

Background information

The Need for Secondary Attachment Figures in Childcare for general distribution.

Examining the causes of stress in babies and toddlers in group childcare.

Throughout human evolution, mothers have been helped to care for their young by members of the extended family. Some of these will have known the baby since birth and become secondary attachment figures, and their motivation to provide care would have come from shared attachment bonds. Then, the carer and baby would have had ready access to mother for feeding on demand and co-sleeping at night, and would usually have been within sight or earshot of her. Of course we don't have absolute scientific proof that this description is correct, but there's a very high probability that it is.

Scientific probability

Most of science is based on the *probability* of a theory being correct, and if a theory is still current after many years of critical investigation, there's a high probability that it *is* correct. Attachment theory has been attacked, praised and tested from many angles. It was first outlined in 1958 and nearly 50 years later it has emerged as the world's largest subject of academic research into child development - in October 2006 there were more than 500,000 sites listed on Google referencing "attachment-theory".

I grew up with attachment theory and since 1994 I've been studying it and gathering information from conferences and discussions with practitioners and academics. I'm not a scientist, but my father John Bowlby was, and attachment theory has been so thoroughly tested by scientists that there is now a very high probability of its being correct. My views are based mostly on scientific research findings and partly on circumstantial evidence.

Primary and secondary

The term primary attachment figure refers to the person with whom a child develops a lifelong emotional bond, and whom they most want to be with when they are frightened or hurt - usually but not necessarily their birth mother. The term secondary attachment figure refers to the few special people in children's lives with whom they have developed a close subsidiary or secondary attachment bond such as siblings, grandparents, nannies or childminders and especially fathers. Having three or more of these secondary attachment relationships usually increases children's resilience to stress and acts as a protective factor.

Secure and insecure attachment

Secure attachment is when children have a predictable and safe affectionate bond with their attachment figure (either the primary or a secondary). Securely attached infants aged between about 6 and 30 months are not usually affected by a few hours of separation a day from their primary attachment figure if they're being looked after by a person with whom they have developed a secure *secondary* attachment bond. When these carers are consistent, sensitive and responsive they can benefit toddlers' social and cognitive development and provide support to families. Children older than 36 months often benefit socially and cognitively from having about 2 or 3 hours a day of high quality pre-school nursery education.

Insecure attachment is when children have a less predictable bond with an attachment figure (either primary or secondary), and by itself insecure attachment is very difficult to identify unless the Strange Situation Procedure is employed. Insecure attachment is found in approximately 40% of toddlers in the UK and USA and is acknowledged as a risk factor that often contributes to the mental health problems of children and adults. Insecurely attached toddlers are less emotionally robust and more vulnerable to separation distress than securely attached toddlers.

Risk factors

Risk factors that contribute to emotional disturbance in children vary in their severity. Serious risk factors include being accommodated or looked after in care, having parents who are chronically neglectful or have a drug or alcohol problem, or who are abusive or violent. Childhood risk factors that are not as serious include parental depression, young unsupported parenthood and lack of parenting skills. The effects of these are exaggerated by poverty. Children with one or even two of the *less* serious risk factors may not appear to be too upset by them, but having three or more in combination is likely to result in significant emotional or behavioural problems. Another example of a risk factor is when children become *primarily* attached to a carer, who then leaves the family and the child's primary attachment bond is broken. The chances of becoming *primarily* attached to a *carer* are more likely:-

- when the baby starts being cared for before they're 6 months old
- when the carer spends more time with the baby than the primary attachment figure does
- when the carer is living in the baby's family home
- when the carer comforts the baby at night
- when the carer is unclear about relationship boundaries.

Attachment based childcare

One childcare model which can minimise the risk factors for babies and toddlers is attachment based childcare where, for instance, a family group allows a carer to provide age appropriate care for each child. The sort of features that distinguish attachment based childcare are:-

- that babies and toddlers between the ages of 6 and 30 months have access to a trusted secondary attachment figure whenever their primary attachment figure is not available to them
- that carers look after no more than three children well spaced in age: one aged 6 to 18 months, one between 18 and 36 months, and one over 36 months

that carers have sufficiently energy, and are trained and supported to meet the physical and emotional demands of the babies, toddlers and young children in their care

that babies' and toddlers' secondary attachment needs are met, maintained and monitored.

that carers' emotional attachment to the children they care for is sensitively supported and monitored

that parents are supported in maintaining their child's primary attachment bond to them.

Before starting in childcare, babies must already have formed a *primary* attachment bond to the person who's raising them long term (usually but not necessarily the birth mother) during the first 6 to 9 months of life. Even the most sensitive non-parental daycare is usually more stressful to babies and toddlers between 6 and 30 months, than home care with their primary attachment figure. However, having age appropriate amounts of daycare with a secondary attachment figure does not seem to constitute a significant long-term risk factor for either secure or insecure children. Note In particular circumstances some toddlers can benefit from daycare with a sensitive secondary attachment figure

Resistance

Attachment theory focuses on the quality of the loving bond between parents and children, and although the theory is widely accepted as being scientifically valid, there still remains a resistance to it in some quarters. I think this is partly due to the emotional nature of the childhood memories that may be awakened by studying it, and partly due to its implications for modern-day family life. One area that worries parents and researchers is that some babies are being looked after by unfamiliar carers and lack continuity in personalised care-giving.

Brain development

Babies and toddlers younger than about 30 months have the right hemisphere of their brain developing more rapidly and exerting more control over them than the left side of their brain. The right side is where intuitive skills develop which are needed for relationships, emotions, and the empathic understanding of another person's feelings. These unconscious skills are learned by babies and toddlers whilst experiencing them over and over again, and it's the quality of the relationships and the feelings they experience day after day that can have a significant influence on their developing brain. These formative early experiences cannot be consciously recalled by the child later on, because they occur during the pre-verbal phase of brain development.

