop a secure and trusting relationship with the child. This is achieved through the child attending the early childhood setting two days per week and the use of a primary caregiving approach within participating centres. Early childhood care has never previously been used as an intervention in itself, placing this program in the forefront of innovation.

A letter from a mother affirms the role of the early childhood staff: '... [staff] were empathetic and supportive of the parents who attended. This was for me the best environment I could be in that allowed me to confront the past, the future, and the truths and embrace information and change'. The parent goes on to say, 'I now have the confidence, support and knowledge to know that whatever life throws our way, I am a bigger, stronger, wiser and kind mother'.

Figure 1. Circle of Security: Parent attending to the child's needs



What is attachment and why is it important for children?

Attachment theory was developed by John Bowlby in 1969 and provided a way to understand the nature of the mother/infant relationship. The quality of the attachment relationship forms the basis for emotional development. According to Bowlby, the foundations of emotional security are laid down in infancy (Harrison, 2003). In the early years this theory had some critics, as it was perceived as meaning that mothers were solely responsible for their infants, which flew in the face of the feminist movement focused on emancipation of women. For many, Bowlby's ideas were dismissed as 'mother blaming'. Subsequent work to develop attachment theory was undertaken by Ainsworth (1970s) and others which provided insights to how the theory could be used in a therapeutic way, moving beyond diagnosis.

The 'Circle of Security' project (Cooper, Hoffman, Marvin & Powell, 2000) has provided a very accessible model which has been utilised for TtLG. This model, called the 'Circle of Security' (see Figure 1), describes a child's needs in terms of attachment and exploration, and explains the adult's role in meeting those needs. Secure base behaviour, represented by the hands, refers to the balance between attachment (proximity) and exploration.

Attachment describes our unique human ability to form and maintain lasting relationships with others (Harrison, 2003, p. 1). Ideas of attachment theory suggest that children learn about themselves and others and how to manage their feelings as part of growing up in relationships. Once learned, they carry these patterns of relating and emotional regulation and re-enact them

in their relationships with other people (Dolby, 2003). An overwhelming body of research demonstrates that the quality of the relationship formed between caregivers and children in the very early years can have a significant impact on a child's later functioning (Honig, 2002). Securely attached infants have been shown to be more successful in peer relationship development, 'engage in more complex and creative play', and show positive outcomes on a range of mental health indicators (Manning-Morton, 2006, p. 47).

Research in brain development has demonstrated that the quality of interactions between an infant and caregiver in the first three years of life significantly affects the development of the brain and future physical, emotional and mental health (McCain & Mustard, 1999). This is especially important in the areas of vulnerability to stress and capacity for impulse control. The promotion of positive caregiver-child relationships in the early years has the potential to contribute significantly to each child developing to his or her optimum potential.

What does attachment research offer early childhood settings?

Lieberman (1993) observed that children in early childhood settings need a secure base from which to explore the environment. At home the secure base is the parent and in early childhood settings it is the primary caregiver for that child. A secure and consistent relationship through a secure base develops a child's sense of connection and belonging (Linke, 2010), a significant concept in light of the new 'Early Years Learning Framework' (EYLF) (DEEWR, 2009). Dolby (2007) has undertaken many

years of research, and maintains that early childhood programs are an important context where children learn about relationships and educators play an important role in connecting with children and their families.

Primary caregiving is a term commonly used to describe the means by which secure attachments are developed in early childhood settings. It links each child to one educator who assumes primary responsibility for their care (Lamb, 1998, cited in Davies, 2006). High-quality early childhood settings recognise children's need for secure relationships and assign a primary caregiver to each child and family in order to develop secure base behaviours (Lieberman, 1993). The relationship between the child and their primary caregiver is paramount and develops over time, involving both the child and their family. As part of TtLG, participating centres were required to develop and implement a primary caregiving approach.

The combination of responsive, warm and positive interactions, as well as continuity and consistency in the caregiving process, facilitates the development of secure attachment relationships. This reduces stress levels for children (Sims, 2003, cited in Murphy & Colmer, 2008; Lamb 1998, cited in Davies, 2006). Primary caregiving practices assist staff to promote a calm and supportive social environment which enhances children's involvement and wellbeing in early childhood settings. The primary caregiving model actively seeks to ensure communication is centred on the child through a partnership approach. This builds knowledge of the routines, interests, development and temperament of each child and the caregiving styles of the family.

According to Rolfe (1999) primary caregivers are able to take a special interest in the child and communicate closely with the family, leading to an in-depth knowledge of the child. It has long been recognised that early childhood settings need to work in partnership with families and should be 'in-step' with care routines provided by the family. 'Harmony between the way that families and early childhood professionals raise children is an important dimension aimed at enhancing child wellbeing' (Wise, 2007, p. 1). In particular, educators need to be familiar with the ideas and aspirations of parents, their specific approaches to parenting, home culture and language (Wise, 2007). This is especially important for TtLG families. The primary caregiving model has been found to reduce misunderstandings and promote non-judgemental attitudes, a significant factor in ensuring educators do not blame parents when children exhibit behavioural difficulties.

Implementing an attachment-based approach in early childhood settings

Educators each bring to their work their own relationship patterns and internal models of attachment. The quality

of the earliest relationship(s) depends on the educator's capacity to be emotionally available, consistent, sensitive and responsive to the child's needs. An attachment model provides a theoretical way to strive to understand children's behaviour, through insights into the reasons and manner of children's responses (Dolby, 2007). This is in contrast to the predominance of behaviourist theories common to early childhood. A key function of the attachment relationship is to help children learn to manage their feelings. Emotional regulation is the core experience from which children build skills such as independent learning and getting along with others (Dolby, 2003; Edwards, 2007).

The focus in a primary caregiving system is on child-centred routines. Educators are able to ensure the routines in their primary care group are managed in a way that meets the needs of each individual child. The program is focused on the development of consistent, predictable relationships which allow for primary caregivers and children to spend time together involved in experiences relevant to individual exploration and development. A child whose primary caregiver is able to spend a significant amount of time with them throughout the day is better able to settle into the early childhood setting.

Primary caregiving is not an 'exclusive' relationship, and fosters secure attachments, not 'clingy' relationships, with children and families. As a secure attachment with their primary caregiver is developed, a child will find it easier to become familiar with other staff and the environment. The process recognises that primary caregivers cannot be there all the time and enables a child to cope in their absence because they have developed a sense of security within the broader environment.

Does primary caregiving mean an additional role for educators or is it an enhancement of their existing role?

A key finding of TtLG has been that the primary caregiving approach calms the environment and reduces stress levels in early childhood settings. Primary caregiving makes the work of educators more rewarding and enjoyable as children are more settled and educators are able to meet their needs more effectively. Each relationship is built on multiple interactions between the primary caregiver and child, which happen through daily experiences and routines. These are subtle relationships, allowing children to build up an internal model which enables the predictability of relationships with others (Bowlby, 1969, cited in Manning-Morton, 2006, p. 47).

Children who consistently experience nurturing and responsive caregiving are more likely to explore their environment through play, using their caregivers as a secure base. Through primary caregiving, the educator develops a deeper understanding of each child and is able

to anticipate their needs, thus making it easier to meet these needs in a group environment. In this way, children will develop social competence and be attuned to the emotions of others (Colmer & Ebert, 2001). Children with secure attachments will express their emotions overtly and, although they experience distress on separation or when tired, hurt or hungry, they can be settled by a trusted caregiver.

The pervading impact of behaviourist theory approaches means it is common for adults to perceive children's behaviours negatively, as attention-seeking. In many busy early childhood settings this may indeed be the only way children will be noticed. Hoffman (2006) suggests that children's behaviours are actually motivated by a 'desire for connection'. Working from an attachment model requires the educator to look more deeply into the reason for behaviours (Flory, 2005). Primary caregiving enables educators to view all behaviour as a form of communication (Hoffman, 2006). The educator's role is to support each child in managing their feelings (Linke, 2010).