By about 36 months, toddlers' brains have undergone a very significant change. The growth spurt of the right side of the brain has slowed down and the sensitive period for developing social and emotional intelligence has made way for a growth spurt on the left side instead. The left side of the brain then becomes dominant, and promotes the development of complex speech and the ability to remember past events and anticipate future ones.

Stress and cortisol.

Although cortisol is the stress hormone, normal levels are needed by the body for healthy functioning, and cortisol will rise and fall throughout the day depending on many different physiological and psychological factors. However, babies and toddlers have extremely fragile brains that are developing very rapidly, and some researchers are growing very concerned about babies and toddlers who have elevated levels of cortisol all day. Researchers worry that because babies' brains develop in response to the neurochemicals in their body, their brains may become adapted to high levels of cortisol, and this may be affecting children's ability to control their emotions and behaviour.

Group daycare

Researchers have found that many babies and toddlers have elevated levels of cortisol whilst experiencing certain forms of group daycare. The causes may include physiological stress from loud noises, minor accidents, conflicts and aggressive play, or from psychological stress if they lack continuity of personalised care-giving. Group daycare does not naturally lend itself to babies and toddlers developing an enduring secondary attachment bond to one carer. This may be because babies and toddlers have more than one carer providing their needs each day, and some carers may not have the time or inclination to form an attachment to a child, and some carers may be young and not intending to stay in post very long. Sometimes babies or toddlers do form attachments but policy may require babies to move to new groupings, or for carers to be moved to other duties. If this happens too frequently the pain of loss can make babies reluctant to form a secondary attachment bond to another carer. The combination of both physiological and psychological stress may account for the elevated levels of cortisol associated with some centre based group daycare.

Note The occasional loss of a secondary attachment figure need not be too distressing to a toddler if sensitively handled, but regular swapping of carers to prevent any attachment bond developing can be a risk factor.

Separation anxiety

Babies and toddlers between the age of 6 and 30 months who do not receive sensory evidence (sight, sound, touch, smell or taste) that any of their known and trusted attachment figures are present, will have an instinctive feeling that the situation is becoming dangerous. This will induce some level of fear and raise their cortisol levels. At this age their emergency response to fear is flight-towards an attachment figure, and the longer there is no sensory input from a trusted attachment figure, the greater the level of danger sensed, especially if the surroundings are not very familiar.

When left by their primary attachment figure, most babies and toddlers who have not had the opportunity to develop a secondary attachment to one carer, will initially protest by crying and searching for their attachment figure. When this does not result in reunion, the instinctive reaction of some babies and younger toddlers is to become a bit subdued or withdrawn, (although others appear to manage better). This compliant behaviour is usually seen as the toddler settling in and accepting their new surroundings, but their level of cortisol is often elevated which indicates that they're stressed, and if they then sense danger some may 'freeze' or 'still'. This situation is more common in group settings which lack continuity in personalised care-giving.

Note This reminds me of toddlers in the 1950's when they were left in hospital without an attachment figure.

Securely attached

When securely attached babies and toddlers are eventually reunited with their primary attachment figure, and receive enough time and sensitive attention, they are usually able to be sufficiently comforted that their cortisol level returns to normal before bedtime, and in the morning the cycle can start again. Without additional risk factors, securely attached babies and toddlers appear to tolerate this cycle of daily separation and repair without noticeable long term effects. Nevertheless childcare in the absence of an attachment figure is likely to be a risk factor which usually goes undetected, increasing children's vulnerability to the impact of any additional risk factors they may experience later on.

Insecurely attached

Some babies and toddlers who are insecurely attached to their primary attachment figure and experience long periods without access to an attachment figure may have continuously elevated levels of cortisol. When they are reunited with their primary attachment figures, the insecurity in the relationships may prevent some of these babies and toddlers from being adequately comforted, and their cortisol level may not be returned to normal before bedtime. By morning the cortisol level may still be elevated and the cycle continues.

Two risk factors

Toddlers have a risk factor if they are insecurely attached to their primary attachment figure; some securely attached toddlers in group daycare without an attachment figure present may have a risk factor. If toddlers are both insecurely attached *and* have no access to an attachment figure they may be experiencing two risk factors that are difficult to detect *individually*, but which acting together produce small but noticeable increases in aggressive and disruptive behaviour.

Three risk factors

A third risk factor to children is insensitively handled parental separation. If it's well handled it can usually be tolerated by securely attached children if they have no other risk factors. But if insecure attachment is added to regular care without an attachment figure, and then there is family breakdown as well, the three risk factors acting together will usually overwhelm children, and can result in the sort of behavioural and emotional problems we are increasingly seeing today. It's worth noting that these attachment risk factors impact children's ability to make stable relationships.

Conclusions

My final conclusions are as follows. Many toddlers' receive a risk factor at home from insecure attachment, and another risk factor from any sort of childcare where there is not a 'good enough' secondary attachment figure. These two risk factors are becoming normalised within society and are hidden contributors to children's future social and emotional problems. A combination of three or more risk factors has a high probability of producing increased levels of behavioural problems and emotional instability.

By reorganising childcare to provide secondary attachment bonds for babies and toddlers we can remove one increasingly common risk factor. Several childminders can work co-operatively in professionally supported and monitored groups or networks; parents could be allowed to use their childcare allowance to pay grandmother or other relative to care for their child, or a parent could choose to use the allowance to stay home themselves.

In a society which encourages both parents to work outside the home while their children are under three, it is attachment focused childcare arrangements that have a crucial role to play in facilitating the healthy emotional development of children.

It is in our power to provide this if we care enough about our children's wellbeing. It can be done!

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