Many early childhood organisations claim to 'do primary caregiving' with little real understanding of what this means. Within a primary caregiving model, each child is allocated a caregiver before they start attending an early childhood setting, or before they move to a new room within that setting. Routines and day-to-day care tasks are individualised and production-line activities such as 'nappy-changing runs' do not occur. Primary caregivers respond to children's cues and behaviours to ensure that routine times become valuable opportunities for building relationships. There is a strong focus on the primary caregiver playing with their children. Through these measures, meaningful relationships are nurtured and play is more focused, with higher levels of involvement and enriched language-learning.

Educators monitor primary caregiving practices, constantly assessing the nature of their relationship with individual children. They also use the 'Circle of Security' (Cooper et al., 2000) to reflect on the relationship and to understand whether each child in their primary care group is using them as a secure base. Given the complexities of working within this model, educators must constantly reflect on their own practices and behaviours (Colmer, 2008), as they are responsible for the development of the relationship with the child. Children are not moved to another primary caregiver if there are difficulties, as it is in working through issues that a deeper and stronger relationship is developed.

The benefits for children

For children aged between one and three years, a key aspect of the attachment relationship is physical proximity. When working with infants and toddlers, the primary caregiver attends to the child's routine needs, including

changing, sleep and mealtimes, as well as playing with and talking to the child throughout the day and being with the child during times of strong emotion. This results in the child staying in close proximity while exploring, then returning to the primary caregiver. A child's attachment needs to evolve gradually, and older children are less concerned with physical proximity as they understand that their primary caregiver is emotionally available to them and they feel secure (Dolby, 2003).

For older children, the significance of their primary caregiver lies in the educator's role in helping children to manage their feelings. According to Dolby (2003, p. 5), children's maturity stems from a sense of security and knowing that the significant adults in their life can be counted on for understanding and support. The role of the educator is to assess situations where children experience difficulties with emotional regulation, understanding that such difficulties may be the result of children not being able to access an adult who is 'bigger, stronger, wiser and kind' (Cooper et al., 2000). Children are often frightened by their own feelings, and need to know that the adults caring for them will stay with them through their big emotions.

The securely attached preschooler is likely to enjoy friendships and interactions with peers and explore the world away from their caregivers for increasingly longer periods (Davies, 2006). The educator's role for all age groups is to follow the children's interests and interact with them throughout the day. The rich relationships created by the primary caregiving model allow educators to have a deeper understanding of children's motivations and interests, enabling them to more effectively plan for children's learning.

Practical considerations and challenges

At the heart of TtLG and primary caregiving is the need for continuity and stability in staffing, which is challenging in a climate of high attrition rates in early childhood. Approaches to staffing policies in early childhood settings need to be carefully planned in order to reduce turnover and the use of casual staff. Educators also need to be supported in understanding the importance of their role in caring for young children and the impact of their interactions. This brings further challenges within a field identified as having low professional identity.

Attachment theory and a primary caregiving model require ongoing professional development and opportunities for reflection, team dialogue and support, action research and management support. When educators undertake reflective practice, they carefully examine the context of their work—relationships, practices and understandings (knowledge and beliefs). Within the TtLG model, resources have been available to release staff for professional learning and mentoring.

Potential of early childhood communities to work with families

TtLG has demonstrated that early childhood settings have the potential to engage families in an ongoing way in the community. Educators are trusted by families and have the capacity to support them and to strengthen family relationships. Their unique skills combined with those of health professionals can result in positive outcomes for both children and their parents.

Through the Looking Glass

Within the evaluation report (Aylward, 2009), there was a high regard by families for the care and education received as part of the program, with particular emphasis on the relationships that had developed with the child's primary caregiver. For approximately 80 per cent of program participants, this relationship was so valuable in supporting their parenting that they continued using the early childhood service post-intervention. 'The Primary Care Giver system should be compulsory as it is better for the security of the child. Wow. Works well' (Aylward, 2009).

In conclusion, establishing a culture of primary caregiving and a broader understanding of attachment theory is essential to high-quality early childhood services. This requires ongoing training and commitment so that primary caregiving practices are ingrained in policy and practices (Aylward, 2009). Projects such as 'Through the Looking Glass' and services such as Gowrie SA have built capacity to adopt and deliver an integrated primary caregiving system, which supports families and improves outcomes for children.

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